

Conduct Disorder

- Talk with a mental health or social services professional, such as a teacher, counselor, psychiatrist, or psychologist specializing in childhood and adolescent disorders.
- Get accurate information from libraries, hotlines, or other sources.
- Talk to other families in their communities.
- Find family network organizations.

People who are not satisfied with the mental health services they receive should discuss their concerns with their provider, ask for more information, and/or seek help from other sources.

What can schools do?

- Learn more about conduct disorder, including recent research on effective treatment approaches.
- With the parents explore the treatment options available. Treatment must be individualized to meet the needs of each child and should be family-centered and developmentally and culturally appropriate.
- Help the family to find a support group or organization in your community.

Important Messages About Children's and Adolescents' Mental Health

- Every child's mental health is important.
- Many children have mental health problems.
- These problems are real and painful and can be severe.
- Mental health problems can be recognized and treated.
- Caring families and communities working together can help.

References

- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text revision). Washington, DC: Author. U.S.
- Department of Health and Human Services. (1999). *Mental Health: A Report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services.

Resources

For more information contact UPLIFT. Contact information on front cover.

UPLIFT has a lending library available with more information on conduct disorder.

Mental Health America
www.nmha.org

National Institute of Mental Health
www.nimh.nih.gov

Substance Abuse and Mental Health Services Administration
<http://mentalhealth.samhsa.gov>

This brochure is intended for informational purposes only and not to replace professional evaluation and treatment.

This publication was made possible by funding from the Wyoming Department of Health, Mental Health and Substance Abuse Services Division.

Published April 2010

EDUCATIONAL SERIES



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What is Conduct Disorder?

Children with conduct disorder (CD) repeatedly violate the personal or property rights of others and the basic expectations of society. A diagnosis of conduct disorder is likely when symptoms continue for 6 months or longer. Conduct disorder is known as a "disruptive behavior disorder" because of its impact on children and their families, neighbors, and schools.

Another disruptive behavior disorder, called oppositional defiant disorder, may be a precursor of conduct disorder. A child is diagnosed with oppositional defiant disorder when he or she shows signs of being hostile and defiant for at least 6 months. Oppositional defiant disorder may start as early as the preschool years, while conduct disorder generally appears when children are older. Oppositional defiant disorder and conduct disorder are not co-occurring conditions.

What are signs of conduct disorder?

- Aggressive behavior that harms or threatens other people or animals;
- Destructive behavior that damages or destroys property;
- Lying or theft;
- Truancy or other serious violations of rules;
- Early tobacco, alcohol, and substance use and abuse; and
- Precocious sexual activity.

Children with conduct disorder or oppositional defiant disorder also may experience:

- Higher rates of depression, suicidal thoughts, suicide attempts, and suicide;
- Academic difficulties;
- Poor relationships with peers or adults;
- Sexually transmitted diseases;
- Difficulty staying in adoptive, foster, or group homes; and
- Higher rates of injuries, school expulsions, and problems with the law.

How common is conduct disorder?

Conduct disorder affects 1-4% of 9 to 17 year-olds, depending on exactly how the disorder is defined (U.S. Department of Health and Human Services, 1999). The disorder appears to be more common in boys than in girls and more common in cities than in rural areas.

Who is at risk for conduct disorder?

Research shows that some cases of conduct disorder begin in early childhood, often by the preschool years. In fact, some infants who are especially "fussy" appear to be at risk for developing conduct disorder. Other factors that may make a child more likely to develop conduct disorder include:

- Early maternal rejection;
- Separation from parents, without an adequate alternative caregiver;
- Early institutionalization;
- Family neglect;
- Abuse or violence;
- Parental mental illness;
- Parental marital discord;
- Large family size;
- Crowding; and
- Poverty.

What help is available for families?

Although conduct disorder is one of the most difficult behavior disorders to treat, young people often benefit from a range of services that include:

- Training for parents on how to handle child or adolescent behavior.
- Family therapy.
- Training in problem solving skills for children or adolescents.

Community-based services that focus on the young person within the context of family and community influences.

What can parents do?

Some child and adolescent behaviors are hard to change after they have become ingrained. Therefore, the earlier the conduct disorder is identified and treated, the better the chance for success. Most children or adolescents with conduct disorder are probably reacting to events and situations in their lives. Some recent studies have focused on promising ways to prevent conduct disorder among at-risk children and adolescents. In addition, more research is needed to determine if biology is a factor in conduct disorder.

Parents or other caregivers who notice signs of conduct disorder or oppositional defiant disorder in a child or adolescent should:

- Pay careful attention to the signs, try to understand the underlying reasons, and then try to improve the situation.