

Assessment Strategy for Evidence-Based Practice

Assignment title:

Critical Practice: Improving my area of practice through the critical appraisal of research evidence.

Topic: Critical Appraisal of Improving Psychiatric Nursing Practice through Cognitive Behavioral Therapy (CBT) in a Hospital Ward.

Word count: 3560

香港醫療論文輔導中心 HKMTGC 版權所有 All Rights Reserved

Critical Appraisal of Improving Psychiatric Nursing Practice through Cognitive Behavioral Therapy (CBT) in the Inpatient Psychiatric Ward in Hong Kong

Introduction

Taking care of patients in a psychiatric ward who are receiving treatment for various health problems, such as anxiety and depression, is something I have done for approximately 12 years. My responsibilities at work include exam preparation and delivering therapeutic strategies alongside healthcare partners for comprehensive, evidence-based care. The well-proven, evidence-based technique of cognitive Behavioral Therapy (CBT) has shown effectiveness in treating anxiety and depression (Pan and Rafi 2025). The treatment method of CBT online or in person leads to improved patient outcomes because it allows the identification and modification of maladaptive thoughts and behaviours in patients (Wong et al. 2021).

This paper seeks to research the perceptions of nurses and whether the incorporation of Cognitive Behavioral Therapy as an intervention for anxiety or depression is effective. The choice of CBT as an intervention is because it is a well-regarded psychotherapy, often recommended as a first-line treatment, and research consistently shows that CBT can lead to significant improvements in symptoms and overall well-being for many individuals (David et al. 2018; Hassan Kariri and Almubaddel 2024; Kadesjö Banck and Bernhardsson 2020). In the study by Pan and Rafi (2024) with 402 participants with mild-moderate depression, the authors delivered Internet-based cognitive behavioural therapy (iCBT) through apps or the web and compared them to controls who only waited to receive

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

and the rates of response and remission were high, along with a good level of module completion.

The World Health Organization highlights that anxiety and depression disorders are the world's most common mental disorders and the most highly effective treatment include psychological interventions (World Health Organization 2023). Rising mental health service requirements, along with resource constraints, have driven increased research

for the population (Pan and Rafi, 2025; Wong et al., 2021).

Qualitative Research Question

What are the perceptions of nurses in psychiatric care in a hospital ward regarding the integration and effectiveness of Cognitive Behavioral Therapy for treating anxiety and depression in patients receiving psychiatric care?

The proposed research analyses nurses working in psychiatric care (P) viewpoints about Cognitive Behavioral Therapy in person or online (I) implementation along with its effectiveness for patients receiving psychiatric care for depression and anxiety (O), with no direct comparative aspect (C) throughout a 3–4-month study period (T). The qualitative article selected to answer this research question is Wong et al. (2021).

Quantitative Research Question

How does the incorporation of Cognitive Behavioral Therapy (CBT) affect the severity of anxiety and depression symptoms in individuals receiving psychiatric care in a hospital ward?

This study examines the impact of implementing Cognitive Behavioral Therapy (CBT) (I) on anxiety and depression symptom severity (O) in patients receiving psychiatric care (P) in a hospital ward through comparison with traditional care or no treatment (C) while using

Beck Depression Inventory-II (BDI-II) and Patient Health Questionnaire-9 (PHQ-9). The quantitative article used to answer this research question is Pan and Raf (2024).

Finding and Critiquing Research

Search Strategy

The research method used Google Scholar to identify and evaluate one qualitative and one quantitative study (Wong et al. 2021; Pan and Raf 2024). Two research papers were chosen to evaluate Cognitive Behavioral Therapy (CBT) delivery in Hong Kong psychiatric nursing practice for treating anxiety and depression. The following is the complete list of search terms together with the execution strategy:

- **Qualitative study:** The qualitative research methodology focused on phenomenological and ethnographic approaches because these methods enable exploration into CBT-related perceptions and experiences of nurses in psychiatric care alongside other stakeholders.
- **Quantitative study:** Randomised controlled trials (RCTs), cohort studies and surveys were reviewed to determine whether CBT, started in person or online, helps to reduce anxiety and depression.

