

Borderline personality disorder and its impact on public health: A scoping review and meta-synthesis aligned with doctorates in professional studies by public works

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INTRODUCTION

Despite extensive research on borderline personality disorder (BPD), a unified theoretical model that synthesizes existing findings into a cohesive conceptual framework remains elusive. Furthermore, few studies explore how insights derived from BPD research could contribute to broader health models applicable to the general population's health and healthcare services. Individuals experiencing emotional instability associated with BPD frequently contend with intense, fluctuating relationships, oscillating rapidly between affection and resentment (American Psychiatric Association, 2024). Fear of abandonment propels desperate endeavours to maintain proximity to others, fueled by anxiety regarding potential loneliness (American Psychiatric Association, 2024). They encounter an unstable self-image, oscillating between high confidence and profound self-doubt (American Psychiatric Association, 2024). Impulsivity may lead to high-risk behaviors such as excessive spending, unsafe sexual practices, substance abuse, reckless driving, and binge eating (American Psychiatric Association, 2024). Additionally, they may exhibit patterns of self-harm or suicidal behavior, which reveal their emotional turmoil (American Psychiatric Association, 2024). Brief yet significant episodes of sadness or anxiety may occur, typically lasting several days (American Psychiatric Association, 2024). A pervasive sense of emptiness frequently accompanies a lack of purpose and boredom. Issues with anger management become evident, with heightened emotions resulting in frequent outbursts, frustration, or even manifestations of violence (American Psychiatric Association, 2024). Under conditions of severe stress, individuals may experience paranoia, suspecting hidden motives in others or perceiving themselves as victims of conspiracy (American Psychiatric Association, 2024). Furthermore, they might feel disconnected, experiencing a sense of detachment from reality, which exacerbates their distress (American Psychiatric Association, 2024).

This scoping review adheres to the academic standards established for the Doctorate in Professional Studies by Public Works (DProf Public Works), which is currently gaining prominence in the United Kingdom. This program requires that candidates critically assess their previous publications within a specific discipline in order to effectively inform their postgraduate dissertations. A vital component of these doctoral studies is the context statement, which provides a succinct synthesis of a candidate's public works and published research. It is anticipated that this statement will demonstrate the broader impact of the candidates' research within their professional community, whether through poster presentations, conference contributions, or peer-reviewed publications (Fulton et al., 2019).

The objective of our research was to reinterpret the theories examined in our public works regarding borderline personality disorder (BPD) while exploring novel approaches for analysing and applying previous findings and advancing theoretical propositions (Smith, 2015). Through narratives and reviews, particularly within the context of a scoping review, scholars can transcend subjective opinions or critiques, thus offering a comprehensive examination and deeper understanding of the existing literature on a specific topic (Sukhera, 2022). The theoretical and conceptual frameworks underpinning our scoping review predominantly included constructivist grounded theory (Mills et al., 2006), narrative analysis (Riessman, 1993), social network theory (Klärner et al., 2020), network approach to psychopathology (Robinaugh et al., 2020), and attachment theory. Social network theory emphasises the role of social relationships in the transmission of information, the impact of interpersonal influences, and the subsequent effects of others on subjective attitudinal or behavioural change (Liu et al., 2017). Bowlby's Attachment Theory posits that humans evolved within kinship groups, where survival was enhanced through the establishment and maintenance of robust bonds among members, primarily between parents

and their children, albeit not exclusively (Holmes, 2014). According to Bowlby, challenges within relationships can contribute to psychiatric disorders through a three-stage process: (1) the disruption or loss of attachments can lead to psychological distress; (2) internalised patterns of early attachment difficulties may shape future relationships, thereby increasing susceptibility to stress and emotional vulnerability; and (3) an individual's current perception of their relationships, along with their utilisation of these relationships, can influence their resilience or risk of emotional breakdown when confronted with adversities (Holmes, 2014).

Our application of attachment theory posits that early attachment styles significantly influence health behaviours in adulthood, with altered attachments leading to suboptimal health behaviours later in life (Lazzari & Masino, 2015). The network approach to psychopathology conceptualises mental disorders as causal networks consisting of mutually reinforcing symptoms (Robinaugh et al., 2020). Our biopsychosocial model of BPD integrates social, biological, interpersonal, and intrapersonal features within a cohesive and mutually influential network (Lazzari & Rabottini, 2023a). In constructivist grounded theory, researchers must examine the intricate dimensions beneath the surface of investigated social events to uncover meaningful insights within data and scrutinise latent assumptions, attitudes, and ideologies as they construct theories based on participants' narratives (Mills et al., 2006). By synthesising these diverse theoretical perspectives, our review endeavours to establish a comprehensive framework that enhances the understanding of BPD and subsequently informs theories of health, advancing broader health models that are pertinent to the general population and healthcare services.

MATERIALS AND METHODS

Review Aims

The current scoping review utilised contemporary methodologies in the formulation of both middle-range and grand theories pertaining to health, particularly emphasising the grounded theory approach and meta-synthesis. Through the application of these inductive methodologies, the review sought to develop a comprehensive conceptual model that synthesises insights regarding BPD and its broader implications for public health. This model was constructed through a thorough analysis of the authors' published body of work on BPD, thereby

establishing a robust foundation grounded in existing scholarly contributions while facilitating the development of theoretical frameworks relevant to healthcare and policy-making.

