

Research Forum 2025 - Abstracts

Dr Robert B Dudas

Title: How can working with our patients' values help us support their recovery?

Values can play an important role in the development and recovery from mental illness. They are closely linked to emotions, and working with values in those with complex emotional and interpersonal needs is supported by both theoretical arguments and empirical evidence. Clinical value mapping refers to exploring how our personal values always play out in the value context of our social environment, have a hierarchy between them, and – importantly – can be moulded. Recent advances in the treatment of borderline personality disorder that involve working with values offer hope to close the gap between symptom improvement and living a meaningful life.

Prof Susanna Every-Palmer

Title: Treating complex trauma in complex places: EMDR therapy in forensic services and prisons

People presenting at the intersection of the mental health and criminal justice systems often have post-traumatic stress symptoms related to traumatic life experiences. Having PTSD may worsen symptoms of other mental conditions, and/or predispose people to substance misuse, further compromising recovery. The purpose of this presentation is to describe the prevalence and consequences of PTSD in forensic settings and present results from the first randomised controlled trial of Eye Movement Desensitisation and Reprocessing (EMDR) in people receiving treatment in prison or in hospital within the forensic system.

A/Prof Jillian H Broadbear

Title: Time to diagnosis and treatment of borderline personality disorder – opportunities and pitfalls of the consumer mental health journey

Borderline Personality Disorder (BPD) commonly emerges during adolescence, yet diagnosis and treatment are frequently delayed. This cross-sectional study investigated key milestones in the mental health journeys of individuals with BPD, from initial symptom onset to formal diagnosis and treatment. Over 100 participants—predominantly female, aged 18 to 68—completed an anonymous online survey. The study quantified the average

time between symptom onset and access to diagnosis and treatment, and identified factors influencing early versus delayed intervention. Findings highlight the urgent need for enhanced education and training for mental health professionals to improve the recognition, diagnosis, and communication of BPD, and to expand access to evidence-based treatment options.

Dr Fiona Donald

Title: Wise Moments: A four-session Acceptance and Commitment Therapy for borderline personality disorder

Borderline Personality Disorder (BPD) is a complex mental health condition often linked to reduced quality of life. Wise Moments is a four-session, Acceptance and Commitment Therapy (ACT)-based intervention designed for the early treatment of BPD. The program centers on the ACT concept of self-as-context—the “observing self”—to help individuals notice and accept internal experiences without judgment. This presentation is about the acceptability and feasibility of an ultra-brief, individual intervention for clients experiencing BPD symptoms. Fifty-six participants completed the Wise Moments. Self-administered paper-based questionnaires were used to assess BPD symptom severity, psychological flexibility, mindfulness, self-compassion, and psychological well-being. A within-subjects design was used, with assessments conducted at both admission and discharge. Findings highlight important clinical implications.

Dr Karthika Kasiviswanathan

Title: Navigating parenthood in people living with borderline personality disorder: a meta-ethnography

Borderline Personality Disorder (BPD) is characterised by emotional dysregulation, impulsivity, and interpersonal difficulties. Parenting while living with BPD is associated with elevated distress, which may intensify symptoms and complicate parent–child relationships. These dynamics can influence children’s attachment and behavioural development, contributing to the intergenerational transmission of BPD and other mental health challenges. Despite its clinical relevance, no prior research has systematically reviewed qualitative studies exploring the lived experiences of parents with BPD. This presentation is about a meta-ethnography that interprets existing qualitative research to develop a conceptual understanding of these experiences and identify supports. A systematic search of peer-reviewed literature was conducted, followed by independent screening and appraisal. Nine studies were selected for inclusion. Key concepts were

extracted and synthesised using NVivo to explore relationships and generate a holistic interpretation. This review lays the groundwork for developing targeted, evidence-informed interventions—addressing a critical gap in support for parents navigating BPD.

Dr Dinuli Nilaweera

Title: Qualitative study of clinicians' perspectives on risk assessment of suicide in people with borderline personality disorder

Chronic suicidality is a distinguishing feature of BPD. This study explored clinicians' approaches to risk assessment and compared them with what is recommended as best practice. Semi-structured interviews were conducted with mental health clinicians (N=13) experienced in the assessment and treatment of people with BPD. Participants described risk assessment processes that they use with this client group. Using inductive thematic analysis, three interrelated themes emerged: (1) Contributing factors (i.e. psychosocial factors), (2) Systemic responses (i.e. changes to support), and (3) Recognising and managing risk (i.e. chronic vs acute patterns of self-harm). Clinicians emphasised the importance of identifying chronic vs acute patterns of suicidality in people with BPD, and how changes in risk are interconnected with recent changes in the person's interpersonal relationships and life circumstances. Detecting recent changes on a background of chronic risk is therefore a promising approach to reducing suicidality in people with BPD.

