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Target	Indicator	Value	Year
Health (SDG 3)	Adolescent mortality rate	128.7/100,000 <sup>a</sup>	(10 – 19-year-olds   2015)
	Suicide mortality rate	4.2/100,000 <sup>a</sup>	(10 – 19-year-olds   2016)
	Suicide ideation (deaths)	17.6% <sup>b</sup>	(13 – 19-year-olds   2011)
	Adolescent fertility rate	68/1,000 <sup>c</sup>	(15 – 19-year-olds   2017)
	HIV-prevalence rate	11.3% females 3.7% males <sup>d</sup>	(15 – 24-year-olds   2018)
	HIV-incidence rate	1.59% females 0.49% males <sup>d</sup>	(15 – 24-year-olds   2017)
	ART-initiation rate (among those living with HIV)	39.9% <sup>e</sup>	(15 – 24-year-olds   2017)
	Viral suppression rates (among those on ART)	47.7% <sup>e</sup>	(15 – 24-year-olds   2017)
Education (SDG 4)	Completed primary education	95% <sup>f</sup>	(20 – 24-year-olds   2014)
	Completed secondary education	49% <sup>f</sup>	(20 – 24-year-olds   2014)
	Proficiency in mathematics and language in grade 9	Language = 48% Maths = 3% <sup>g</sup>	Grade 9 learners
Clean water and sanitation (SDG 6)	Access to improved sanitation	82.5% <sup>h</sup>	(15 – 24-year-olds   2016)
Gender equality (SDG 5)	Contraception use (any modern method)	24.9% <sup>i</sup>	(15 – 19-year-olds   2016)
Decent work and economic growth (SDG 8)	Unemployment	27.0% <sup>j</sup>	(15 – 24-year-olds   2018)
	Not in employment, education or training	36.6% females 31.2% males <sup>k</sup>	(15 – 24-year-olds   2018)
Peace and violence prevention (SDG 16)	Homicide mortality rate	8.22/100,000 <sup>l</sup>	(10 – 17-year-olds)
	Physical abuse by an adult	34.8% <sup>m</sup>	(15 – 17-year-olds)
	Lifetime sexual abuse	35.4% <sup>m</sup>	(15 – 17-year-olds)
	Lifetime forced sex (attempted or took place)	11.7% <sup>m</sup>	(15 – 17-year-olds)

Source:

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Review Article

Autism spectrum disorder and its differential diagnosis: A nosological update

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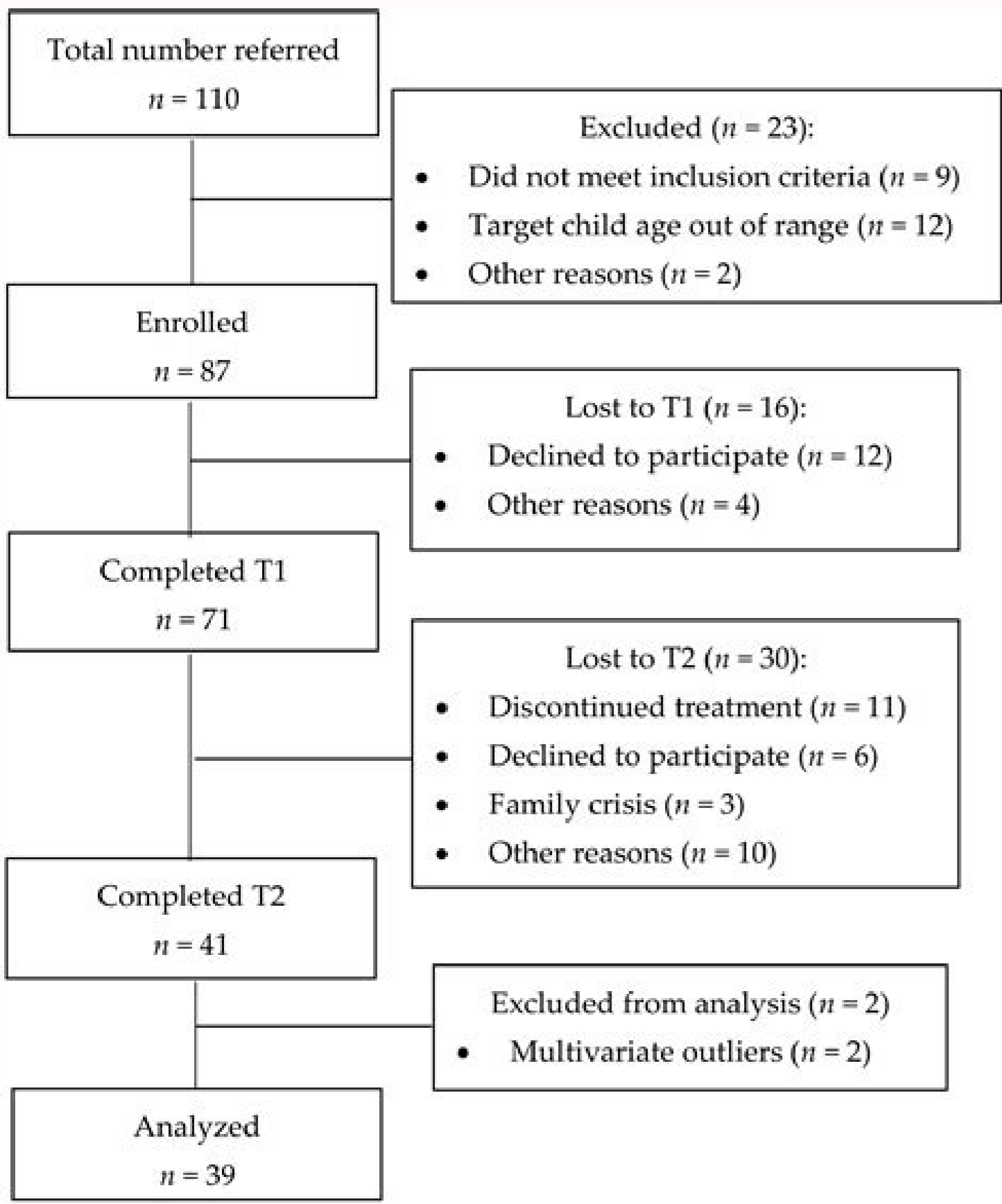
Abstract