Review questions

The present scoping review examines two principal research inquiries: What are the extractable theories that connect BPD to public health, and what implications can be derived for population health from BPD psychopathology? By addressing these inquiries, the review aims to delineate the theoretical associations between BPD and broader health model frameworks, while evaluating the potential consequences of BPD-related psychopathology on population-level health. This methodology enables a comprehensive analysis of existing literature and conceptual frameworks, thereby contributing to the advancement of public health strategies and policies that are informed by psychiatric research.

Review objectives

The objectives of this scoping review are threefold: (1) to synthesise the authors' portfolio of publications on BPD alongside existing literature, thereby extracting a comprehensive theoretical model that establishes a connection between BPD and population health; (2) to apply situational analysis to examine our research positionality, key stakeholders, and their influence on the extracted conceptual frameworks pertaining to BPD; and (3) to employ a meta-synthesis of significant topics to develop an original conceptual framework that links BPD to global health, grounded in our theoretical frameworks of analysis. Through these objectives, the review aims to develop a robust analytical framework that advances theoretical discourse on health in general while simultaneously informing clinical and policy applications within the fields of psychiatric and public health research.

Data extraction

The scope of the review commenced in August 2023 and concluded in March 2024. During this period, we compiled a comprehensive portfolio of publications regarding BPD and systematically extracted significant middle-range and grand theories that establish a connection between BPD and population health. To synthesise our findings, we employed the PEO (Population, Exposure, and Outcome) framework, which facilitated the generation of secondary data. The original population examined in this review included both inpatients and outpatients diagnosed with BPD, with the study settings encompassing psychiatric inpatient and outpatient services across the United Kingdom and Italy. These individuals

actively utilised psychiatric care services and infectious disease departments within these clinical environments, thereby enabling a comprehensive evaluation of the implications of BPD for healthcare systems and public health.

The assessors of the research reported in this scoping review included the authors as well as mental health professionals. The majority of the selected studies were affiliated with one of the authors (CL) to fulfil the requirements for portfolio evidence-based practice within the Doctorate in Professional Studies by Public Works (DProf Public Works) postgraduate training programme. The review followed a structured six-stage process: (1) accumulating relevant publications on BPD from the authors' portfolio; (2) implementing Arksey and O'Malley's (2005) scoping review methodology to refine the search strategy; (3) utilising Noblit and Hare's (1988) meta-ethnography and meta-synthesis to extract qualitative findings; (4) conducting a situational analysis to ascertain our research positionality and key stakeholders; (5) applying a grounded theory approach to synthesise our findings into middle-range and grand theories; and (6) deriving a conceptual framework that links BPD and public health. In the initial stage, 16 publications on BPD research, authored by CL, were collected from peer-reviewed journals, book chapters, and books. This process aimed to generate novel theories regarding the interpretation of BPD by integrating prior public works and demonstrating their originality (Smith, 2015).

In the second stage, a scoping review of our portfolio of published articles was conducted. The scoping review methodology, articulated by Arksey and O'Malley (2005), is intended to establish a conceptual framework for organising and summarising results, as well as the literature examined. A scoping review aims to identify fundamental concepts that underlie a specific field of study, in addition to recognising the primary sources and types of evidence currently available (Arksey & O'Malley, 2005). Furthermore, a scoping review may be conducted as an independent project, particularly in instances where the field is complex or has not been thoroughly examined previously (Arksey & O'Malley, 2005). Moreover, scoping reviews facilitate three essential processes: (1) clarifying and linking the purpose with the research question, (2) employing qualitative thematic analysis in article evaluations, and (3) contemplating the implications of study findings for policy, practice, or future research (Levac et al., 2010).

In the third stage, we employed the meta-ethnography approach proposed by Noblit and Hare (1988) to execute a meta-synthesis of our scoping review. Meta-ethnography consists of several critical steps: (1) identifying the

phenomenon of interest; (2) determining pertinent literature and concepts; (3) conducting a thorough reading and rereading of selected studies; (4) investigating interrelationships among the studies; (5) translating findings through the application of a conceptual framework or systematically comparing similarities and differences among the studies; and (6) synthesising the translations by condensing thematic data to form a conceptual model through a line of argument (Noblit & Hare, 1988; Mohammed et al., 2016). This process allowed us to enhance our theoretical approach to borderline personality disorder by integrating insights from existing research as well as our portfolio of published work.

In the fourth stage, a situational analysis was conducted utilising the relational analyses identified by the researcher, which resulted in the generation of various types of maps to examine the intricate details of a given scenario as it is generally understood (Clarke et al., 2021). Specifically, (1) a situational map identifies all components—human and nonhuman—present within the scenario; (2) a relational map explores the connections among the elements delineated in the situational map; (3) maps of social worlds and arenas illustrate the collective participants involved in the situation, including social groups, organisations, and institutions, along with their domains of engagement and activity; and (4) positional maps encapsulate key discussions occurring within the discourse, encompassing positions that were adopted or omitted (Clarke et al., 2021). A situational map is employed to identify significant actors, key elements of the situation, factors influencing the problem, and other components that contribute meaningfully to the reported scenario (Clarke et al., 2018; Table 1).

