life itself. The high suicide attempt rate among adolescents and young adults may be related to the growing number of young people in the general population, the weakening of family ties, the increased availability of drugs among the young, and the broad media coverage of suicide attempts by the young. The rate of suicide among American Indian teens is twice as high as that among white American teens and three times as high as the African, Hispanic, and Asian American teen suicide rates.

In Western society, the elderly are more likely to commit suicide than people in most other age groups. The loss of health, friends, control, and status may produce feelings of hopelessness, loneliness, depression, or inevitability in this age group.

TREATMENT AND SUICIDE TREATMENT Treatment may follow a suicide attempt. In such cases, therapists seek to help the person develop a better perspective and better ways of handling stress and solving problems.

Over the past 50 years, emphasis has shifted to suicide prevention. Suicide prevention programs include 24-hour-a-day hot lines and walk-in centers staffed largely by paraprofessionals who follow a crisis intervention model. Although specific suicide prevention techniques vary from therapist to therapist or from center to center, the approach developed originally by the Los Angeles Suicide Prevention Center continues to reflect the goals and techniques of many clinicians and organizations. During the initial contact at the center, the counselor has several tasks, including establishing a positive relationship, understanding and clarifying the problem, assessing suicide potential, assessing and mobilizing the caller’s resources, and formulating a plan. Beyond initial assessments and interventions, most suicidal people also need longer-term therapy. In a still broader attempt at prevention, suicide education programs for the public are on the increase.

Chapter 14: Disorders of Childhood and Adolescence

CHILDHOOD ANXIETY DISORDERS Emotional and behavioral problems are common in childhood and adolescence, but in addition, at least one-fifth of all children and adolescents in the United States experience a diagnosable psychological disorder.

Anxiety disorders are particularly common among children and adolescents. This group of problems includes adult-like disorders and unique childhood patterns such as separation anxiety disorder, which is characterized by excessive anxiety, often panic, whenever a child is separated from a parent. Various treatments have been applied to childhood anxiety disorders, including play therapy.

CHILDHOOD MOOD PROBLEMS Depression is found in 2 percent of children and 8 percent of adolescents. In recent years, the TADS study and FDA “black box” ruling have raised questions about the most appropriate treatments for teens with depression. In addition, the past two decades have witnessed an enormous increase in the number of children and adolescents who receive diagnoses of bipolar disorder. Such diagnoses are expected to decrease now that DSM-5 has added a new childhood category, disruptive mood dysregulation disorder.