

EDITORIAL

In these days, shortly after the Spring Equinox, which symbolises rebirth and growth, we are increasingly experiencing four seasons in one day in a rapid cycle. As one day and one night become the same in each hemisphere, we welcome the spring that is coming. None of us are immune from being exposed to the effects of nature. External environmental conditions have a strong effect on what we tolerate or do not tolerate at times. While the significance of the equinox is attributed to the irregularities and changes of the circadian rhythm in relation to mental disorders, what do we encounter when we have adapted to the daily professional context as a metaphor?

Considering that the development of a mental disorder in one in two people at any point in life in a recent study published in the Lancet (McGrath et al., 2023) re-emphasises the importance of person-centered care and preventative strategies. If we extrapolate from the equinox metaphor to the current structure within the duality of psychiatric nursing and clinical practice as two sides of the same coin, are psychiatric nursing education and clinical practice experiencing an innovation equivalent to the spring equinox? And were education and practice ever of equal value side by side? Do they overlap?

Following Maslow's hierarchy of needs theory, which is used to assess the current state of the nursing profession, many scientific studies and projects are listed in which innovative strategies such as artificial intelligence, smartphone apps, and virtual reality are being tested, while the inadequacies in terms of situation and organisation in the implementation of basic tasks persist. The result is not surprising, as the study findings are far from the reality of clinical areas and also include popular concepts and innovations. However, how they can be read and adapted under current conditions is puzzling. The more successfully research findings can be integrated into clinical practice and thus patient care, and the more the evidence base is adopted and disseminated, the more we will have complementary education and practice frameworks fuelled by the regenerative effect of the equinox.

In professional life, as the International Council of Nurses (ICN, 2024) states, we need comprehensive guides that reflect our local realities and involve all stakeholders, especially those who receive and deliver the service. Thanks to these guides, we will be able to develop strong mental health policy that aligns consistent, skilled, and innovative research with strategic plans and educational frameworks. The dynamic nature of mental health and psychiatry shows us the importance of continuous and complementary research. As nurses, it is our role to lead and contribute to research aimed at improving mental health nursing practice. In future issues of our journal, we hope to feature studies that complement each other in education and practice, coincide with the equinox, and whose sustainable effects and outcomes prioritize and improve individual and societal benefits are adopted by clinicians. Enjoy reading this chapter.

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