In the fifth stage, the application of Grounded Theory (GT) facilitated the synthesis of diverse ideas surrounding a core concept, thereby providing a comprehensive explanatory framework for understanding how individuals, groups, communities, or nations experience and respond to events, challenges, or complex circumstances (Corbin & Holt, 2011). The principal tenets of Grounded Theory encompass (1) the notion of theory as a structured compilation of interconnected ideas that elucidate the what, why, and how of occurrences; (2) the employment of concepts that categorise analogous events under unified designations, which signify interpretations of terminology and data derived from empirical findings; and (3) the utilisation of diagrams to illustrate the relationships among concepts, effectively mapping the underlying structures present within the data (Corbin & Holt, 2011). Through the utilisation of Grounded Theory, our review endeavoured to construct a theoretical model that contextualises BPD within the broader discourse of public

Table 1. – Situational Map in our research (adapted from Clarke et al. 2018, p. 131)

Individual Human Elements/Actors	Nonhuman Elements/Actors
<ul style="list-style-type: none"> • Persons with borderline personality disorder • Mental Health Carers, Doctors, Nurses • Hospital managers • Researchers Carlo Lazzari, Elda Nikolou-Walker, Liang Liu 	<ul style="list-style-type: none"> • Pharmaceutical treatment • Work policies in treatment • Pharmaceutic societies
Collective Human Elements/Actors	Implicated/Silent Actors/Actants
<ul style="list-style-type: none"> • Nurses, • Physicians • Other healthcare professionals 	<ul style="list-style-type: none"> • Patients • Patients’ families and friends • Hospital managers
Discursive constructions of individual and/or collective human actors	Discursive Construction of Nonhuman Actants
<ul style="list-style-type: none"> • Nurses struggling with patients with BPD • Persons with BPD have difficulties in solving their problems • Persons with BPD find that medication does not help solve their crises • Persons with BPD are at high risk of frequent and recurrent suicidal attempts 	<ul style="list-style-type: none"> • General and psychiatric hospitals are running out of beds for the general population probably because of the heavy use by persons with BPD • Antidepressant therapy might have paradoxical effects on BPD by increasing their impulsivity
Political/Economic Elements	Sociocultural/Symbolic Elements
<ul style="list-style-type: none"> • Reduction of healthcare human and logistic assets in helping the general population • Saturation of national healthcare facilities that can no longer offer beds for other pathologies 	<ul style="list-style-type: none"> • Use of a biopsychosocial model to redefine health as a wholistic approach and not simply an absence of symptoms
Temporal Elements	Spatial Elements
<ul style="list-style-type: none"> • A progressive depletion of human and logistic resources to accommodate the demands of healthcare in the whole population 	<ul style="list-style-type: none"> • Distribution of patients in inpatient and community services
Major Issues/Debates	Related Discourses
<ul style="list-style-type: none"> • Population health promotion starts early in life • Individual and population health are linked • There is a link between nature, nurture, child development and population health • Medical, psychiatric and social pathologies are all related 	<ul style="list-style-type: none"> • Grounded theory • Social network theory • Attachment theory • Psychopathological network models

health, thereby enhancing our interpretation of its psychopathological and social dimensions.

In the sixth stage, we developed both middle-range and grand theories derived from our public works on BPD and the scoping review. Middle-range theories (MRTs) exhibit sufficient breadth for application across various clinical populations while remaining adequately detailed to guide both research and practice in elucidating related phenomena (Higgins & Shirley, 2000). MRTs serve as a conduit, clarifying the occurrence of choices alongside preceding and subsequent events and can be empirically tested in experimental contexts (Higgins & Moore, 2000). A theory offers a structured explanation of phenomena, providing scientifically grounded principles

that articulate the operational dynamics of the world (Merriam-Webster Dictionary, 2025). Furthermore, a theory serves as a guiding belief system or methodology for decision-making, influencing policies and actions based on specific assumptions (Merriam-Webster Dictionary, 2025). In particular contexts, theories may remain conceptual constructs employed for intellectual exploration, investigation, or argumentation (Merriam-Webster Dictionary, 2025). Additionally, theories can encompass systematic collections of principles—such as mathematical theorems—that organise knowledge within a defined domain (Merriam-Webster Dictionary, 2025). Ultimately, a theory provides a foundation for understanding, reasoning, predicting, and applying learning across disciplines,

whether in science, philosophy, policy-making, or abstract thought (Merriam-Webster Dictionary, 2025).

