

EBS for Disruptive &

This article, the fourth in our series*, is about two disruptive mental health disorders in children and teens --Oppositional Defiant Disorder and Conduct Disorder. After describing these disorders, we'll talk about the **evidence based services** (EBS) or interventions that have been scientifically proven to have a positive effect in their treatment.

The section on 'what works' has been taken from the "**Summary of Effective Interventions for Youth with Behavioral and Emotional Needs**", by Hawaii's Evidence Based Services Committee. A complete copy of this 2002 report is available on the Internet at www.state.hi.us/doh/camhd.

Of course, no intervention or medication is 100% effective with all kids, and a number of promising practices in the field of children's mental health have not been studied thoroughly enough to receive an EBS rating. If you are a parent of a child whom you suspect may have one of these disruptive disorders, or if you are that child's teacher, we hope this information can be the starting point for discussing where to look for help.

The category of disruptive disorders includes Attention-Deficit/Hyperactivity Disorder (AD/HD) which was discussed in our May issue. Oppositional Defiant Disorder and Conduct Disorder are both characterized by aggressiveness, antisocial behavior, and a tendency to bother and irritate others on purpose. There are, however, differences in the diagnoses.

Oppositional Defiant Disorder - ODD

To be diagnosed with ODD a child or teen would have to show *a pattern of negative, hostile and defiant behavior lasting at least 6 months during which four or more of the following symptoms are present:*

- ◆ often loses temper
- ◆ often argues with adults
- ◆ often actively defies or refuses to comply with an adults's requests or rules
- ◆ often deliberately annoys people

- ◆ often blames others for his or her mistakes or behavior
- ◆ often is touchy or easily annoyed by others
- ◆ often is angry and resentful
- ◆ often is spiteful and vindictive

Symptoms usually begin to surface by the pre-school years. The estimates of how many kids under 17 have ODD range from 3% - 15%. Other disorders that commonly occur with ODD are ADHD (30-40%), and depression or anxiety (20% or more). Sometimes children with ODD will develop a Conduct Disorder.

Conduct Disorder

While kids with ODD can be annoying, a child with a conduct disorder can be a threat to the safety of himself or others. To receive a diagnosis of CD, a child or teen must have shown a *repetitive and persistent pattern of behavior in which the basic rights of others or major society rules are violated*. At least three of the following must be present for a year, and one for at

least six months:

Aggression to people and animals

- ◆ often bullies, threatens or intimidates others
- ◆ often initiates physical fights
- ◆ has used a weapon that can cause serious physical harm to others (a bat, brick, knife, gun, etc.)
- ◆ is physically cruel to animals
- ◆ is physically cruel to people
- ◆ has stolen while confronting a victim

Destruction of property

- ◆ has deliberately engaged in fire setting with the intention of causing serious damage
- ◆ has deliberately destroyed other's property other than by fire setting

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* For copies of past articles on ADHD, depression and anxiety, call or e-mail SPIN.



Aggressive Behaviors

Deceitfulness or theft

- ◆ has broken into someone else's house or car
- ◆ often lies to get goods or favors or to avoid work
- ◆ has stolen items of value without confronting a victim (shoplifting, forgery)

Serious violation of rules

- ◆ often stays out at night despite parent's prohibitions, beginning before age 13
- ◆ has run away from home overnight at least twice without returning home for a long period
- ◆ often skips school before age 13.

Like ODD, conduct disorders commonly occur with other disorders. 30-50% of kids with conduct disorder also have ADHD. Other combinations with conduct disorder include depression, anxiety, learning disabilities, bipolar disorder, Tourette Syndrome and drug or alcohol abuse.

What works with ODD and CD?

THERAPY

When the Evidence Based Committee reviewed the many studies around treatments for ODD and conduct disorders, they found that **parent and teacher training in behavior management** provided the *best support* or evidence that it was effective in reducing the

Services that work:

For ODD and Conduct Disorders:

Parent and teacher training in behavior management, anger coping therapy, assertiveness training, problem solving skills training, rational emotive therapy, MST, AC-SIT, Fast Track and PATHS

Medications that work:

Lithium provides short term relief of symptoms for aggressive disorders

symptoms. *Good support* was found for **anger coping therapy, assertiveness training, problem solving skills training and rational emotive therapy. Multisystemic Therapy (MST)** provided good *support* to students who had gotten in trouble with the law.

Several school-based programs also have shown *good support*. **Anger Coping-Self Instruction Training (AC-SIT)** and the **Fast Track** program helped reduce disruptive and aggressive behavior. The **Promoting Alternative Thinking Strategies (PATHS)** program helped increase students' ability to identify and manage emotions.



MEDICATION

The EBS committee reviewed studies on three medications that are known to help steady moods. Carbamazepine (Tegretol®) and Valproate (Depakote® and Depakene®) have shown mixed results in treating aggression and conduct disorder. The third drug, Lithium, was shown to be helpful in reducing symptoms in the short term. Unfortunately, all of these drugs can cause serious side effects and must be monitored closely. If a child has a diagnosis besides ODD or conduct disorder (for example, ADHD) doctors advise trying the drugs for that condition first.

When should I get help?

Early intervention is extremely important in helping children with ODD and conduct disorders succeed in school and community life. Parents need support, too. These kids can be a big challenge, and the more information and training families have, the better they are able to avoid World War III at the breakfast table.

If you suspect your child of having ODD or a conduct disorder, ask your child's teacher or principal for help. All schools have school based behavioral health services and can help steer you toward evaluation and services to meet your child's needs.