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STAFF ATTITUDES TOWARDS PATIENTS WITH BORDERLINE PERSONALITY DISORDER

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¹The Interdisciplinary Department of Social Sciences, ²School of Education, Bar Ilan University, Ramat Gan, ³Sackler School of Medicine, Tel Aviv University, Tel Aviv, Israel Introduction: BDP is a common diagnosis in hospitals and community settings, estimated at 20% and 11%, respectively. Nevertheless, the attitudes and skills of all mental health professionals regarding the treatment of these patients had hardly been studied. Objectives: Develop tools and use them to understand staff attitudes towards BDP patients. Aims:

- (1) To develop two inventories for the measurement of cognitive and emotional attitudes towards borderline personality disorder (BPD) patients and their treatment;
- (2) To use these tools to understand and compare attitudes of psychiatrists, psychologists and nurses toward BPD patients.

Method: Two lists of items referring to cognitive and emotional attitudes towards BPD patients were formulated. Nurses, psychologists and psychiatrist (n=57), working in public psychiatric institutions rated their level of agreement with each item. Both lists of attitudes yielded three factors (cognitive: required treatment, suicidal tendencies, and antagonistic judgment, and emotional: negative emotions, experienced difficulties in treatment, and empathy, respectively).

Results: Psychologists scored lower than psychiatrists and nurses on antagonistic judgments. Nurses scored lower than psychiatrists and psychologists on empathy. Regression stepwise analyses on the three emotional attitudes separately showed that suicidal tendencies of BPD patients mainly explained negative emotions and difficulties in treating these patients. All groups were interested in learning more about the treatment of these patients.

Conclusions: Suicidal tendencies of BPD patients provoke antagonistic judgments among the three professions. Psychiatrists, psychologists and nurses hold distinctive cognitive and emotional attitudes towards these patients. Staff training programs regarding BDP patients should consider these differences and concerns.