A theory constitutes a meticulously structured framework of ideas specifically devised to elucidate phenomena, which are typically cultivated through rigorous observation, reasoning, and analysis (Collins Dictionary, 2025). A theory may derive its foundation from scientific inquiry, as exemplified by Marx’s perspective on historical transformation through conflict or Einstein’s pioneering Theory of Relativity (Collins Dictionary, 2025). Beyond the parameters of formal academic discourse, theories also operate within everyday reasoning; individuals formulate theories based on personal beliefs, even in instances where evidence is lacking (Collins Dictionary, 2025).

Conceptual models serve as hierarchical structures of interrelated ideas that define significant situations (Peterson & Bredow, 2004). In contrast, a grand theory (GT) embodies a more abstract explanatory framework that offers universal insights without detailing the specifics

required for empirical validation (Higgins & Shirley, 2000) (Table 2).

Although the current study is based on secondary data, we adhered to ethical guidelines in disseminating our findings. The principle of autonomy (Bassot, 2017) was upheld in the original studies through the utilisation of informed consent obtained from patients or formal approval secured by the local ethics committee during the data collection process. To avert paternalism—an ethical concern arising from our unique position in the production and dissemination of knowledge (Bassot, 2017)—we remained vigilant regarding the power dynamics inherent in academic research. Recognising dignity as central to our theoretical approach (Bassot, 2017), we refrained from criticising, generalising, or negating the explored concepts and abstained from passing judgment on patients’ reported behaviours. By adhering to the principle of beneficence, we prioritised scientific rigour to serve a higher purpose. The study was designed with a clear objective: to enhance

Table 2. Difference between a theoretical and conceptual framework as usually accomplished in professional doctorates (DProf) based on the analysis of publications submitted in a portfolio (Sreekumar, 2023).

Theoretical framework (Sreekumar, 2023)	Conceptual framework (Sreekumar, 2023)	Conceptual frameworks applied in the summary of our public works for the aim of a professional doctorate (DProf) by public works
Based on current hypotheses that other people have examined and verified.	Based on ideas that serve as the study’s primary variables	Theories and findings will be extracted from each public work
Used to provide the theoretical groundwork for the investigation a researcher will do	It uses the body of current literature to represent the connections between the ideas and variables visually	From merging our publications, we will excerpt the connections between our ideas in an overarching conceptual framework
Used in the framework of a research investigation to control, predict, and test hypotheses.	Aids in the creation of a theory that professionals would find helpful	We aimed to create an overarching grand theory that will help healthcare services and patients and explain health behaviours
Provides a broad framework of concepts that research may fall into	Refers to specific concepts that academics use in their research	A context statement by Public Works adopts a qualitative interpretivist approach to our portfolio of publications abridged to ultimately extract salient theoretical frameworks
Provides a focus point for addressing unidentified research in a particular area of study	Demonstrates rationally how the study question ought to be conducted	The study question relates to extracting an overarching theoretical model for dealing with BPD and population health
Operates deductively	Operates inductively	Starting from our research findings, we will generate middle-range and grand theories in an inductive fashion
Applied in quantitative studies	Applied in qualitative studies	A context statement for public works is a qualitative interpretive piece of work based on a grounded theory approach examining authors’ publications collected in a portfolio and to inductively generate new theories of practice

knowledge in the field of borderline personality disorder and contribute to the development of technologies that improve public health (Bassot, 2017).

RESULTS

Generating a conceptual framework

Through the synthesis of middle-range theories derived from our public works concerning BPD, we have developed a comprehensive array of middle-range theories, conceptual frameworks, and overarching theories. These formulations encapsulate significant theoretical insights and may also be abstracted as key takeaways (refer to Table 3).

Middle-range theories (MRTs)

MRT-1 — The overall health of the population, as well as health-related behaviours associated with BPD, is influenced by both genetic and environmental factors throughout human development. It is noteworthy that disrupted attachment during early life stages, coupled with experiences of abuse, trauma, or neglect during childhood, contributes to the emergence of maladaptive

health behaviours, diminished health literacy, and an increased prevalence of health issues in later life. Health is defined as encompassing both biological and psychological well-being, with health behaviours characterised as the actions undertaken by individuals to safeguard themselves from adverse physical, social, and psychological experiences. Formative attachment styles during sensitive stages of human development play a crucial role in shaping these behaviours, as individuals raised in abusive environments are more likely to exhibit suboptimal health behaviours in adulthood (Fig. 1).

MRT-2 — The promotion of health and the prevention of illness should commence early in an individual’s life, with resources allocated towards fostering optimal conditions for child development and facilitating early assessments of biological and social factors that may influence long-term well-being, including neurodevelopmental delays. In the absence of these preventive measures, the overall health of the population may suffer a significant decline, potentially resulting in an increase in cases of borderline personality disorder. Children raised in suboptimal environments are predisposed to experience deficiencies in parental skills, thereby exacerbating the risk of perpetuating a cycle in which they, in turn, become parents to children at a heightened risk of developing BPD. Furthermore, children who have endured neglect, trauma, or abuse are more likely to transition into adulthood, facing a high incidence of health and social challenges,

