MENTAL HEALTH DISORDERS OF CHILDHOOD AND ADOLESCENCE: CONDUCT DISORDER

CONDUCT DISORDER

About Conduct Disorder



A diagnosis of conduct disorder is determined by a pattern of behavior in which an individual violates rules or infringes upon others with aggression, theft, or other inappropriate behavior.

What Does It Look Like?

As identified in the DSM-5,¹ the following symptoms are associated with a diagnosis of conduct disorder. Additional specifiers, such as severity and emotional limitations, are available within the DSM-5 to further clarify a diagnosis.

Theft or Dishonesty

- Steals items or information
- Lies in order to procure items, assistance, or to get out of commitments.
- Illegally enters a building, home, or car that is not one's own

Hostile Behavior

- Uses bullying or intimidation of others.
- Uses a weapon that has the potential to cause significant harm towards others.
- Instigates fights with others.
- Has caused physical harm to others or to animals.
- Has committed rape or other forced sexual interaction.

Property Damage

- Has destroyed property (not with fire).
- Has set fire to cause harm or damage.

Rule Violations

- Frequently breaks curfew, starting before the age of 13.
- Has left home without permission (overnight or longer).
- Engaged in school truancy before the age of 13.

MENTAL HEALTH DISORDERS OF CHILDHOOD AND ADOLESCENCE: CONDUCT DISORDER

Symptoms and Interventions

	Symptoms	Interventions
other pushii Is eng perpe Is trua from s Exper	 Is involved in altercations with other students (hitting, fighting, pushing) 	Consider appropriate seating arrangement for student, avoiding sitting near students with whom the student has had altercations or has bullied
	 Is engaged in bullying (victim or perpetrator) Is truant or frequently absent from school Experiences difficulties with 	 Create lessons or social skills groups to practice alternate behaviors such as conflict resolution and emotional regulation
		Identify supportive figures for student to build relationships with
	peer and staff relationships	Practice calm, positive interactions with student, particularly when student is confrontational or combative
School Work	Cheats or liesDefies directives	Monitor student's completion of assignments as appropriate
	 Is detached or disengaged with assignments and responsibilities 	Avoid using directives that may appear confrontational
	j	 Identify methods of instruction or completion that the student enjoys and responds to (e.g., using the computer, artwork, music)
Desk	 Engages in theft or vandalism Defies directives, such as staying seated or remaining on task 	Monitor student's desk or locker as appropriate, without violating personal privacy or assuming involvement
		Teach social skills for topics such as responsibility, personal privacy and space, and sharing
		Use methods of completing work that utilizes student strengths (e.g., technology)
Outside the Classroom	 Engages in behavior that is considered risky or dangerous Is exposed to trauma or toxic stress outside of the classroom 	Communicate with parents or caregivers to identify patterns in behaviors or events at home that may impact the student's behavior (e.g., lack of sleep)
	Experiences or is engaged in bullying (victim or perpetrator)	 Consider a crisis plan to use for when student is exhibiting violent or dangerous behavior (e.g., staff members who should interact with student)
		Understand student's environment outside of the classroom and provide supports as appropriate and needed
Transitions	Experiences difficulties with unexpected transitions or sched-	Create structured routines and schedules that are predictable
	ule changes	 Work with other staff members to develop consistent rules and interactions (e.g., remaining calm, identifying triggers)

MENTAL HEALTH DISORDERS OF CHILDHOOD AND ADOLESCENCE: CONDUCT DISORDER

Student Strengths

- Smart
- Resilient
- Creative
- Sensitive
- Energetic

References

¹ American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders, fifth edition (DSM-5)*. Washington, DC: Author.

Resources

• Child Mind Institute

http://www.childmind.org/en/health/disorder-guide/conduct-disorder

AACAP

http://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/Conduct-Disorder-033.aspx

• UCLA Center for Mental Health in Schools

http://smhp.psych.ucla.edu/pdfdocs/conduct/conduct.pdf