

ODD Symptom Informational Sheet

ODD:

- is a behavioral diagnosis
- thought to be a combination of biological, psychological and societal factors
- often comorbid with ADHD
- often seen in families with a history of ADHD, substance use disorders, and/or mood disorders (e.g. depression or bipolar)
- has been associated with lack of structure or parental supervision
- has been associated with lack of warmth and responsive parenting
- has been associated with inconsistent parenting and discipline
- has been associated with verbal and physical abuse or community violence
- signs and symptoms resolve within 3 years in approximately 67% of children
- is associated with a later diagnosis of Conduct Disorder in 30% of the cases
- is associated with a lasting personality disorder, such as Anti-Social Personality Disorder, in 10% of children with the ODD diagnosis
- has differential diagnoses of Conduct Disorder, Disruptive Mood Dysregulation Disorder, Attention-Deficit/Hyperactivity Disorder, Depressive Disorder, Bipolar Disorder, Social Anxiety Disorder, Intermittent Explosive Disorder, Intellectual/Developmental Disorder, Language Disorder
- and ADHD appear to have shared genetic factors with a comorbidity of 50 to 60%
- affects between 2% and 11% of children in the population
- is more commonly diagnosed in boys than girls
- is comorbid with an anxiety disorder in 40% of children with ODD while an anxiety disorder is only diagnosed in up to 10% of the regular population

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Children with ODD:

- may have subtle differences in the part of brain responsible for reasoning, judgement, and impulse control (suggested by brain imaging studies)
- may have trouble identifying and interpreting cues from peers and adults
- overattribute hostile intent in neutral situations leading to aggression
- generate fewer solutions to problems than their peers
- expect to be rewarded for their aggressive impulses
- in preschool are at an increased risk for later diagnosis of mood, conduct, attention and anxiety disorders later in childhood
- can benefit from treatment, especially treatment focused on intervening with the parents of these children (e.g. parent management)
- may exhibit callous/unemotional traits
- are often diagnosed with the following assessment measures completed by two adults from two different settings in the child's life: Child Behavior Checklist, Reacher Report Form, Conners 3, Vanderbilt ADHD Diagnostic Parent Rating Scale, and/or the Swanson, Nolan, and Pelham Teacher and Parent Rating Scale
- with no other comorbid diagnosis do not usually qualify for a Individualized Education Plan (IEP) because it is considered a behavioral disorder and not an emotional disturbance/disability
- do better with warm, responsive parenting, inductive discipline and preventative planning for emotional reactions
- are challenging for parenting and often influence parenting styles/interactions
- and ADHD can be partly differentiated from children with only ADHD by parenting styles