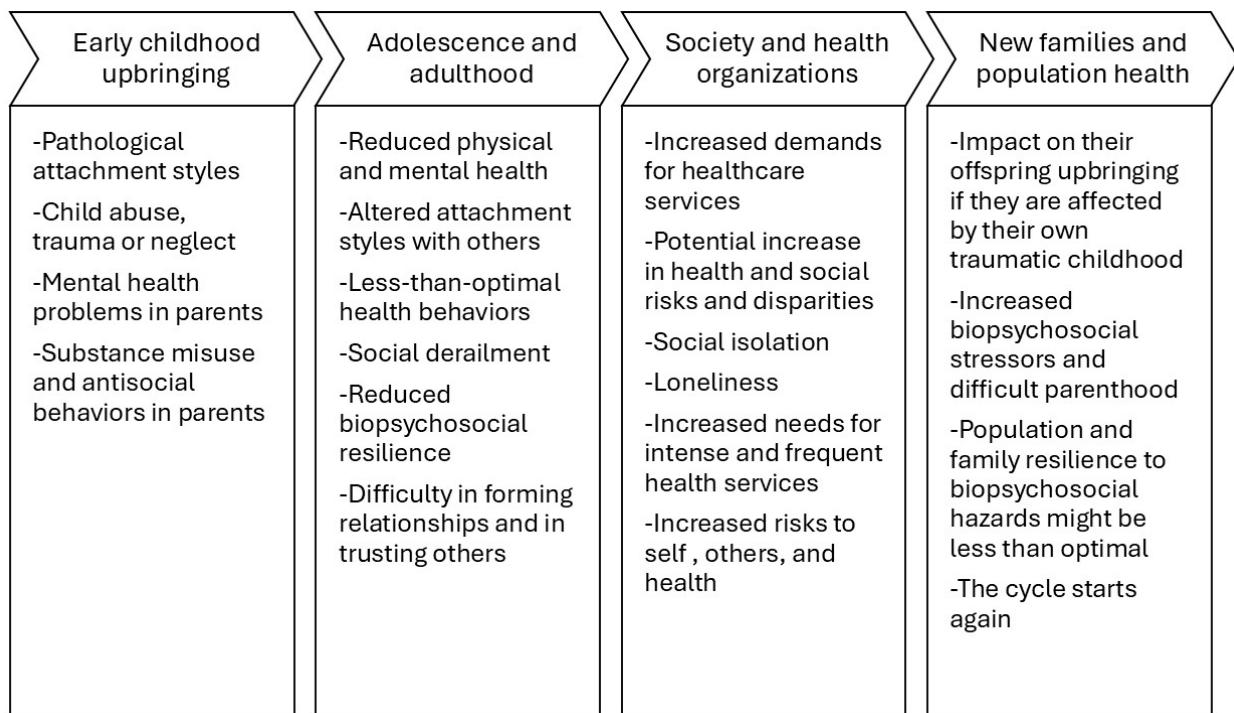


Figure 1. The development of health behaviour during life span as suggested by BPD psychoapthology.

Table 3. A narrative review of our selected publications (PEO: Population, Exposure, and Outcome).

Authors	Country of study	Population	Exposure (Experience)	Outcomes of interest and conceptual theories
Lazzari et al., 1994	Italy	Outpatients in services for HIV/AIDS Prevention	Population prevention during HIV pandemic reflects underlying personality and health behaviours	Primary prevention and health behaviors are affected by personality disorders. Persons with BPD might more prone to present with suboptimal preventive behaviours during diffusible illnesses
Lazzari & Masino, 2015	Italy	The general population accessing hospital services for infectious diseases	People experiencing HIV/AIDS Pandemic	Early attachment styles in childhood, and being a victim child trauma, neglect or abuse might affect subsequent health behaviors later in life
McLennan, Lazzari, McMillan, & Mackie, 2016	Scotland	Outpatients accessing an acute psychiatric service	Assessment and treatment of the outpatient population	An increased number of outpatients with a diagnosis of BPD will likely outnumber other patients with both medical and psychiatric pathologies
Shoka, Lazzari, & Gower, 2017a,b.	England	Inpatients in adult psychiatric hospitals	Assessment and treatment	Female patients with a diagnosis of BPD start to outnumber those with other diagnoses in general adult psychiatry and have longer admissions
Lazzari et al., 2018	England	Inpatients and outpatients with a diagnosis of BPD and healthcare providers	Outpatient and inpatient services dedicated to BPD	The increased number of admissions of patients with BPD is potentially reducing the healthcare services' total capabilities of physical and mental wards to treat patients with other pathologies.
Lazzari, C., Shoka, A., Papanna, B. & Kulkarni, K., 2018	England	Inpatients in a general adult psychiatric hospital with diagnosis of BPD	Admissions for BPD crisis resolution	Patients with a diagnosis of BPD are starting to outnumber those with other psychiatric diagnoses and reduce the available beds for admission to population with other enduring mental illnesses
Lazzari & Rabottini, 2023a, 2023b	Italy, England	Persons with borderline personality disorder	Persons with BPD have reduced illness-preventive behaviors; risk-taking behaviors might manifest as reduced illness-prevention during pandemics (HIV, COVID-19)	Persons with BPD might show 'pathophilia', as an increased risk to adopt suboptimal health behaviours in face of social and biological hazards (e.g., infectious diseases)
Lazzari & Nusair, 2020; Lazzari, Nusair & Rabottini, 2021; Lazzari & Rabottini, 2023c,d	England	Persons with BPD	Liaison psychiatric services and emergency departments (A&E)	BPD is comorbid with a functional neurological disorder, medically unexplained symptoms and factitious disorders. Healthcare settings will progressively have fewer human and organisational resources to satisfy this mounting request which requires additional personnel and dedicated structures
Lazzari & Rabottini, 2023e	England, Italy	Narrative review	Current literature on BPD	A network psychopathological model can help explain the psychopathology in BPD
Lazzari & Shoka, 2016; Lazzari, Shoka, Papanna, & Mousailidis, 2017	England	Female patients with BPD	Inpatient settings for personality disorder	The management of inpatients with a diagnosis of BPD requires robust and articulated corporate governance at all levels. Due to the complexity of the condition, all healthcare organisational levels, including chief executive officers and healthcare managers, should support wards, nurses, and doctors in addressing BPD, its complex presentations, family concerns, and discharges.
Lazzari, Nikolou-Walker & Liu, 2024	Several countries	A systematic review of publications on comorbidity between BPD, functional neurological disorder, and psychogenic nonepileptic seizures	A systematic review in different settings, including mental health services, neurology departments and community	Our systematic review shows a comorbidity of BPD, functional neurological disorder, and psychogenic nonepileptic seizures. Possible comorbidities with autism spectrum disorder PTSD and alexithymia were also hypothesised.

