International Platform of Registered Systematic Review and Meta-analysis Protocols

INPLASY

Beyond the 'Difficult Patient': Clinician Stigma Toward Borderline Personality Disorder and Its Clinical Implications – A Systematic Review

INPLASY202680107
doi: 10.37766/inplasy2026.8.0107
Received: 29 August 2026
Published: 29 August 2026

Albrahim, AM; AlKhodair, GA.

Corresponding author:
Aljohara Albrahim

cr-313@hotmail.com

Author Affiliation:
Alfaisal University.

ADMINISTRATIVE INFORMATION

Support - No financial support.

Review Stage at time of this submission - Completed but not published.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY202680107

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 29 August 2026 and was last updated on 29 August 2026.

INTRODUCTION

Review question / Objective This systematic review aimed to evaluate stigma toward borderline personality disorder (BPD) among healthcare professionals and within mental health services, including its determinants, effects on clinical care, and the effectiveness of interventions aimed at reducing stigma.

Rationale Stigma toward people with borderline personality disorder (BPD) remains a significant concern in healthcare and mental health settings. Negative attitudes among healthcare professionals may affect diagnosis, treatment engagement, therapeutic relationships, and access to appropriate care. Previous research has identified stigmatizing perceptions, therapeutic pessimism, and structural barriers affecting people with BPD. However, the evidence is heterogeneous across professions, settings, and study designs. This systematic review was undertaken to synthesize the available evidence on stigma toward BPD among healthcare and mental health professionals, identify factors associated with stigmatizing attitudes, examine their clinical implications, and assess the effectiveness of interventions aimed at reducing stigma.

Condition being studied Borderline personality disorder (BPD) is a complex psychiatric condition characterized by marked instability in affect regulation, interpersonal functioning, and impulse control. It is commonly associated with stigma in healthcare settings, where negative perceptions may influence clinical interactions, treatment decisions, and access to care.

METHODS

Search strategy A comprehensive search was conducted in PubMed, Scopus, Web of Science, and Google Scholar for studies published between 2010 and 2025. The search strategy combined Medical Subject Headings (MeSH) and free-text terms, including “borderline personality disorder”, “BPD”, “stigma”, “attitudes”, “perceptions”, “mental health professionals”, and “healthcare

professionals", using Boolean operators AND and OR. Reference lists of eligible studies were also screened.

Participant or population Healthcare and mental health professionals, including nurses, psychiatric nurses, psychiatrists, psychologists, general practitioners, social workers, allied health professionals, and multidisciplinary mental health staff. Studies involving carers, family members, and people with BPD were also considered where relevant to understanding stigma and healthcare experiences.

Intervention Not applicable. The review examined stigma, attitudes, perceptions, discriminatory practices, and related experiences. Where applicable, educational and training interventions aimed at reducing stigma toward people with BPD were considered.

Comparator Not applicable. No specific comparator was required. Where applicable, studies comparing intervention and non-intervention or pre- and post-intervention conditions were considered.

Study designs to be included Qualitative, quantitative, mixed-methods, observational, longitudinal, experimental, and pre–post intervention studies.

Eligibility criteria Studies were eligible if they examined stigma, attitudes, perceptions, or discriminatory practices toward people with BPD among healthcare or mental health professionals. Eligible studies were published in English in peer-reviewed journals and included quantitative, qualitative, mixed-methods, observational, and intervention designs. Reviews, editorials, conference abstracts, case reports, commentaries, non-peer-reviewed literature, and studies focusing exclusively on patient self-stigma were excluded. Studies without clearly defined stigma-related outcomes were also excluded.

Information sources PubMed, Scopus, Web of Science, and Google Scholar. Reference lists of eligible studies were also screened manually to identify additional relevant publications.

Main outcome(s) The primary outcomes were stigma toward people with BPD among healthcare and mental health professionals, including negative attitudes, perceptions, stereotypes, discriminatory practices, therapeutic pessimism, empathy, treatment optimism, and clinician confidence. The review also examined the effects of stigma on clinical interactions, treatment engagement, therapeutic relationships, diagnosis, and access to care.

Additional outcome(s) Additional outcomes included factors associated with stigma, including professional training, clinical experience, workplace environment, organizational and structural factors, and the effects of educational, contact-based, DBT-informed, GPM, MBT, and trauma-informed interventions on clinician attitudes and related outcomes.

Data management Data were extracted using a standardized data collection form. Extracted information included author(s), year of publication, country, study design, participant characteristics, healthcare setting, assessment instruments, and key findings. Data were independently checked by the reviewers for accuracy and consistency, with disagreements resolved by consensus.

Quality assessment / Risk of bias analysis Methodological quality was assessed using the Joanna Briggs Institute (JBI) critical appraisal checklists appropriate to each study design.

Strategy of data synthesis Due to substantial heterogeneity in study designs, assessment methods, participant populations, and reported outcomes, findings were synthesized narratively. Quantitative findings were summarized descriptively where appropriate. Meta-analysis was considered only where sufficient methodological and clinical similarity existed between studies.

Subgroup analysis No formal subgroup analysis was planned. Findings were considered descriptively according to professional group, healthcare setting, study design, and intervention characteristics where relevant.

Sensitivity analysis No formal sensitivity analysis was planned because the included studies were methodologically heterogeneous and the evidence was synthesized primarily using a narrative approach.

Language restriction English-language publications only.

Country(ies) involved Saudi Arabia.

Other relevant information This systematic review was conducted in accordance with PRISMA guidelines. The review was based exclusively on published literature and involved no direct human

participants, patient records, biological samples, or direct interaction with study participants.

Keywords borderline personality disorder; BPD; stigma; healthcare professionals; mental health professionals; attitudes; perceptions; discrimination; therapeutic relationships; mental health services.

Dissemination plans The findings will be submitted for publication in a peer-reviewed scientific journal and may be disseminated through academic and professional channels.

Contributions of each author

Author 1 - Aljohara Albrahim - Conceptualization, literature search, study selection, data extraction, quality assessment, data synthesis, manuscript drafting, revision, and final approval of the manuscript.
Email: amalbraheem@alfaisal.edu
Author 2 - Ghada AlKhodair - Supervision, methodological guidance, critical review and revision of the manuscript, and final approval of the manuscript.
Email: gkhodair@ksu.edu.sa