Oppositional Defiant Disorder - Conduct Disorder

ODD or CD?

Oppositional Defiant Disorder is abbreviated ODD. These children are negative, hostile, and defiant. They have temper tantrums, argue, deliberately annoy people, blame others for their mistakes, are easily annoyed by others, and are often angry, spiteful or vengeful. They have a low frustration tolerance and easily lose their temper. They initiate confrontations and exhibit excessive levels of rudeness, uncooperativeness and resistance to authority. Frequently, this behavior is most evident in interactions with adults or peers whom the child knows well.

CD is the abbreviation for Conduct Disorder. Their behavior violates the law and the basic rights of others. Examples include theft, cruelty to animals, bullying, assault, destructiveness, fire setting, truancy and running away. Children with CD are 5 times more likely to be addicted to cigarettes, 6 times more likely to be alcoholics, 7 times more likely to use marihuana. Many consider that ODD represent a less severe type of conduct disorder.

All children are oppositional from time to time, particularly when tired, hungry, stressed or upset. They may argue, talk back, disobey and defy parents, teachers and other adults. Oppositional behavior is often a normal part of development for two to three-year-olds and early adolescents. However, openly uncooperative and hostile behavior becomes a serious concern when it is so frequent and consistent that it stands out when compared with other children of the same age and developmental level, or if it affects the child's social, family, or academic life.

What causes ODD?

The cause of Oppositional Defiant Disorder is unknown. It may be related to the child's temperament and the family's response to that temperament. It may be caused by a chemical imbalance in the brain. A predisposition to ODD is inherited in some families. If a parent is alcoholic and has been in trouble with the law, their children are three times more likely to have ODD. Approximately 10% of all school-age children have ODD. It is more common in boys than girls.

It is important to look for other disorders which may be present, such as attention deficit hyperactive disorder (ADHD), learning disabilities, mood disorders (depression, bipolar disorder) and anxiety disorders. It may be difficult to improve the symptoms of ODD without treating the coexisting disorder.

How is ADD and ODD different?

ODD is characterized by aggressiveness, but not impulsiveness. With ODD people annoy you purposefully, while it is usually not so purposeful in ADHD. ODD signs and symptoms are much more difficult to live with than ADHD. ADHD sometimes goes away, but ODD rarely does. ODD is not characterized by poor social skills. Children with ODD can sit still.

Children and adolescents with ADHD alone do things without thinking, but not necessarily aggressive things. An ADHD child may impulsively push someone too hard on a swing and knock the child to the ground. He would likely be sorry. A child with ODD plus ADHD might push the kid out of the swing and say he didn't do it and then brag about it to his friends later. ADHD plus ODD children and adolescents get in a lot of trouble because their impulsiveness and hyperactivity often lead to fights, rough play and huge temper tantrums.

Treatment

Treatment of ODD usually consists of group, individual and/or family therapy and education, keeping a consistent daily schedule, support, limit-setting, discipline, consistent rules, having a healthy role model to look up to, training in how to get along with others, behavior modification and sometimes residential treatment, day treatment and/or medication.
What happens to these children when they grow up?
Some, but not all, children outgrow ODD. Aggressive two year-olds are likely to be aggressive 20 year-olds. Most of these children do not become criminals. However, there is a higher risk if a biologic parent was a career criminal. The child may continue to have ODD. By the end of elementary school, about 25% will have a mood or anxiety problem.

It is quite common not to like these children. Children and adolescents with ODD plus ADHD are difficult to be with. The destructiveness and disagreeableness are purposeful. They like to see you get mad. Every request can end up as a power struggle. Lying becomes a way of life, and getting a reaction out of others is the chief hobby. Perhaps hardest of all to bear, they rarely are truly sorry and often believe nothing is their fault. After a huge blow up, the child with ODD is often calm and collected. It is the parents who look as they are going to lose it, not the child. This is understandable. The parents have probably just been tricked, bullied, lied to or have witnessed temper tantrums which know no limits.

What can a parent do?
A child with ODD can be very difficult for parents. These parents need support and understanding. Parents can help their child with ODD in the following ways:

• Always build on the positives, and give the child praise and positive reinforcement when he shows flexibility or cooperation.

• Take a time-out or break if you are about to make the conflict with your child worse, not better. This is good modeling for your child. Support your child if he decides to take a time-out to prevent overreacting.

• Pick your battles. Since the child with ODD has trouble avoiding power struggles, prioritize the things you want your child to do. If you give your child a time-out in his room for misbehavior, don't add time for arguing. Say "your time will start when you go to your room."

• Set up reasonable, age appropriate limits with consequences that can be enforced consistently.

• Maintain interests other than your child with ODD, so that managing your child doesn't take all of your time and energy. Try to work with and obtain support from the other adults (teachers, coaches or spouse) in dealing with your child.

• Manage your own stress with exercise and relaxation. Use respite care as needed.

How can the child help?
• Attend therapy sessions.
• Use self-time-outs.
• Identify what increases anxiety.
• Talk about feelings instead of acting on them.
• Find and use ways to calm yourself.
• Remind yourself often of your goals.
• Get involved in tasks and physical activities that provide a healthy outlet for your energy.
• Learn how to talk with others.
• Develop a predictable, consistent, daily schedule.
• Figure out ways to have fun and feel good.
• Learn how to get along with other people.
• Find ways to avoid getting too riled up.
• Learn to admit mistakes in a matter-of-fact way.

Other Sources
They are available from the ADD WareHouse
(954) 792-8944

The Explosive Child Ross Greene, Ph.D.

Managing Oppositional Youth: Effective Strategies for Managing the Behavior of Hard to Manage Kids and Teens! (a Video) by Arthur Robin Ph.D. and Sharon Weiss, M.Ed.

Your Defiant Child. 8 Steps to Better Behavior by Russell Barkley, Ph.D.

The Bipolar Child by Demitri Papolos, MD

Hiperactivo, Impulsivo, Distrado. Me concoces? by Jose Bauermeister, Ph.D.

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