which subsequently impact their offspring’s development when they assume parental responsibilities (Fig. 2).

MRT-3 — Healthcare services and organisations are presently displaying initial indicators of exhaustion as they systematically address the consequences of childhood existential and developmental disruptions with increasing frequency. The escalating prevalence of social, biological, and psychological disorders—likely linked to adverse early childhood experiences, trauma, neglect, and abuse—has increased the demand for medical and mental health interventions. The rising rate of hospital admissions among individuals diagnosed with borderline personality disorder, predominantly influenced by environmental and developmental factors rather than genetic predispositions, suggests that healthcare systems may be nearing a critical threshold. The mounting pressure to provide sufficient financial, healthcare, and human resources emphasises the urgent need to confront this global public health crisis (Fig. 3).

Grand Theories (GTs)

GT-1 — The well-being of individuals and populations is profoundly interconnected. The increasing prevalence of social stressors adversely impacts parental attachment styles, which subsequently shape the health and social behaviours exhibited by their offspring. Children who endure dysfunctional attachment patterns or face neglect,

trauma, or abuse during their formative years are more predisposed to develop suboptimal social and health behaviours in adulthood. Concurrently, these individuals, as users of social services, contribute to the escalating social, psychiatric, and biological demands placed on healthcare systems. This interplay establishes a direct and intimate relationship between individual and population health, early childhood development, and parental attachment styles.

GT-2 — Population health, encompassing psychological, social, and mental well-being, is fundamentally connected to the early attachment styles established between children and their parents or primary caregivers. Furthermore, early-life experiences, such as childhood trauma, neglect, and abuse, significantly influence long-term health and social trajectories, thereby affecting both individual and collective health outcomes. The consequences of disrupted attachment and adverse childhood experiences persist into adulthood, resulting in pervasive patterns of social, medical, and psychiatric challenges within a specific population (Fig. 4).

DISCUSSION

One of the most significant challenges in professional and academic development is the transformation of knowledge and research into a cohesive body of

