

## Mental Health & Suicide

- Boys commit suicide at a rate approximately 3.5 times that of girls.
- For every 100 girls aged 15-19 who commit suicide, 549 boys age 15-19 commit suicide.
- Boys experience socio-emotional difficulties at a rate almost twice that of girls. (Socio-emotional difficulties are defined as, “moderate to severe difficulties with emotions, concentration, behavior, or getting along with other people.”)
- Evidence suggests that over 90% of children and adolescents who commit suicide have a mental disorder.
- Females aged 12-17 are more likely to receive counseling and treatment for mental health problems than males of the same age.
- Approximately 2/3 of adolescents and children with major depressive disorder also have another mental disorder, most commonly dysthymia, an anxiety disorder, a disruptive or antisocial disorder, or a substance abuse problem.
- Studies have indicated a possible link between inadequate maternal supervision and control and the presence of both a conduct disorder and depression, suggesting that parental behavior may sometimes influence the onset of both conditions.
- Children and adolescents suffering from depression feel sad, unloved, pessimistic (or hopeless) about the future, and may be irritable (with that irritability occasionally leading to aggressive behavior). Children suffering from depression tend to be indecisive, have difficulty concentrating, may appear lethargic, suffer from disturbed sleep patterns, or neglect their appearance or personal hygiene.
- In contrast to adult experiences of depression, depressed children are more likely to demonstrate anxiety (such as fear of separation or reluctance to meet new people) and somatic symptoms such as headaches, stomach pains, or more general aches and pains.
- Bipolar disorder, in which periods of depression alternate with periods of mania, can first appear in adolescence and can be difficult to correctly identify due to the gaps between manic periods and depressive periods. Mania differs significantly from depression, and is characterized by periods where an adolescent may feel especially energetic and confident. While he or she may have difficulty sleeping, the manic child will not appear tired, and may tend to talk a lot, both loudly and rapidly. Other characteristics of mania in adolescents include a tendency to do work very quickly, though in a disorganized way, overconfident (or even delusional) thoughts about their abilities, displaying reckless or risky behavior, and beginning numerous new projects (though not finishing them).