

# Oppositional Defiant Disorder

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The **Inclusion Strategies Series** provides practical, simple and effective strategies that educators can implement as part of their day to day practice.

Oppositional Defiant Disorder (ODD) is a childhood behavioural disorder characterised by constant disobedience and hostility.

Around one in 10 children under the age of 12 years are thought to have ODD, with boys outnumbering girls by two to one.

ODD is one of a group of behavioural disorders known collectively as disruptive behaviour disorders, which include Conduct Disorder and Attention Deficit Hyperactivity Disorder.

Children with untreated ODD may continue to be difficult and anti-social into their adult years. This can impact on their relationships, career prospects and quality of life.

Some children with ODD will develop a more serious conduct disorder which is characterised by aggressive, criminal

and violent behaviours.

ODD behaviours usually surface when the child is at primary school but the disorder can be found in children as young as three years of age.

The cause of disruptive behaviour disorders is unknown but the quality of the child's family life seems to be an important factor in the development of ODD. ODD needs to be professionally diagnosed by a child psychologist, child psychiatrist or paediatrician specialising in behavioural disorders.

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## Effects on Developmental Areas May Include

### Social and Emotional

- Difficulty in making and sustaining friendships.
- Exclusion from social experiences.
- Attacks of rage and aggression and loss of temper.
- Deliberately annoying others.
- Being touchy or easily annoyed by others.
- Being spiteful or vindictive.

### Physical Development

- Developmental delays due to lack of experiences.

### Language and Communication Development

- Being unable to understand or use appropriate forms of communication.
- Difficulty in making or expressing choices in a socially appropriate manner.
- Arguing with adults.
- Actively defying or refusing adults' requests or rules.

### Cognitive

- Learning difficulties.
- Being unable to remain at activities for a period of time due to a lack of attending skills.
- Requiring instructions and directions to be repeated 2 or 3 times, and needing time to process information before responding or acting.



- Delays in skills of concentration, memory and ability to generalise.

**'When presenting an activity, explain what you are doing as you are doing it. You can also use this time to give clear instructions, and encourage turn taking and sharing.'**

- Having difficulty understanding concepts of turn taking, sharing and how to enter into play situations.
- Blaming others for misbehaviour or mistakes.



## Inclusion Strategies

### Social Development

- On arrival and farewell and when wanting the child's attention, say the child's name first to catch his attention, e.g. "Jack, good morning." rather than "Good morning, Jack."
- When presenting an activity, explain what you are doing as you are doing it. You can also use this time to give clear instructions, and encourage turn taking and sharing.
- Provide a quiet area with objects for the child to explore independently.
- Let other children know what the child is doing to reinforce the concept of him being part of the group.
- Do this with all children, e.g. "Look, Jack is doing a puzzle as well."
- To assist with the development of friendships, provide small group activities with one or two children.
- Develop consistent rules and limits which are applied to all children in care.
- Choose reasonable consequences that teach a lesson and that can actually be enforced.

### Physical Development

- Keep things in the same place to assist the child to be able to move from one place to another. If you change the environment, walk and talk this through with the child.
- Provide finger plays to develop fine motor skills and to encourage the

use of both hands in a controlled manner.

- Check how busy the environment looks with pictures on walls; things hanging from ceiling; activities on floor. Reduce the confusion with plain surfaces and clearly defined areas.

**Language Development**

- Use large clear pictures to reinforce what you are saying.
- Paraphrase what the child has said.
- Reduce the number of instructions in one statement to allow time for the child to gain an understanding of what has been said, e.g. “Hold the puppet up high” rather than “Hold the puppet up high and wave it around so that all the children can see it.”
- Once the child understands “Hold

the puppet up high” you can then add “Good, now all the children can see it.”

- Ascertain from parents, words that their child is familiar with, e.g. family words that represent aspects of their child’s life. Use these words in your program.

**Cognitive**

- Gain information from parents about their child’s likes, interests and dislikes and incorporate these into your program.
- Break tasks down into smaller steps, e.g. place one puzzle piece at a time and gradually work towards completing the puzzle, rather than expecting the puzzle to be finished in one go.
- Allow the child time to complete

tasks and practice skills at his own pace.

- Provide consistent warnings when preparing for transition times.
- Acknowledge the child’s level of achievement, e.g. “You placed that piece in the puzzle, well done!” rather than just “Good boy.”
- Limit “screen time”, i.e. any activity such as TV, video games, computers etc.

**References:**

Kutscher Martin L. Kids in the Syndrome mix of ADHD, LD, Aspergers, Tourette, Bipolar and More (2005)

Noah’s Ark Children’s Services Resource Unit, Fact Sheet—Oppositional Defiant Disorder (2012)



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**Important things to remember:**

- Each child diagnosed with an additional need will be different and individual.
- Gain information from the parents as to what characteristics of the additional need their child displays.
- Work closely with the parents as well as any additional support specialists, e.g. therapists who may be involved with the child.
- Gain an understanding from the parent as to what is the most important aspect of their child attending your service. What is it that parents hope to gain from using your service?

The inclusion strategies featured in this fact sheet are just some examples which may be applied to support the inclusion process. This list is only the start and is dependent on a variety of factors such as environment, length of time the child is in care, the child’s interest, likes, dislikes and skills already achieved.