

Identifying and Treating Self-Harm Behaviors in Children and Youth

DATE & TIME:

January 26, 2026

9:00AM – 12:00PM

Sign-in begins 15 minutes prior to the training time. All participants must arrive during the sign-in period. Late arrivals will not be admitted.

PLACE:

Web Broadcast – MS Teams

REGISTRATION:

<https://eventshub.dmh.lacounty.gov/>

DESCRIPTION: The training equips participants to accurately identify, assess, and treat Non-Suicidal Self-Injury (NSSI), including how NSSI functions as a coping strategy for distressing affective states (anger, depression, mixed emotions), how it differs from suicidal behavior, and how it co-occurs with common internalizing and externalizing conditions. Grounded in the Integrated Core Practice Model (ICPM), the curriculum emphasizes collaborative, family-centered care across prevention; engagement and teaming; assessment and functional analysis with suicide-risk screening; planning and implementation (evidence-supported psychotherapy, caregiver coaching, and indications for psychopharmacology referral); measurement-based monitoring/adaptation; and transition/aftercare. Participants will practice developmentally appropriate strategies that strengthen safety planning, reduce crisis utilization, and improve engagement in the public mental health system (not private practice).

TARGET AUDIENCE: **DMH staff and contractor provider staff delivering specialty mental health services to children/youth and their families.**

OBJECTIVES:

As a result of attending this training, participants should be able to:

1. Describe three (3) distinctions between non-suicidal self-injury (NSSI) and suicidal behavior and two (2) indicators requiring immediate suicide-risk intervention.
2. Identify four (4) common functions of NSSI and two (2) co-occurring internalizing/externalizing conditions using an ICPM-aligned assessment and functional analysis.
3. Create an individualized, developmentally appropriate treatment and safety plan that specifies teaming roles (youth/caregiver/provider), select two (2) evidence-supported interventions (e.g., DBT-A, CBT, family-based, art based interventions), and include monitoring/adapting and transition steps.
4. Apply LGBTQAI+-affirming, culturally responsive care by naming three (3) risk/protective factors (e.g., minority stress, family acceptance, school climate), discussing two (2) engagement strategies (e.g., honoring chosen name/pronouns, confidentiality planning), and identifying one (1) resource/referral.

CONDUCTED BY:

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COORDINATED BY:

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DEADLINE:

January 25, 2026

**CONTINUING
EDUCATION:**

None

COST:

None