Search Terms

Table 1 shows the Boolean operator strategy underlying research article identification regarding Cognitive Behavioral Therapy (CBT) in psychiatric nursing and mental health care in Hong Kong. The research used Boolean operations to join search terms that

Table 1: Boolean Operators

Search Index	Search Terms
Title / Abstract/full text	"Cognitive Behavioral Therapy" OR "CBT" AND "psychiatr*" AND "Hong Kong"
AND	"CBT" AND "anxiet*" AND "depress*" AND "Hong Kong"
AND	"Cognitive Behavioral Therapy" AND "psychiatr*" AND "mental health"
AND	"Cognitive Behavioral Therapy" AND ("anxiet*" OR "depress*") AND "psychiatric settings" AND "Hong Kong"
Additional search terms for Q2	"Qualitative study" OR "lived experiences" OR "perceptions" OR "attitudes" OR "views" OR "phenomenolog*"

The research strategy centred on identifying academic works about Cognitive Behavioral Therapy (CBT) in psychiatric nursing and mental healthcare practices across Hong Kong. Google Scholar was the search database, prioritising recent research articles from the previous five years to obtain up-to-date evidence. Research used the "CBT" coupled with

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

studies on Cognitive Behavioral Therapy within Hong Kong psychiatric nursing facilities were selected through a relevant screening of existing research articles.

The selection criteria will define criteria such as reviewing articles from the last five years, written in English language, that are peer-reviewed and conducted in Hong Kong. These standards will exclude studies that do not focus on CBT and those that have used systematic reviews as their methodology. Using the selected criteria will guarantee that the research chosen is suitable and relevant for addressing the research questions for this project.

Table 2: Search Terms Used in Google Scholar for CBT Studies

Search Term	Google Scholar
"Cognitive Behavioral Therapy" OR "CBT" AND "psychiatric nursing" AND "Hong Kong"	463
"CBT" AND "depression" AND "anxiety" AND "Hong Kong"	6250
"Cognitive Behavioral Therapy," AND "psychiatric nursing," AND "mental health"	5010
"Cognitive Behavioral Therapy" AND "anxiety" OR "depression" AND "Hong Kong"	8930
"Cognitive Behavioral Therapy" AND "mental health" AND "Hong Kong hospitals"	3
"CBT" AND "psychotherapy" AND "Hong Kong" AND "patients"	3470

Appraising the Studies

The author used the CASP Qualitative Checklist to analyse Wong et al. (2021) and the CASP RCT Checklist to study Pan and Rafi (2024). Wong et al. (2021) applied a qualitative design to learn about the experiences of nurses in psychiatric care who used CBT with

[REDACTED]

[REDACTED]

[REDACTED]

significant contribution to the field by addressing an essential research question with clarity and methodological rigour. One of the primary strengths of this research is its focused approach. The authors concentrated on a straightforward question, effectively

streamlining the inquiry process and allowing for a thorough exploration of the topic at hand. This clarity enhances the study's relevance and ensures that the findings can be directly applicable to practitioners in the field (Kram et al. 2023). Ethical considerations are paramount in research, and the study's receipt of ethics approval underscores its commitment to maintaining high ethical standards. There is also a clear participant

[REDACTED]

suggests that reflexivity is an essential aspect and while bracketing statements help reduce bias, member checking is also crucial in validating findings (Olmos-Vega et al. 2022).

In the quantitative research by Pan and Rafi (2024), they randomised 402 participants who were hospital inpatients to receive web-based iCBT, iCBT on an app, or to be placed on a waitlist control group. Participants completed the BDI-II and PHQ-9 at baseline, eight weeks, and three and six months after the study began. Strong methods are shown by

[REDACTED]

This enhances internal validity by reducing selection bias and ensuring comparability between groups at baseline (Das et al. 2019). The authors accounted for all the participants who entered the study, and this was transparently reported using a CONSORT

diagram. The flow of participants from recruitment and randomisation to follow-up and analysis was well documented. The study experienced some attrition (approximately 20%), which is common in digital health interventions. However, the authors applied both intention-to-treat and per-protocol analyses to ensure the robustness of the findings. They also explored reasons for dropout, enhancing transparency. Blinding of participants and intervention providers was not feasible due to the nature of the [REDACTED]

0.95) showed significant effects that persisted over time.

Pan and Rafi (2024) evaluated depressive symptoms using the Beck Depression Inventory-II and the 9-item Patient Health Questionnaire (PHQ-9); they also measured other secondary outcomes with the 12-item General Health Questionnaire (GHQ-12), the [REDACTED]

The intervention showed clear benefits in reducing depressive symptoms with no reported harm. As a digital therapy, the iCBT program is low-cost, scalable, and feasible for public

health systems, especially those facing workforce shortages or stigma-related service barriers (Pan and Rafi 2024; Li et al. 2020).

Discussion

Research by Wong et al. (2021) and the study by Pan and Rafi (2024) present well-designed research on Cognitive Behavioral Therapy in Hong Kong hospitals. The study demonstrates methodological rigour through robust methods and offers strong evidence supporting the use of CBT for depression and anxiety in patients receiving psychiatric care.

Wong et al. [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

when support is not always available.