Joseph Fettling

Title: Psychiatrists' experiences working with consumers with borderline personality disorder in private practice

In Australia, Borderline Personality Disorder (BPD) is often managed by psychiatrists in the private system, but their work may be limited by negative attitudes towards people with BPD and use of clinical practices misaligned with available evidence. This presentation describes the results of a cross-sectional survey examining prevalences of these phenomena among Australian private practice psychiatrists. Negative attitudes towards patients with BPD were common, as was use of clinical practices misaligned with the evidence-base. Favourable attitudes and use of evidence-based treatments were positively associated with years of clinical experience. Insights for BPD management in Australian private psychiatry are discussed.

Marianne Weddell and Claudia Vella

Title: DBT-PE: A Spectrum of experiences from education, implementation and beyond

Dialectical Behaviour Therapy combined with Prolonged Exposure (DBT+PE) is one of the few treatments that are designed to treat co-occurring BPD and trauma disorders. Research demonstrates that Dialectical Behaviour Therapy combined with Prolonged Exposure (DBT+PE) is an effective treatment for individuals with borderline personality disorder (BPD) and trauma-related disorders. However, the intensity of emotion dysregulation and trauma symptoms in this population raises important questions about whether the treatment is acceptable and tolerable. This presentation focuses on the preliminary findings of the study, which explores the acceptability and tolerability of DBT+PE, drawing on the perspectives of people who have participated in the treatment. By exploring both successes and challenges, we aim to better understand the lived experience of DBT+PE and to identify opportunities to improve engagement and support for those participating in this intervention.

Dr Helen Mildred

Title: "I started feeling better and so did my pain": an interpretative phenomenological analysis of the experience of chronic pain in people with borderline personality disorder

Borderline personality disorder (BPD) and chronic pain (CP) often co-occur, affecting functioning, relationships, and identity. Using Interpretative Phenomenological Analysis, in-depth interviews with four participants explored lived experience, resilience, treatment access, and responses from others. Five themes emerged: affective instability, identity dissolution, connection, validation, and trust. Emotional hypersensitivity underpinned both conditions, with emotional turbulence amplifying physical pain, and CP undermining identity. Stigma and invalidation, including from healthcare providers, contributed to isolation. Collaborative, holistic care integrating emotion regulation, relationship skills, and strength-based lifestyle changes may help alleviate both emotional and physical pain, improving sense of self and quality of life in this dual-diagnosis population.

Meg Blackie

Title: Digital Mental Health Interventions for Complex PTSD: Insights from Expert Clinicians

Complex Post-Traumatic Stress Disorder (cPTSD) is a trauma response which may develop following chronic interpersonal trauma. cPTSD is characterised by symptoms which go beyond those associated with PTSD (re-experiencing, avoidance, hypervigilance), and may

include difficulties with emotional regulation, self-concept, and relationships. While Digital Mental Health Interventions (DMHIs) have been found effective for PTSD, limited evidence exists on their suitability for cPTSD. This study presents an Expert Delphi Study exploring clinicians' perspectives on the use of DMHIs for cPTSD, including effectiveness, necessary adaptations, encountered barriers, and safety considerations. Recommendations for improving the design and delivery of DMHIs for cPTSD are discussed.

Miss Melissa Morando and Dr Joy Quek

Title: Development, implementation, and efficacy of the Ironbark Program: A cross-sector collaboration for supporting people with borderline personality disorder

For many people with Borderline Personality Disorder (BPD) who are seeking treatment, long-form evidence-based therapies for the treatment of BPD remain largely inaccessible due to limitations around finances, availability to attend and staff availability and training. The aim of the current study was to understand whether a brief common-factors intervention delivered by non-clinical staff at a Prevention and Recovery Care (PARC) service was effective in reducing BPD symptom severity in PARC consumers with BPD, BPD traits, or emotion dysregulation. A longitudinal survey study design was implemented to track clinical changes in PARC consumers, and questionnaires were distributed to participants at admission, discharge, and three-monthly follow-up intervals. Miss Melissa Morando will discuss the clinical and service usage changes observed in PARC consumers completing the Ironbark Program. These trends will be contextualised by clinical insights provided by Austin Health Consultant Psychiatrist, Dr. Joy Quek.

Dr Haley Peckham

Title: The Neuroplastic Narrative and Neuro-Ecological Diversity: Drawing on Neuroscience and Evolutionary Biology to advance ACE aware, Trauma-informed approaches

This presentation explores how we validate the profound and enduring impact of early experiences. Diagnosis of mental disorder is one way to validate psychological and emotional suffering, but the Neuroplastic Narrative and the concept of Neuro-Ecological Diversity describe how and why experiences shape brains and so offer a non-pathologising way of making sense of the impacts of trauma, adversity, and intersecting layers of structural inequity, which some may find a more empowering and less shaming alternative.