



Conduct Disorder

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What Is Conduct Disorder?

Conduct Disorder, a pattern of socially disruptive behavior, can develop along with ADHD. Conduct Disorder also occurs without ADHD. Children with Conduct Disorder exhibit a long-term pattern of disobeying accepted social rules and violating others' rights. Younger children with Conduct Disorder are sometimes cruel to animals, deliberately set fires, or intentionally destroy property. Whereas many young children are aggressive and disobedient at times, the child with Conduct Disorder does not seem to learn from the consequences of punishment, and the behavior becomes more severe.

As they become older, children with Conduct Disorder tend to have little concern about the effects of their behavior on others and have difficulty understanding another person's perspective. Among teenagers, Conduct Disorder takes the form of running away from home, truancy, multiple school suspensions, and illegal behavior such as burglary, theft, and vandalism. Whereas ADHD behavior is typically unplanned and impulsive, adolescents with Conduct Disorder are more likely to be somewhat deliberate about choosing misbehavior. Children with ADHD are likely to feel bad if they have harmed someone impulsively or broken something, but those with Conduct Disorder experience little guilt. Children with Oppositional Defiant Disorder are argumentative and annoying to others, but they usually are not physically aggressive and do not break the law.

How Common Is Conduct Disorder?

Conduct Disorder occurs in 6% to 16% of boys under the age of 18 and in 2% to 9% of girls (American Psychiatric Association, 1994). Researchers have suggested that this problem is becoming increasingly common, particularly in large urban areas. Approximately one of every five boys with ADHD also has Conduct Disorder. This increases to around 40% in adolescence. Boys with Conduct Disorder are more likely to be aggressive and engage in stealing and vandalism; girls are more likely to run away from home, be truant from school, and engage in high-risk sexual behavior.

Does the Child's Age Influence Conduct Disorder?

There are two types of Conduct Disorder, one that begins in childhood (before age 10) and a form that develops later

(beginning after age 10). Children with early childhood histories (around 6 to 7 years of age) of disturbed behavior such as repeated fire setting, aggression, and cruelty to animals are very likely to have more serious problems as they get older. Early identification and vigorous treatment of those children can prevent more disturbing behavior from developing. Early intervention is important because children who have been consistently aggressive and destructive throughout childhood are unlikely to change dramatically after age 13 (Comer, 1995). Children who begin developing problems only in their teens and those who have milder behavioral difficulties have better treatment outcomes. Girls usually have later onset (in their teens) and are not typically physically aggressive, nor do they commonly engage in overtly illegal acts such as burglary or vandalism.

When Should Parents Become Concerned?

Children frequently have periods during which they are aggressive and disobedient, particularly during preschool and early elementary school years. Parents should become concerned when children have had several school suspensions, have been involved in multiple physical fights, or have had police contact. In addition, preteen and teenage smoking, alcohol use, and sexual activity often are associated with Conduct Disorder. Many inner-city gang members frequently engage in conduct-disordered behavior. However, gang members are often part of a cultural group that provides them with a sense of social connection. In many respects, the gang has become an alternative family for young people with disintegrating family ties. However, a sizable number of adolescents with Conduct Disorder engage in criminal behavior as adults.

What Causes Conduct Disorder?

Conduct Disorder does not have a single cause. A chaotic and inconsistent family environment is an important contributor to Conduct Disorder. Children in these settings typically have long histories of harsh or rejecting parenting and inconsistent discipline. Parents often have difficulty managing behaviors that emerge as overt, destructive conflict and often include physical violence. Children and teenagers who are frequently without adult supervision are at high risk for developing destructive

behavior patterns. Through patterns of poor moral judgment, parents also can fail to teach empathy for others (Comer, 1995).

Treatment of Conduct Disorder

There are several guidelines for treating Conduct Disorder in children. First, intervention should begin as soon as parents or teachers spot a potential problem. Children who have a long-standing history of conduct-disordered behavior are less likely to change as they grow older. Children who are frequently destructive and aggressive throughout childhood and who, in turn, develop more significant illegal and aggressive behavior in adolescence are unlikely to change dramatically after the age of 13 or 14.

Second, parents, teachers, and other adults working with the child must be *consistent*. This principle is far easier said than done and requires a high level of energy and persistence in doing the right thing. There should be a clear, immediate connection between the child's misbehavior and appropriate consequences. Parents will have to ask themselves repeatedly, "Am I being consistent?" "Is the punishment or reward too much or too little for what my child has done?" A combination of rewards for desirable behavior with punishment (such as removal of privileges or time out for a *specific* period for misbehavior) usually will be effective if these are used *consistently*.

To provide this stability, parents need to detach from their strong feelings of anger and frustration. Consider this example: An 8-year-old is on a reward system. If he picks up his room by 5 p.m. for 5 days out of a week, he gets to go out for pizza. The boy has been successful and earned the reward. At 4 p.m. on Saturday, he gets into a shouting match with his mother about whether he has fed the dog. During the argument, he becomes rude and disrespectful to her. If she is acting out of her immediate anger toward the child, the mother is likely to cancel the pizza outing. If the child is out of control, it might be necessary to delay the outing for a period of time until he regains control. However, he has earned the outing successfully, and the parents shouldn't use cancellation as a punishment. There should be a consequence for the refusal to feed the dog (e.g., no video games for the next two days), but the consequence should be unrelated to the reward the child has already earned.

A concern that many parents and teachers voice about reward systems is that children are doing the right thing simply to get something. Parents might be concerned that their child does not have a conscience and is being manipulative to obtain rewards. It is important to recognize that many adults do the right thing as a means of obtaining rewards. Many of us would prefer not to go to work on some days, but we appear at our jobs because we recognize that we won't get paid otherwise. Over time, these children gradu-

ally internalize the standards for appropriate prosocial behavior. Parents can help their children to develop sensitivity and empathy for others by asking them to describe how their actions (grabbing a toy away, hitting a peer) affect the other child. Encouraging the victim to explain his or her feelings to the offender can help children appreciate how their actions harm others physically and emotionally.

As children enter adolescence, the peer group comes to play an important role in development. Although parents still influence important values such as education and religion, the teen's peers affect choices about dress, music, and movies. Because of family distress, teens at risk for Conduct Disorder don't have the moderating influence of parental values. As a result, they can be affected much more readily by the behavior of peers who might be involved in drinking, smoking, early sexual activity, and illegal acts.

Parents should be aware of who their children's friends are, and keep their children away from others who are engaging in illegal and other conduct-disordered behavior. Even parents who monitor their children's whereabouts by phone (which can be the case when both parents work outside of the home) will reduce the likelihood of conduct-disordered behavior. Simply phoning in frequently to check on whether the teenager is at home and what he or she is doing will keep them on track. Encouraging children's involvement in positive social activities such as sports, scouts, choir, and school and church organizations will provide them with a valued role and reduce the influence of deviant peers.

Summary

Although disobedience and testing of limits is common among older children and adolescents, parents should take seriously their children's more grave violations of social rules. Early intervention will prevent antisocial behavior from developing later. Parents should be consistent, persistent, and knowledgeable about their children's friends and whereabouts.

References and Resources

- American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.
- Comer, R. J. (1995). *Abnormal psychology* (2nd ed.) New York: W. H. Freeman

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