

CADTH RAPID RESPONSE REPORT: REFERENCE LIST

Qualitative Research on Dialectical Behaviour Therapy for Borderline Personality Disorder: A Reference List

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Research Questions

1. What evidence is available on the perspectives and experiences of people with borderline personality disorder, their family and friends, and those involved in their lives and their care, on accessing and receiving treatment for their conditions?
2. What evidence is available on the perspectives and experiences of people with borderline personality disorder, their family and friends, and those involved in their lives and their care, on engaging with dialectical behaviour therapy for the treatment of their condition?

Key Findings

Twenty-one primary qualitative studies,¹⁻²¹ one mixed-method study,²² and three qualitative meta-syntheses²³⁻²⁵ addressed the experiences of people with borderline personality disorder, their family and friends, and those involved in their lives and their care, on accessing and receiving treatment for their conditions.

Five primary qualitative studies²⁶⁻³⁰ and one mixed-method study³¹ addressed the experiences of people with borderline personality disorder and those involved in their care on engaging with dialectical behaviour therapy for the treatment of their condition.

Methods

Literature Search Methods

A limited literature search was conducted by an information specialist on key resources including MEDLINE, PsycINFO, and Cumulative Index to Nursing and Allied Health Literature (CINAHL). The search strategy was comprised of both controlled vocabulary, such as the National Library of Medicine’s MeSH (Medical Subject Headings), and keywords. The main search concept was borderline personality disorder. Search filters were applied to limit retrieval to qualitative studies. The search was also limited to English language documents published between January 1, 2010 and September 30, 2020. Internet links were provided, where available.

Selection Criteria

One reviewer screened literature search results (titles and abstracts) and selected publications according to the inclusion criteria presented in Table 1. Full texts of study publications were not reviewed.

Table 1: Selection Criteria

Sample	Adults with borderline personality disorder and people involved in their lives and their care (e.g., family, friends, social services, police)
Phenomenon of Interest	Accessing and undergoing dialectical behaviour therapy for borderline personality disorder
Design	Any qualitative design
Evaluation	Perspectives on accessing and undergoing treatment for BPD; expectations of treatment for BPD; experiences of DBT for BDP; experiences of those with BDP and other mental health comorbidities (e.g., substance use, depression); systematic barriers to accessing or receiving treatment for BDP (e.g., SES, lack of housing)

Research type

Primary qualitative studies or qualitative component of mixed method studies; qualitative meta-synthesis

Results

A total of 1,005 citations were retrieved from the literature search.

Twenty-one primary qualitative studies,¹⁻²¹ one mixed-method study,²² and three qualitative meta-syntheses²³⁻²⁵ addressed the experiences of people with borderline personality disorder, their family and friends, and those involved in their lives and their care, on accessing and receiving treatment for their conditions.

Five primary qualitative studies²⁶⁻³⁰ and one mixed-method study³¹ addressed the experiences of people with borderline personality disorder and those involved in their care on engaging with dialectical behaviour therapy for the treatment of their condition.

Primary Qualitative Studies

Research Question 1

1. Barr KR, Townsend ML, Grenyer BFS. Using peer workers with lived experience to support the treatment of borderline personality disorder: a qualitative study of consumer, carer and clinician perspectives. *Borderline Personal Disord Emot Dysregul.* 2020;7:20.
[PubMed: PM32884819](#)
2. Patel D, Konstantinidou H. Prescribing in personality disorder: patients' perspectives on their encounters with GPs and psychiatrists. *Fam Med Community Health.* 2020 Sep;8(4).
[PubMed: PM32958520](#)
3. Bond B, Wright J, Bacon A. What helps in self-help? A qualitative exploration of interactions within a borderline personality disorder self-help group. *J Ment Health.* 2019 Dec;28(6):640-646.
[PubMed: PM28857639](#)
4. Carrotte E, Hartup M, Blanchard M. "It's very hard for me to say anything positive": A qualitative investigation into borderline personality disorder treatment experiences in the Australian context. *Aust Psychol.* 2019;54(6):526-535.
<https://doi.org/10.1111/ap.12400>
5. Folmo EJ, Karterud SW, Kongerslev MT, Kvarstein EH, Stånicke E. Battles of the Comfort Zone: Modelling Therapeutic Strategy, Alliance, and Epistemic Trust—A Qualitative Study of Mentalization-Based Therapy for Borderline Personality Disorder. *J Contemp Psychother.* 2019;49(3):141-151.
<https://doi.org/10.1007/s10879-018-09414-3>
6. Katsakou C, Pistrang N, Barnicot K, White H, Priebe S. Processes of recovery through routine or specialist treatment for borderline personality disorder (BPD): a qualitative study. *J Ment Health.* 2019 Dec;28(6):604-612.
[PubMed: PM28675714](#)

