



Oppositional Defiant Disorder Quick Fact Sheet for Parents/Guardians and Child Serving Professionals

This fact sheet is intended to be used to enhance the understanding about the mental health issues that may be encountered in children and adolescents. It should never be used to formulate a diagnosis. Mental health diagnoses should be made only by a trained mental health professional after a thorough evaluation.

What is Oppositional Defiant Disorder?

Oppositional Defiant Disorder, or O.D.D. is a behavioral disorder of childhood and adolescence marked by defiant, argumentative, negative behavior. Children and adolescents with O.D.D. are often angry, antisocial, disruptive and disrespectful. However, their behaviors are generally not dangerous, destructive, criminal, or aggressive. Students with O.D.D. may engage in overt misbehavior or may attempt to control their environment more covertly.

Some defiance of authority is normal and to be expected in children and adolescents. The behavior of students with O.D.D, however, stands out as being more persistently disruptive than that of their peers to the point that it impairs their ability to function effectively at home and/or school.

The symptoms of O.D.D. often first emerge gradually in the home environment, but eventually move out into other settings, such as school and the community. Behavior problems are often most evident in the presence of adults that the student knows well. If untreated, the disruptive behaviors tend to escalate with age, and may develop into a more serious problem that is difficult to treat.

Cultural Considerations

Oppositional Defiant Disorder is believed to result from a combination of genetic and environmental variables. Children whose families are coping with high levels of stress due to poverty, unsafe neighborhoods, and violence in the home are at greater risk of developing O.D.D. When evaluating a child's behavior, always consider whether the oppositional behavior may play a self-protective purpose for the student in an unsafe environment.

Prevalent Signs & Symptoms of O.D.D.

- Persistent arguing with adults, especially those in positions of authority
- Refusal to comply with rules or requests by adults or others in positions of authority
- Behavior that is deliberately annoying or irritating to others; being easily annoyed or irritated by others
- Blaming others for one's own mistakes; refusing to take responsibility for own actions
- Sudden, unprovoked anger and/or temper outbursts
- Spiteful and/or vindictive behavior

Developmental Variations

Early Childhood

(@ 3-6 years old)

ODD is not typically diagnosed before the age of 8, because argumentativeness and overt challenges to authority are to be expected in early childhood. None the less, excessive amounts of overtly oppositional behavior may be observed, e.g.:

- Temper tantrums
- Non-compliance
- Hyperactivity or high motor activity
- Irritability
- Impulsivity
- Difficult to soothe
- Power struggles with parents around eating, toileting, sleeping, and speaking

Middle Childhood

(@ 7-12 years old)

Boys are diagnosed with ODD more often than girls in this age bracket. The disruptive behaviors tend to be overt in nature, meaning they cause direct confrontation or disruption with others.

- Unusually low or high self-esteem
- Mood swings
- Easily frustrated
- Frequent swearing
- Alcohol and/or drug abuse
- Frequent conflict with parents, teachers, and/or peers
- Emergence of ADHD, Learning Disorders, and Communication Disorders

Adolescence

(@13-18 years old)

While boys are more frequently diagnosed in early and middle childhood, the gender gap disappears in adolescence. The disruptive behaviors in this age bracket are sometimes covert, meaning they may occur without adult awareness.

- Lying
- Alcohol and/or drug abuse
- Limited personal insight
- Mild physical aggression
- Obscene language
- Procrastination
- Low self-esteem
- Power struggles surrounding cleaning up after oneself, bathing, curfew, homework, and school attendance
- May agree to adult requests and then deny having done so at a later time
- May claim not to be able to hear adults although hearing test normal

Educational Implications

Students with Oppositional Defiant Disorder are often non-compliant; they may refuse to follow instructions or complete assignments, making it difficult for them to master new material. In addition, in an unconscious effort to maintain their control, students with O.D.D. may sabotage efforts on the part of schools and parents to provide positive relationships, experiences, and reinforcement.

Students with ODD often struggle with peer relationships due to their alienating behavior. Because of repeated interpersonal and academic failure, students with ODD often develop a negative self image and low self-esteem which further diminishes their motivation to succeed.

Additionally, these student often develop a reputation with adults for being difficult to manage, and adults' low expectations of these youngsters can perpetuate the negative cycle.

Chittenden County Oppositional Defiant Disorder Resources

- Visit www.ptophelp.org to locate mental health providers who address ODD in children and adolescents in your community.
- Dial 2-1-1 to reach Vermont 2-1-1, a statewide health and human services information and referral program where you can get person to person assistance to find Oppositional Defiance Disorder resources in your community.

Additional Resources

Students FIRST Project
www.studentsfirstproject.org

School Psychiatry Program
Massachusetts General Hospital
www.schoolpsychiatry.org

Center for Mental Health in Schools
<http://smhp.psych.ucla.edu>

National Alliance on Mental Illness
www.nami.org

Vermont Parent Information Center
www.vtpic.com

American Academy of Child and Adolescent Psychiatry
www.aacap.org

IVillage
<http://emotional.health.ivillage.com>

Call First Call for Children and Families at 488-7777 for crisis services for children and adolescents