Autism spectrum disorder (ASD) is a neurodevelopmental disorder, often presenting in early childhood with restricted and repetitive behaviors, interests and activities and significant impairment in social communication. The objective of this review is to sensitize mental health professionals and clinicians for the varying clinical presentation of ASD, key differentiating features from other disorders, and updating diagnostic criteria as per recent nosological advances, as timely diagnosis and early intervention is significant for long term course and prognosis.

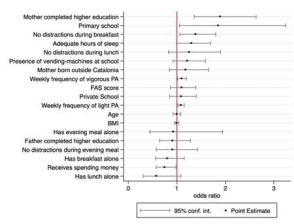
**Keywords:** Autism, autism spectrum disorder, ASD, differential diagnosis

Introduction

Timely diagnosis is vitally important as early intervention initiation may improve the outcome of behavioral problems, functional skills, and communication difficulties. To start comprehensive treatment at younger ages, clinicians are trying to diagnose these disorders at the earliest. International classification of diseases, tenth revision (ICD-10) classifies autism under Pervasive developmental disorder (PDD) [1] and Diagnostic and statistical manual of mental disorders,



TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
3:30pm - 4:20pm	Check in Diary Cards Setting Goals Lekani, LMFT Michael, LMFT	Check in Diary Cards Mindfulness Exercise Lekani, LMFT Michael, LMFT	Check in Diary Cards Mindfulness Exercise Lekani, LMFT Michael, LMFT	Check in Diary Cards Goal Review/Weekend Planning Lekani, LMFT Michael, LMFT	Individual and Family Therapy Sessions
3:50pm - 4:20pm	Psycho-Education Group Understanding Mental Health Purpose and Hope Lekani, LMFT Michael, LMFT	Dialectical Behavioral Therapy (DBT) Group Emotion Regulation, Distress Tolerance, Interpersonal Effectiveness, Walking the Middle Path Lekani, LMFT Michael, LMFT	Self-Care Group Medication Management Substance Use - Alcohol, Symptoms, Risk and Treatment Following Doctors Orders Exercise, Nutrition Sleep Hygiene Lekani, LMFT Kyla, LMFT	Dialectical Behavioral Therapy (DBT) Group Emotion Regulation, Distress Tolerance, Interpersonal Effectiveness, Walking the Middle Path Lekani, LMFT Michael, LMFT	Make up IOP Sessions
4:20pm - 4:30pm	Break	Break	Break	Break	
4:30pm - 5:20pm	Life Skills Groups Community Integration Stress Management Impulse Control Managing Social Media Michael, LMFT	Expressive Arts Group Appie Dancers, Manipulation Towers, Sensory Boxes, Hand Tracing/Social Connection Mood and Movement Collage Your Feelings Lekani, LMFT Michael, LMFT	Music Therapy Group Jean Marks, Certified Music Therapist 4:30pm - 5:30pm	Gender Specific Groups Improving Self Talk Body Image Health Education Healthy Relationships Bullying Lekani, LMFT Michael, LMFT	
5:20pm - 5:30pm	Break	Break	Break 5:30pm - 5:40pm	Break	
5:30pm - 6:30pm	Cognitive Behavioral Therapy (CBT) Group Challenging Your Cognitive Distortions (En) Anxiety Depression Lekani, LMFT Michael, LMFT	Parenting Group Wendy Michael, LMFT	Multi-Family Group Wendy Michael, LMFT	Individual and Family Therapy Sessions Licensed Clinicians 4:30pm - 5:30pm	
6:30pm	Program Ends	Communication Skills Group Family Dynamics, Boundaries Improving Communication, Ending Destructive Relationships Lekani, LMFT	Trauma Group Grief and Loss Self-Soothing Techniques Mindfulness to Gratitude Rupa Ward, AMFT	Stress Management Group Mindful Breathing, Loving Kindness Meditation, Safe Place Visualization Rupa Ward, AMFT	Program Ends