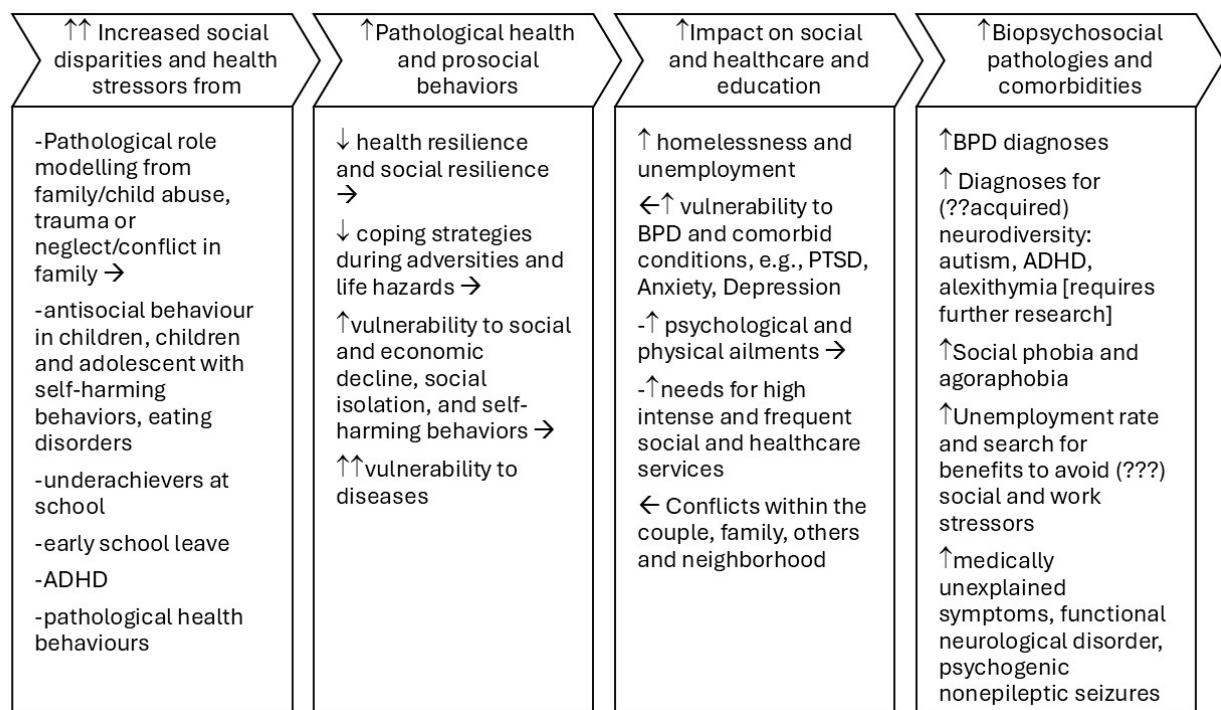


Figure 2. A chain of reactions from early child development to adult psychopathology.

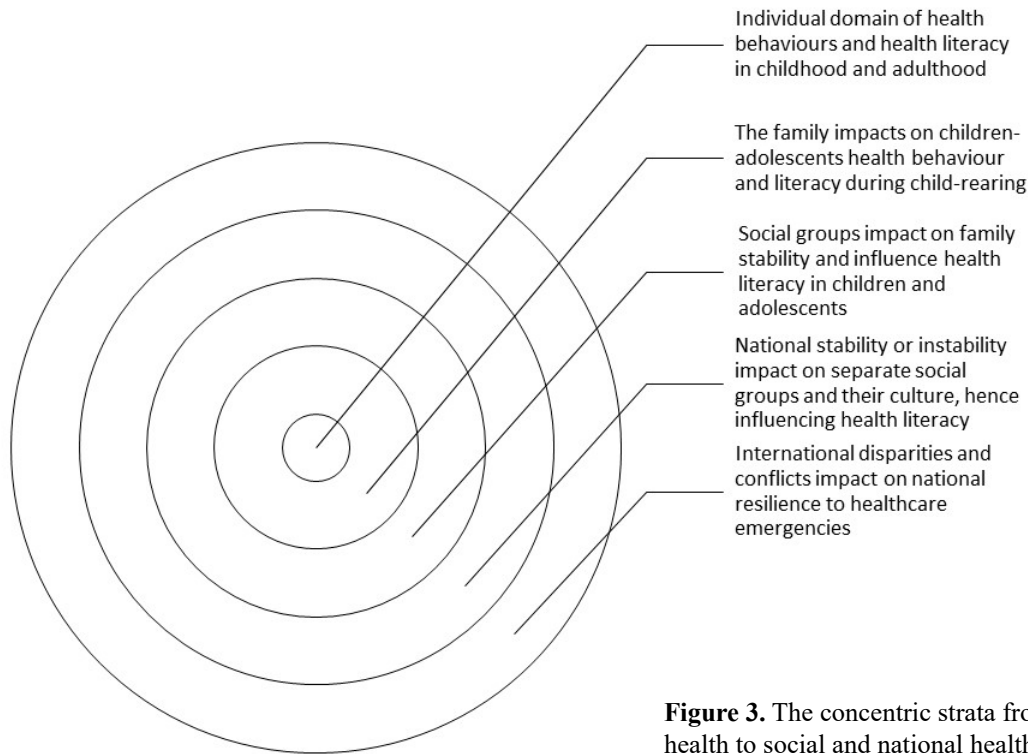


Figure 3. The concentric strata from individual health to social and national health.

conceptual and theoretical frameworks. Current work-based learning and practice-based evidence necessitate that scientist-practitioners effectively apply their acquired knowledge within their respective settings or analogous environments. Our findings regarding Borderline Personality Disorder (BPD) reaffirm the profound impact of this condition on local, regional, and global health. The progression of reflective activity—from practical application to theorising—commences with a workplace focus and advances towards policymaking (Scott et al., 2004). By utilising the acquired grand theory, BPD policies may adopt a three-dimensional approach: firstly, promoting early interventions to foster secure attachment styles in children; secondly, addressing gaps in healthcare concerning the treatment of BPD; and lastly, enhancing both psychiatric and general healthcare settings to establish comprehensive strategies aimed at improving BPD care and reinforcing local resources for other mental health conditions.

