

Conduct Disorder

What is Conduct Disorder?

"Conduct disorder" refers to a group of behavioral and emotional problems in youngsters. Children and adolescents with this disorder have great difficulty following rules and behaving in a socially acceptable way. They are often viewed by other children, adults and social agencies as "bad" or delinquent, rather than mentally ill. Many factors may contribute to a child developing conduct disorder, including brain damage, child abuse or neglect, genetic vulnerability, school failure, and traumatic life experiences.

What causes Conduct Disorder?

The etiology of conduct disorder involves an interaction of genetic/constitutional, familial and social factors. Children who have conduct disorder may inherit decreased baseline autonomic nervous system activity, requiring greater stimulation to achieve optimal arousal. This hereditary factor may account for the high level of sensation-seeking activity associated with conduct disorder. Current research focuses on defining neurotransmitters that play a role in aggression, with serotonin most strongly implicated.

Parental substance abuse, psychiatric illness, marital conflict, and child abuse and neglect all increase the risk of conduct disorder. Exposure to the antisocial behavior of a caregiver is a particularly important risk factor. Children with conduct disorder, while present in all economic levels, appear to be overrepresented in lower socioeconomic groups. Another common feature appears to be inconsistent parental availability and discipline. As a result, children with conduct disorder do not experience a consistent relationship between their behavior and its consequences.

This early childhood pattern includes irritability, inconsolability and impaired social responsiveness. Caregivers, particularly those with psychiatric conditions and substance abuse problems, may respond to these children coercively and inconsistently. In addition, these family groups often experience financial distress, which may further complicate the situation. These children are also more susceptible to the rise in peer group influence that typically occurs in later elementary school.

Does my child have Conduct Disorder?

Children or adolescents with conduct disorder may exhibit some of the following behaviours:

- Aggression to people and animals
- bullies, threatens or intimidates others
- often initiates physical fights
- has used a weapon that could cause serious physical harm to others (e.g. a bat, brick, broken bottle, knife or gun)

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- is physically cruel to people or animals
- steals from a victim while confronting them (e.g. assault)
- forces someone into sexual activity

Destruction of Property

- deliberately engaged in fire setting with the intention to cause damage
- deliberately destroys other's property

Deceitfulness, lying, or stealing

- has broken into someone else's building, house, or car
- lies to obtain goods, or favors or to avoid obligations
- steals items without confronting a victim (e.g. shoplifting, but without breaking and entering)

Serious violations of rules

- often stays out at night despite parental objections
- runs away from home
- often truant from school

What can I do?

Children who exhibit these behaviors should receive a comprehensive evaluation by an experienced mental health professional. Many children with a conduct disorder may have coexisting conditions such as mood disorders, anxiety, PTSD, substance abuse, ADHD, learning problems, or thought disorders which can also be treated. Research shows that youngsters with conduct disorder are likely to have ongoing problems if they and their families do not receive early and comprehensive treatment. Without treatment, many youngsters with conduct disorder are unable to adapt to the demands of adulthood and continue to have problems with relationships and holding a job. They often break laws or behave in an antisocial manner.

Treatment of children with conduct disorder can be complex and challenging. Treatment can be provided in a variety of different settings depending on the severity of the behaviors. Adding to the challenge of treatment are the child's uncooperative attitude, fear and distrust of adults. In developing a comprehensive treatment plan, a child and adolescent psychiatrist may use information from the child, family, teachers, community (including the legal system) and other medical specialties to understand the causes of the disorder.

Behavior therapy and psychotherapy are usually necessary to help the child appropriately express and control anger. Special education may be needed for youngsters with learning disabilities. Parents often need expert assistance in devising and carrying out special management and educational programs in the home and at school. Home-based treatment programs such as

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Multisystemic Therapy are effective for helping both the child and family. Treatment may also include medication in some youngsters, such as those with difficulty paying attention, impulse problems, or those with depression.

Treatment is rarely brief since establishing new attitudes and behavior patterns takes time. However, early treatment offers a child a better chance for considerable improvement and hope for a more successful future.

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