



MONTHLY MENTAL HEALTH NEWSLETTER

Presented by the Gwinnett County Sheriff's Office Mental Health Task Force

In This Issue:

Oppositional Defiant Disorder



What is Oppositional Defiant Disorder (ODD) ?

Oppositional defiant disorder (ODD) is a type of clinical behavior disorder. Most cases are diagnosed in childhood. Children with ODD are uncooperative, defiant, and hostile toward peers, parents, teachers, and other authority figures. They appear to have no sense of empathy at times and are not concerned with expected norms of behavior in any given situation or environment.

Symptoms of ODD

- Having frequent temper tantrums
- Arguing a lot with adults
- Refusing to do what an adult asks
- Always questioning rules and refusing to follow rules
- Doing things to annoy or upset others, including adults
- Blaming others for their own misbehaviors or mistakes
- Being easily annoyed by others
- Often having an angry attitude
- Speaking harshly or unkindly
- Seeking revenge or being vindictive, and destructive

Children with ODD may present the behaviors above without regard to the consequences.

What Causes ODD?

There are two main theories regarding the causes of ODD in children:

The Developmental theory suggests that it starts when children are toddlers. Children and teens with ODD may have had trouble developing and learning to be independent from their parents or main caregivers. It appears they are behaving as a toddler and did not develop beyond that stage as older children and teens.

The Learning theory suggests the symptoms of ODD are learned attitudes. They mirror the effects of negative reinforcement methods used by parents and others in power. The use of negative reinforcement increases the child's ODD behaviors, because these behaviors allow the child to get what he or she wants, which is attention and reactions from parents or others.

Treatment for ODD

Early treatment is preferable. Treatment will depend on the child's frequency and severity of symptoms, age, health, and parental involvement. Children may have to try different therapies and different clinicians before treatment shows results. Consistency is crucial.

Treatment modalities include; Cognitive-Behavioral therapy, Family therapy and Peer Group therapy or combinations of all of three.

Life with a child or teen with ODD

Obviously it is not uncommon for any child to argue with or disobey their parents or teachers. Many kids will behave this way when they are tired, hungry, or upset. Children and teens with ODD, present with these symptoms much more often and for no apparent rational reason.

ODD behaviors will interfere with learning and school adjustment. In many cases the ODD child is unable to socialize or adapt to social norms with other children. ODD can create tremendous barriers for a child's social development and their overall ability to make and sustain friendships. They may have a very low tolerance for the needs of others.

A child with ODD may fall behind academically due to their unwillingness and inability to follow instructions in school, but they also fall behind developmentally in their social growth and awareness. This developmental barrier can affect them through their teens and into their young adult life.

REFERENCES

The G.C.S.O. Mental Health Task Force encourages you to utilize the sources listed below and the Substance Abuse and Mental Health Services Administration (SAMHSA) at www.samhsa.gov to learn more about this and other important mental health topics.

Diagnostic Statistical Manual –V, American Psychiatric Association, Washington, DC. June 2013

https://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/Children-With-Oppositional-Defiant-Disorder-072.aspx

<https://my.clevelandclinic.org/health/diseases/9905-oppositional-defiant-disorder>

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