

ODD

Oppositional Defiant Disorder

Oppositional Defiant Disorder (ODD), is the most common psychiatric problem affecting children. Its main features are aggressiveness & desire to disrupt or bother people.

Symptoms & Diagnosis

It is estimated that 5% of children & teens have ODD. More commonly, it is diagnosed along with another neuropsychiatric disorder, like ADHD, depression or an anxiety disorder. **If a child is diagnosed with ADHD, they are 30-40% likely to also be diagnosed with ODD.**

Symptoms include-

- **At least twice a week-** losing one's temper and/or actively defying adults requests or rules
- **At least once a month-** acting out of spite or revenge and/or blaming others for their mistakes or misbehaviour.

If your child exhibits these behaviours, it is important that they see a professional for a diagnosis as other disorders, including sleep disorders, may also cause these kinds of behaviours. It is important that the child be properly diagnosed in order to receive appropriate treatment.



Living with ODD

Living with ODD is difficult. Children with this disorder are usually manipulative and able to convince others of their innocence. Sometimes these children are seen as *con artists*, as they are able to pit one parent against the other, or their teacher against their family. Their behaviour can be so extreme, that parents and/or teachers will give in, to get temporary peace- this is counterproductive. The best strategy to **contain ODD**, is to make it extremely difficult for the child to annoy people and cause conflict. Three ways to limit ODD are-

Speak directly to those involved, rather than through the child.

For example, if the child with ODD tells you something about someone, make it a policy not to rely on what the child with ODD says. **Check it out independently.** Make sure that all those involved with the care of the child are aware of this policy and agree to adhere to it. Do not include the child with ODD in these discussions or policy. It will be more effective if they are not aware of the specifics. In fact, meet regularly with those involved with the child's care, regardless of any specific incident.

Have a plan to modify the child's behavior & always adhere to it no matter how angry you may get.

Make sure that everyone follows the same plan. For example, a good plan targets specific behaviours, and has rewards and punishments. Instead of targeting *being bad*, target something more specific, like hitting. Ensure the punishment is geared to the child. For example, if your child likes TV, set the punishment at no TV for a week. Everyone must stick to the plan. This means that if mom catches the child hitting, the pre-established punishment must be enforced by everyone, not just mom. No TV at home, at school, at a friend's house, at grandparent's house, etc.

Four year old Frederick has been diagnosed with ODD. He constantly yells and breaks things. He lies and deliberately disobeys his parents and teachers. He likes to annoy people. For example, if he is playing loudly and asked to quiet down, he proceeds to yell as loudly as possible. Frederick has no friends. Try as they may, most of his family members and teachers cannot stand him.

Pick your battles. Having a child with ODD is overwhelming and exhausting. And when overwhelmed, parents can overreact or ignore the pre-set plan. Therefore, it is important to learn to ignore certain stressors and let others go altogether. A child with ODD is often simply looking to provoke a reaction- if none is forthcoming, they may abandon this behaviour *over time*. For example, if a child makes a rude comment, simply ignore it rather than scold them. **Remind yourself that some days will be better than others, and that the child's ODD cannot be eliminated overnight.**



Prognosis

The good news is that about 50% of preschoolers with ODD will outgrow it by age 8. As well, the disorder responds well to therapeutic approaches and well-defined behavior modification plans. Certain prescription drugs have also been shown to have a positive effect on behavior. **If you suspect your child may have ODD, take them to see their pediatrician or family doctor.**

**Do not ignore your own mental health,
as having a child with ODD results in significant stress.
Consider talking to a counsellor about your feelings.**

Your EFAP can help.

YOUR LOGO

**For confidential assistance
Brown Crawshaw 1.800.668.2055
www.browncrawshaw.com**