

## **1. Define NSSI behavior.**

Non-suicidal self-injury (NSSI) behavior is self-harming behavior without intent to commit suicide. Some of the self-harming behaviors are self-cutting, overdosing, substance abuse and other risky behaviors. NSSI is common in borderline personality disorder. According to Perez et al. (2020), theories explain the main component of NSSI is emotional dysregulation. People tend to engage in self harm behavior to feel good when they are emotionally overwhelmed.

## **Discuss how the psychiatric mental health nurse practitioner (PMHNP) differentiates between NSSI and suicide attempts.**

It is difficult to differentiate between NSSI and suicide attempts as they both involve self-injury. PMHNP can differentiate between NSSI and suicide attempt by interviewing patient thoroughly. If the patient who have involved in self harm expresses the feelings of hopelessness, worthlessness and wish to be dead, we know it's suicide attempt but if the patient expresses that they are emotionally overwhelmed and self-harming reduces their emotional pain or make them feel better, that's a sign of NSSI.

## **2. Discuss evidence-based therapy for BPD. How does therapy interrupt the patterns of NSSI and suicidality?**

There are many evidence-based effective therapies available for BPD, most common being Dialectical behavioral therapy (weekly individual and weekly group). It is effective therapy and easily accessible. It is available as individual therapy, group therapy, phone consultation and consultation team. Its main goal is to increase interpersonal skills and decrease self-harming behavior. DBT teaches mindfulness, distress tolerance, emotion regulation and interpersonal effectiveness. Mentalization is another type of therapy for BPD. This therapy helps patient be aware of one's own mental state and of others. "MBT is based on a theory that borderline personality symptoms, such as difficulty regulating emotions and managing impulsivity, are a result of patients' reduced capacities to mentalize" (Boland et al., 2022). Transference-focused psychotherapy diminishes the need for splitting, improves object relation, and functioning in BPD. Dynamic deconstructive psychotherapy (DDP) is the newer psychotherapy treatment for BPD and is significantly effective treatment. The quasi- randomized observational study shows