Medical review from cydney ortiz, psyd - written by karen sosnoski, phd - updated on 27 March 2022prevalencesymptomscauseseffectsdiagnosis treatment to helprecapchildhood is not always "usually". depression among children is common and can be serious, but it is curable. share on pinterestcan children experience depression? Yes, here's what to know and how to help. It is natural for children to have tears and fears. But if persistent sadness exceeds your son's interests and relationships, depression may be a cause. depression will not disappear with a new toy, a better vote or a game, but can be handled with therapy, healthy routines and medications. Knowing the symptoms and causes of childhood depression can help you respond effectively. depression among young people is increasing. in 2021, a systematic review and a meta-analysis in 29 samples that involve almost 81,000 people found that 1 out of 4 children aged between 4 and 17 showed signs of high symptoms of depression. Researchers suggest that although childhood depression is not a novelty, pandemic almost doubled its rates due to social distance, health losses and remote learning. the authors of the study emphasize that during the pandemic, children have undergone significant interruptions in their daily life, including: in progress the milestones of social isolation have increased family stress has educated peer interaction researchers say that it is "all potential precipitating psychological difficulties and mental health difficulties in young people". the review also suggested that girls show higher depression rates than boys. vulnerable social racism, discrimination and increased exposure to violence can cause a. irlta. irlta id enoisserep 'Aip A study of the transversal section of 2021 suggests that of 375 participants, 148 ETHEDERD children of Età between 12 and 18 years of age showed depression and slightly high anxiety compared to their brothers and peers Cisgender. This is despite perceiving more anxiety and depression. The authors of the transversal study note that their research was limited by the overpartation of white and financially wealthy young people with higher levels of education of parents. Further research in racial, socioeconomic and gender groups are needed to better understand childhood depression for different individuals. Often infantile depression is erroneously identified as laziness by caregiver or erroneously diagnosed as ADHD or other behavioral disorders. While the main symptom of the depression for adults is of low mood, in children and adolescents, the main symptom can present as an irritable mood, according to the diagnostic and statistical manual of mental disorders, 5th edition, (DSM-5). In addition to irritability, the symptoms observed in children can include: signs exchanged for laziness, such as: disinterest at stake, friends or activities usually enjoy the school; drop degrees of energy difficulty with focusleeping a lot or much less than typical for them that eat more or less than usual (you may notice annual physicists who do not satisfy the expected weight gain) exchanged for behavioral disorders, such as: irritability problemsSadness and tires stomach pains and thoughts of Madacheseexercising of suicide or self-harm, a factor causes depression in children. The factors that contribute include: childhood traumaloss of friends or family of life events stressful medical disease or co-accumulation of mental health conditioning or inequalities such as poverty o Food in some cases in some cases, it is possible to reduce sympathy for children who experience social stress, that can influence depression. The CDC offers resources resources azzilitu ocotg id aiparet aL. gnipoc id. Àtiliba evoun erarapmi ebbertop onmbah out II. enoisserep al onanzeulfni ehc evittesorp eL e oreinsed id iledom i eraciftned rep elitu erezse 'Àup) TBCI avitnecg elatnematropmoc aiparet aL. ollevrec len enimret ognul e a ivitisop itnemaimbac erazneulfni id otartsomid ah aiparetocisp aL. enoisserep alla erubirtnoc onnosop ehc itnemites i e ezeirpse el erarolpe onimbab ortsov li erauia 'Àup ocinlic II. enoizazrevnoc id aiparet amaibic



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