



*MBT: Quality in Mind', the implementation of Mentalization-Based Treatment  
in the Netherlands*

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## Summary of dissertation

The overall aim of this dissertation was to investigate the implementation of MBT in the Netherlands. The first two studies on the effectiveness of MBT in the Netherlands, show that MBT which was developed and studied in the UK, can be effectively implemented by an independent institute in a naturalistic setting outside the UK while maintaining its beneficial treatment outcomes. The findings strengthen the confidence that manualized day hospital MBT is an effective treatment for patients with severe BPD. Treatment outcome results were (at least) equal to the original UK results. Furthermore, the body of evidence of the effectiveness of MBT was extended by showing that the long-term effectiveness of day hospital MBT is beyond the benchmark provided by a mix of specialized psychotherapy programs for BPD. MBT seems to be one of the more promising treatments for BPD.

In the last three studies of this dissertation, a start was made studying key factors in the implementation of MBT in the Netherlands. The findings indicated that the implementation of MBT programs in the Netherlands is associated with mixed outcomes at best. The results suggest that the course of implementation was influenced by multiple factors at organizational, team and therapist level. Although each implementation trajectory constitutes its own unique story, involving local issues and specific team cultures, the results yield suggestive evidence for some more generic barriers and facilitators across all implementation trajectories. Facilitators to successful implementation include the presence of organizational support, sound financial management, strong and consistent leadership, highly structured project-based implementation, managing (negative) team processes, team composition, therapist selection and competencies, sufficient expertise, structural supervision and training opportunities. The absence of these elements were found to be barriers to successful implementation.

Lastly, even when MBT is successfully implemented, the sustainability of implementation of evidence based treatment programs for personality disorders is an important issue; it is difficult to stay 'on model' and maintain treatment outcome within changing contexts and systems.