As elucidated in the current review, the primary objective was to influence professional practice through insights gained in the workplace and to develop policy recommendations that can drive substantial changes in practice (Scott et al., 2004). Professional knowledge capital, which is imperative at the Doctorate in Professional Studies (DProf) level, is intrinsically linked to the value it provides to the profession, particularly when

outcomes challenge can improve professional practices (Mullane, 2005). Medical scholarship acquired through a researcher-practitioner approach in clinics for borderline personality disorder enables the identification of critical aspects requiring heightened attention, including suicide

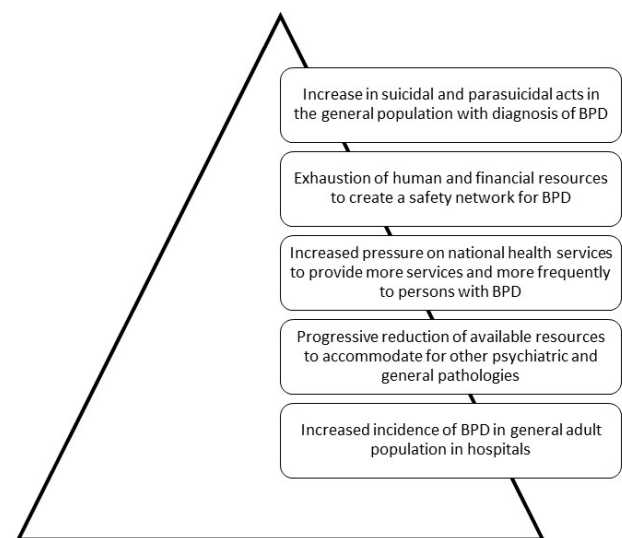


Figure 4. The pyramid of public health in BPD emergency.

prevention, optimisation of antidepressant therapy, and interprofessional collaboration in emergency settings to address high-service users diagnosed with BPD. Consequently, the objectives pursued in advanced professional practice and the Doctor of Professional Practice (DProf) are aimed at demonstrating enhanced and more effective methodologies for improving patient outcomes and the overall quality of care (Mullane, 2005).

Mental health professionals can utilise their research findings in translational research (Costley & Fulton, 2019). They function as ‘knowledge brokers,’ converting research into practice and promoting organisational innovation (Costley & Fulton, 2019). By categorising borderline personality disorder psychopathology into middle-range and grand theories, we have effectively transcended regional and institutional constraints, motivating psychiatric organisations to implement BPD policies that enhance the comprehensive spectrum of services. Reflective practice involves translating workplace observations—such as audits and research—into actionable theories while carefully considering their implications (Costley et al., 2010).

For individuals pursuing professional advancement, surmounting barriers through the integration of work and study cultivates a collaborative learning experience across organisations (Nikolou-Walker, 2007). Consequently, knowledge and BPD policies can be nurtured beyond academia within more structured educational environments (Nikolou-Walker, 2020). Nevertheless, individual knowledge must be disseminated and acknowledged through peer-reviewed journals to transition into organisational knowledge and significantly enhance an institution’s intellectual capital (Nikolou-Walker & Garnett, 2004). By compiling a portfolio of evidence on BPD and integrating this knowledge into practical theories, we augment our credibility and influence within clinical settings, thereby fostering change through practice-based evidence.

LIMITATIONS

Our study reveals inherent limitations arising from the characteristics of the chosen survey methodology and theoretical framework. Although the outcomes demonstrate ecological and clinical validity and illustrate transferability, they regrettably lack generalizability. A notable limitation arises from the selection of specific topics and arguments pertaining to a singular author (CL), which restricts the broader implications of that author’s research positionality. Considering the available data sources, it was infeasible to conduct a comprehensive comparative study; consequently,

our analysis predominantly concentrated on the development of methodologies and approaches. The variations observed among the selected organisations further diminished the transferability of the study (Nikolou-Walker, 2007). Future research should endeavour to compare our findings with existing literature through a systematic review, thereby facilitating the integration of theoretical concepts and models into a cohesive framework.

CONCLUSIONS

This study emphasises the potential for mental health practitioners who possess a portfolio of published works to enhance and consolidate their research through a grounded theory approach. By systematically analysing their findings, they can formulate theoretical concepts that generate new insights into their professional practice. This framework of work-based learning provides a dynamic perspective on the influence that individual practitioners can exert on global knowledge production, enabling them to extend beyond localised studies and contribute to broader theoretical advancements. Through the integration of practice-based evidence, clinicians and researchers are equipped to develop meaningful theories that advance the understanding of population and mental health. The case of borderline personality disorder serves as an exemplary illustration of this process, demonstrating how practitioner-led inquiry can yield innovative models that inform psychiatric care and public health policies on a larger scale.

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Ethical considerations: The current study did not gather any sensitive data, whether directly or indirectly. All individuals and settings have been anonymised. The study complies with the principles established in the Declaration of Helsinki (2013).

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Authors contributions: Mr. Carlo Lazzari: The author confirms responsibility for the following: study conception and design, data collection, analysis and inter-

pretation of results, and manuscript. Prof. Elda Nikolou Walker: The author confirms responsibility for the following: study conception and design, analysis and interpretation of results, and manuscript. Prof. Liang Liu: The author confirms responsibility for the following: study conception and design, data analysis and interpretation of results, and manuscript


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