Essentially, Pan and Rafi (2024) investigated CBT online, emphasising its benefits in inpatient treatment. The authors used a sample of 402 patients and found that CBT delivered online made a significant positive difference in their depression and anxiety. Scores on BDI-II and PHQ-9 signs of depression and anxiety were substantially better and larger at the end of 8 weeks, with effect sizes of $d = 1.07-1.15$ for BDI-II and $d = 0.78-0.95$ for PHQ-9. The results suggest that CBT done online is just as helpful for people with depression and anxiety. Their research emphasises that the success of online CBT relies

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]. Some

groups in the community face considerable difficulties due to a lack of reliable internet and not knowing how to use computers (Nomeikaite et al. 2023). Traditional face-to-face CBT doesn't require online tools so that more patients can use this approach (Pan and Rafi 2024). However, it does have its problems, mainly because in a psychiatric ward with many patients and little time, some may receive delayed treatment. This means using a system that links face-to-face and online therapy is likely the most effective, allowing every patient to take part no matter the available means.

Key Challenges in CBT Implementation

These findings emphasise the need to address the problems that can interfere with CBT treatment in any format. Issues regularly highlighted include unskilled staff, a lack of



platforms. When CBT occurs in a face-to-face session, healthcare professionals have to be good at building strong therapeutic relationships with patients. Training psychiatric nurses in both applications would allow them to deliver effective CBT interventions (Nakao et al. 2021, Li et al. 2020).

Regular monitoring helps ensure that the treatment is administered correctly. Supervision allows nurses to get feedback on their CBT work and overcome any problems they experience.

Combining in-person sessions with online-delivered CBT offers a flexible and effective approach to mental health care. This hybrid model allows patients to access therapy in a way that best suits their individual needs and circumstances. For individuals living in

remote areas or those with mobility issues, online CBT can provide access to therapy that might otherwise be unavailable. Furthermore, healthcare providers can manage their time and resources more effectively by offering both formats. This can lead to better scheduling

care has been shown to be effective. Its success depends on addressing the barriers nurses in psychiatric care face and providing them with comprehensive training, supervision, and support. In addition, using a combination of in-person and online sessions for CBT provides a comprehensive approach to therapy that can enhance patient care, improve accessibility, and ensure that individuals receive the support they need in a manner that fits their lifestyles.

Action Plan

Research has repeatedly shown that Cognitive Behavioral Therapy whether in-person or online is highly effective in treating mental health problems among patients receiving psychiatric care, mainly for managing anxiety and depression (Kadesjö Banck and Bernhardsson 2020). The results from Wong et al. (2021) and Pan and Rafi (2024) highlight that clear nurse responsibilities and therapist assistance allow culturally adapted iCBT to be introduced on a broader scale. Thus, the action plan will add targeted nurse training (Wong et al. 2021) to the introduction of the CANDO platform (Pan and Rafi 2024).

FAME Model Evaluation

Feasibility

Cognitive behavioural therapy (CBT) is a promising strategy for implementation in psychiatric nursing practice, whether in person or online. The study by Pan and Rafi (2025) demonstrated that a culturally adapted, guided internet-based CBT program could be

[REDACTED]

time pressure, and insufficient supervisory help. This shows that extra time for learning and continued mentorship will benefit nurses. The available time for nurses to receive training might be a significant barrier because their workloads consume most of their time (AlHadi et al., 2021). A group CBT approach for patients may decrease each patient's session time. The evidence-based benefits of CBT across various settings support its practical implementation (Pan and Rafi 2025).

Appropriateness

Evidence shows that CBT helps treat anxiety and depression in psychiatric care. Wong et al. (2021) outlined nurses' successes and difficulties with CBT, and Pan and Rafi (2024) found that it is beneficial and suitable in the settings of Chinese hospitals. The people of Hong Kong increasingly accept non-drug forms of mental healthcare as essential to

[REDACTED]

reflects a growing preference for non-pharmacological treatments in managing mental health conditions. With its proven effectiveness and minimal side effects, CBT offers a

valuable alternative that empowers individuals to take charge of their mental health. As awareness of mental health continues to grow, the demand for effective, non-pharmacological treatments like CBT is likely to increase (Nakao et al. 2021; Suen et al. 2025; Gkintoni et al. 2025).

The ability of CBT to adapt across different cultural backgrounds makes this psychotherapy appropriate in various contexts. The paper by Pan and Rafi (2025) demonstrates the successful application of culturally adjusted CBT for Hong Kong patients, proving that therapy works well with local cultural backgrounds.