7. Morken KTE, Binder PE, Arefjord N, Karterud S. Juggling thoughts and feelings: How do female patients with borderline symptomology and substance use disorder experience change in mentalization-based treatment? *Psychother Res*. 2019 02;29(2):251-266.
[PubMed: PM28513339](#)
8. Mortimer-Jones S, Morrison P, Munib A, et al. Staff and client perspectives of the Open Borders programme for people with borderline personality disorder. *Int J Ment Health Nurs*. 2019 Aug;28(4):971-979.
[PubMed: PM31081282](#)
9. Ng FYY, Carter PE, Bourke ME, Grenyer BFS. What Do Individuals With Borderline Personality Disorder Want From Treatment? A Study of Self-generated Treatment and Recovery Goals. *J Psychiatr Pract*. 2019 03;25(2):148-155.
[PubMed: PM30849065](#)
10. Pigot M, Miller CE, Brockman R, Grenyer BFS. Barriers and facilitators to the implementation of a stepped care intervention for personality disorder in mental health services. *Personal Ment Health*. 2019 11;13(4):230-238.
[PubMed: PM31411004](#)
11. Vandyk A, Bentz A, Bissonette S, Cater C. Why go to the emergency department? Perspectives from persons with borderline personality disorder. *Int J Ment Health Nurs*. 2019 Jun;28(3):757-765.
[PubMed: PM30779279](#)
12. Helleman M, Lundh LG, Liljedahl SI, Daukantaite D, Westling S. Individuals' experiences with brief admission during the implementation of the brief admission skane RCT, a qualitative study. *Nord J Psychiatry*. 2018 Jul;72(5):380-386.
[PubMed: PM29703119](#)
13. Lundahl A, Helgesson G, Juth N. Psychiatrists' motives for practising in-patient compulsory care of patients with borderline personality disorder (BPD). *Int J Law Psychiatry*. 2018 May - Jun;58:63-71.
[PubMed: PM29853014](#)
14. McCusker L, Turner ML, Pike G, Startup H. Meaningful Ways of Understanding and Measuring Change for People with Borderline Personality Disorder: A Thematic Analysis. *Behav Cogn Psychother*. 2018 Sep;46(5):528-540.
[PubMed: PM29455697](#)
15. Wlodarczyk J, Lawn S, Powell K, et al. Exploring General Practitioners' Views and Experiences of Providing Care to People with Borderline Personality Disorder in Primary Care: A Qualitative Study in Australia. *Int J Environ Res Public Health*. 2018 12 06;15(12):06.
[PubMed: PM30563256](#)

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[PubMed: PM28488379](#)
 17. Hughes ME, Bass M, Bradley M, Hirst-Winthrop S. A qualitative exploration of the experience of community mental health clinicians working with people with borderline personality disorder in the context of high risk of suicide or self-harm. *Couns Psychol Rev*. 2017 Sep;32(3):14-25.
 18. Lohman MC, Whiteman KL, Yeomans FE, Cherico SA, Christ WR. Qualitative Analysis of Resources and Barriers Related to Treatment of Borderline Personality Disorder in the United States. *Psychiatr Serv*. 2017 02 01;68(2):167-172.
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[PubMed: PM26360788](#)
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<https://doi.org/10.1080/18387357.2015.1065554>
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[PubMed: PM25944765](#)
- Research Question 2*
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[PubMed: PM31488804](#)
 23. Carmel A, Torres NI, Chalker S, Comtois KA. Interpersonal barriers to recovery from borderline personality disorder: A qualitative analysis of patient perspectives. *Personal Ment Health*. 2018 02;12(1):38-48.
[PubMed: PM29024577](#)
 24. Russell S, Siesmaa B. The experience of forensic males in dialectical behaviour therapy (forensic version): A qualitative exploratory study. *J Forensic Pract*. 2017;19(1):47-58.
<https://doi.org/10.1108/JFP-01-2016-0003>
 25. Roscoe P, Petalas M, Hastings R, Thomas C. Dialectical behaviour therapy in an inpatient unit for women with a learning disability: Service users' perspectives. *J Intellect Disabil*. 2016 Sep;20(3):263-280.
[PubMed: PM26514772](#)

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[PubMed: PM26465757](#)

Primary Mixed-Method Studies

Research Question 1

27. Dickens GL, Lamont E, Mullen J, MacArthur N, Stirling FJ. Mixed-methods evaluation of an educational intervention to change mental health nurses' attitudes to people diagnosed with borderline personality disorder. *J Clin Nurs*. 2019 Jul;28(13-14):2613-2623.
[PubMed: PM30830704](#)

Research Question 2

28. Flynn D, Joyce M, Gillespie C, et al. Evaluating the national multisite implementation of dialectical behaviour therapy in a community setting: a mixed methods approach. *BMC Psychiatry*. 2020 May 14;20(1):235.
[PubMed: PM32410670](#)

Qualitative Syntheses

Research Question 1

29. Stapleton A, Wright N. The experiences of people with borderline personality disorder admitted to acute psychiatric inpatient wards: a meta-synthesis. *J Ment Health*. 2019 Aug;28(4):443-457.
[PubMed: PM28686468](#)
30. Katsakou C, Pistrang N. Clients' experiences of treatment and recovery in borderline personality disorder: A meta-synthesis of qualitative studies. *Psychother Res*. 2018 11;28(6):940-957.
[PubMed: PM28140762](#)
31. Shepherd A, Sanders C, Doyle M, Shaw J. Personal recovery in personality disorder: Systematic review and meta-synthesis of qualitative methods studies. *Int J Soc Psychiatry*. 2016 Feb;62(1):41-50.
[PubMed: PM 26081467](#)

Research Question 2

No literature identified.