**Teaching and Managing Children with Oppositional Defiant Disorder**

Oppositional Defiant Disorder is term given to describe when a child displays a certain pattern of behaviours that includes losing their temper frequently, defying adults, being easily annoyed and deliberately annoying others.

The key elements displayed by children with ODD include the following characteristics:

- Argues with Adults
- Refuses and Defies
- Angry and Defensive
- Spiteful and Vindictive

In essence these children display a "counter- will" against authority especially when frustrated or stressed. They are often completely inflexible in these situations and the more pressure which is applied to make them conform the greater the opposition. These are the children who say “you can't make me”, “it's not fair” “get out of my face,” “I will sue you”

Gritting of teeth and holding back the urge to scream “I will see you in court” are to be advised.

The reasons and origins of this condition are difficult to clearly detect but this pattern of behaviour will indicate frustration and intolerance as a result of a range of issues. This could include learning and behavioural needs for example unrecognised ADHD or Dyslexia. Other reasons can be lack of structure and attachment in early child development, low academic and self worth or a combination of the above.

Douglas Riley in his excellent book The Defiant Child (1999) defines some of their behaviours of children within this spectrum as

- They live in fantasy land where they can defeat all authority figures
- They are optimistic and fail to learn from experience
- You must be fair to me no matter how I treat you
- Seek revenge when angered
- Need to feel tough
- Feel you will run out of moves eventually
- Feel equal to their parents
- Emulate the behaviour of their least successful peers
- Answer most questions with “I don’t know”
- Logic revolves around denial or responsibility

Children with ODD are into power and are extremely good at pushing emotional buttons.

As a result in terms of counterbalancing some of the issues mentioned above try to observe the following 3 DON’Ts.

DON’T send them to the Principal/Head teacher when they have transgressed as they like challenging authority. Instead have them cool their heels in a time out area until they are calm and collected.

DON’T get into public arguments with them as they love to use the public domain to air their views. Instead talk to them in a one to one situation.

DON’T be drawn into arguments. It takes 2 people to conduct an argument …..if the child “says this lesson is boring and I hate you”……..it is better to respond……….yes you may think this lesson is boring but please finish questions 1 to 5 before the break”

Overall the key is to use assertive language for example the extremely powerful and effective phrase “I need you to finish the assignment” as opposed to “will you” or “can you” finish the assignment. Other assertive sentence starters could be:

- Let’s………..
- In five minutes you will have………..
- When I return I will see……………..
- Today we are going to……………..
- You will be…………………..
- I expect you to………………
- I know that you will……………..
- Thank you for…………………..
ODD is diagnosed in the same way as many other psychiatric disorders in children which involve a multi-modal diagnosis including a review of the family and medical history.

Over 5% of children have ODD and although in younger children it is more common in boys than girls, as they grow older, the rate appears to be roughly equal in males and females.

It is exceptionally rare for a child just to have ODD as usually there will be ADHD or Conduct Disorder as well however it is worth making the point that ODD is characterized by aggressiveness and not impulsiveness. With ODD the behaviour can often be premeditated while it is usually not so purposeful in ADHD.

As a result children with ODD are often more difficult work with than children ADHD. Though the children with ADHD are “high maintenance” individuals due to their hyperactive symptoms children with ODD are usually deliberate and vindictive in their actions. For example a child with ADHD may impulsively push someone too hard on a swing and knock the child down on the ground. They would often show empathy however afterwards. In contrast a child with ODD might push another child out of the swing and say she didn’t do it and appear either not to care or blame the child for being on the swing in the first place.

General strategies and approaches are as follows:

- Keep reading the mood of the child
- Always focus on the incident not the child, don’t personalise
- Try to provide a “save face” option in front of peers/siblings by providing a choice of outcome
- Remove the audience factor, try and talk to them quietly on a 1:1 basis where possible and remind them of past successes and capabilities - try to find something positive to say first for example.

"Do you want to move closer to the board or remain where you are?"

"Is that what you want? What are you going to choose?"
Other options include

- Be prepared to go into the “broken record” mode at times and don’t get into drawn into smokescreen behaviour
- Use of humour if appropriate and try to find the positives in any situation
- Give them a responsibility
- Isolate them to avoid peer reinforcement and embarrassment and let them have their say
- Give clear messages about negative behaviours and costs
- Ask moral questions
- Focus on moving forward but also dig for an apology

It can sometimes be difficult to like children with ODD. The destructiveness and disagreeableness are purposeful. They like to see you get mad. Every request can end up as a power struggle. Lying becomes a way of life, and getting a reaction out of others becomes their chief hobby. Perhaps hardest of all to bear, they rarely show empathy and often believe nothing is their fault. After a huge blow up, the child with ODD is often calm and collected. It is often the teacher who looks as if they are going to lose it, not the child. This is understandable as they have been probably just been tricked, bullied, lied to or have witnessed temper tantrums which know no limits.

In summary children with ODD produce strong feelings in people. They spend their time trying to get a reaction and they are often very successful in achieving this objective. The key therefore is to “stay the course” take nothing personally, deny them the emotional reaction that they expect to receive and deliver outcomes in a kindly but determined manner

The key to buying a house they say is location, location and location. For successful management of children with ODD the principles would be patience, patience and patience. Good luck!

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