Meaningfulness

The psychiatric ward can significantly benefit from the application of Cognitive Behavioral Therapy, particularly as an adjunct to traditional care models. The majority of patients receiving psychiatric care often present with conditions such as depression, anxiety, psychosis, or trauma-related disorders diagnoses for which CBT has demonstrated consistent efficacy across studies (Pan and Rafi 2024; Wong et al. 2021). The clinical approach of CBT functions to address underlying mental health causes so that

[REDACTED]

Effectiveness

Studies have shown that CBT can help treat anxiety and depression in individuals with mental health issues. It was found in Pan and Rafi's (2024) study that web- and app-based

iCBT led to large reductions in depressive symptoms and significant decreases in anxiety for eight weeks, and these benefits remained after three and six months. This study's

effectiveness of the CBT and the psychiatric healthcare care team in the hospital ward could incorporate this approach as part of the care model or relapse prevention strategies, maximising reach and outcomes without overwhelming limited clinical resources.

Conclusion

This essay critically appraised the integration of Cognitive Behavioral Therapy (CBT) into psychiatric nursing practice in Hong Kong using two high-quality studies. The findings demonstrate that both in-person and internet-based CBT (iCBT) are effective, culturally appropriate, and feasible interventions for treating anxiety and depression among

quantitative and qualitative approaches should be implemented in studies became clear.

Reference list

AlHadi, A., AlGhofili, H., Almujaivel, N., Alsweirky, H., Albeshr, M. and Almogbel, G. (2021) Perception and barriers to the use of cognitive-behavioral therapy in the treatment of depression in primary healthcare centers and family medicine clinics in Saudi Arabia. *Journal of Family and Community Medicine*, 28 (2), p. 77. 10.4103/jfcm.jfcm_494_20.

[REDACTED]

Hassan Kariri, H.D. and Almubaddel, A. (2024) From theory to practice: Revealing the real-world impact of cognitive behavioral therapy in psychological disorders through a dynamic bibliometric and survey study. *Heliyon*, 10 (18). 10.1016/j.heliyon.2024.e37763.

Kadesjö Banck, J. and Bernhardsson, S. (2020) Experiences from implementation of internet-delivered cognitive behaviour therapy for insomnia in Psychiatric Health Care: A

qualitative study applying the NASSS framework. *BMC Health Services Research*, 20 (1). 10.1186/s12913-020-05596-6.

Kram, J.J., Sullivan Vedder, L., Fay, B. and Simpson, D. (2023) A clear, succinct research question portends the rest of the story. *Journal of Patient-Centered Research*

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

techniques and technologies. *BioPsychoSocial Medicine*, 15 (1). 10.1186/s13030-021-00219-w.

Nomeikaite, A., Gelezelyte, O., Berger, T., Andersson, G. and Kazlauskas, E. (2023) Exploring reasons for usage discontinuation in an internet-delivered stress recovery intervention: A qualitative study. *Internet Interventions*, 34, p. 100686. 10.1016/j.invent.2023.100686.

Olmos-Vega, F.M., Stalmeijer, R.E., Varpio, L. and Kahlke, R. (2022) A practical guide to reflexivity in Qualitative Research: Amee guide no. 149. *Medical Teacher*, 45 (3), pp. 241–251. 10.1080/0142159x.2022.2057287.

Pan, J.-Y. and Rafi, J. (2025) Culturally adapted guided internet-based cognitive behavioral therapy for Hong Kong people with depressive symptoms: Randomised

[REDACTED]

[REDACTED]

10.1080/0142159x.2018.1432850.

Suen, Y.N., Hui, C.L., Lei, L.K., Leung, C.M., Wong, S.M., Lai, G.C., Chau, E.H., Wong, M.T., Chan, S.K., Wong, G.H. and Chen, E.Y. (2025a) Low-intensity online intervention for mental distress among help-seeking young people in Hong Kong. *JAMA Network Open*, 8 (1). 10.1001/jamanetworkopen.2024.54675.

Suen, Y.N., Hui, C.L., Lei, L.K., Leung, C.M., Wong, S.M., Lai, G.C., Chau, E.H., Wong, M.T., Chan, S.K., Wong, G.H. and Chen, E.Y. (2025b) Low-intensity online intervention for mental distress among help-seeking young people in Hong Kong. *JAMA Network*

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Primary Care Settings. *Cognitive and Behavioral Practice*, 21 (3), pp. 247–251.

10.1016/j.cbpra.2014.04.002.

WONG, C.P., FONG, D.Y., WANG, M.P. and WONG, J.Y. (2021) Positive experience and

[REDACTED]

[REDACTED]

[REDACTED]

Health Organization, 17 June. Available: <https://www.who.int/news-room/fact-sheets/detail/anxiety-disorders> [Accessed: 23 May 2025].

香港醫療論文輔導中心 HKMTGC 版權所有 All Rights Reserved