Oppositional defiant disorder (ODD) is a condition characterized by a persistent pattern of aggressive and defiant behaviour and a need to annoy or irritate others. Common behaviours include frequent temper tantrums, frequent arguing with both peers and adults, intentionally annoying others, blaming others for own mistakes, and appearing angry and vindictive. Oppositional defiant disorder usually shows up in children by eight years of age and sometimes as early as three years. Oppositional defiant disorder may develop as a way of dealing with depression, inconsistent rules or standards, or a traumatic event or situation, such as divorce, trauma or conflict. Treatment for oppositional defiant disorder may include counselling, behaviour therapy, parent education and medication. The number of symptoms tends to increase with age and, if not recognized early, behaviour patterns can become well-established and more resistant to treatment. Students with ODD also may have other disorders and difficulties, such as attention deficit/hyperactivity disorder, learning disabilities or depression, and are at risk for developing conduct disorder. Some younger students exhibiting characteristics of oppositional defiant disorder may develop a more serious conduct disorder later in life.

Implications for Planning and Awareness

- Meet with the student and parents early in the school year to discuss how the school can support this student’s needs related to ODD. This could include:
  - the student’s strengths, interests and areas of need
  - the student’s specific symptoms
  - if the student has any other associated disorders that need to be considered at school
  - successful strategies used at home or in the community that also could be used at school.

- If the student is taking medication during the school day, discuss with the parents possible side effects. Follow school and/or jurisdictional policies and protocols in storing and administering medication.

- Learn as much as you can about how ODD may affect learning and social and emotional well-being. Reading, asking questions and talking to qualified professionals will build your understanding and help you make decisions to support the student’s success at school.

- Collaborate with the school and/or jurisdictional team to identify and coordinate any needed consultation and supports, such as behavioural therapists.

- Develop a system for sharing information with relevant staff members about the student’s condition and successful strategies.
School staff working with the student should be trained in crisis management and non-violent crisis intervention techniques.

Know what your own triggers are to avoid being drawn into a negative interaction pattern with the student.

The physical placement of the student with ODD should be chosen carefully (e.g., who to sit beside, physical distractions, room to move, proximity to the teacher). It is important to avoid choosing a physical location that isolates the student, since this may make other students less willing and able to interact positively with the student.

Create pathways for movement. Pathways should eliminate the need to step over objects or between people.

**Implications for Instruction**

- Anticipate difficulty with anger control. Be proactive in recognizing triggers and plan accordingly. Create a behaviour support plan in collaboration with the school/jurisdictional team, parents and, if appropriate, the student.
- Be aware that students with ODD tend to create power struggles. Avoid these verbal exchanges. Avoid making comments or talking about situations that may be a source of argument.
- Provide clear, specific expectations for behaviour that the student can follow. For example, “I will follow directions.” Use a chart to monitor progress during the day.
- Be clear on what behaviours are not negotiable and what consequences will follow. Be consistent with consequences.
- Use “start” requests rather than “stop” requests. “Do” requests are more desirable than “don’t” requests.
- Make one request at a time, using a quiet voice and, when in close proximity, using eye contact.
- When appropriate, offer a choice (e.g., “Do you want to work at your desk or at the table?”).
- Describe the desired behaviour in clear and specific terms to reduce misunderstanding. Avoid entering into a discussion or argument about the behaviour.
- Ensure that academic expectations are at the appropriate level (e.g., not too difficult, not too easy).
- Support academic success using strategies, such as cues, prompting, coaching, providing positive incentives and breaking down tasks.
- Pace instruction, allowing a preferred activity when a nonpreferred activity has been completed.
- Allow the student to re-do assignments to improve the final grade or score.
- Create a sharp separation between class periods but keep the transition time to a minimum. Minimize “down time” and plan transitions carefully.
- Some students will require a behaviour support plan that outlines strengths, needs, triggers and an intervention plan. When appropriate, involve the student in the development of this plan.
Implications for Social and Emotional Well-being

- Maintain predictable classroom routines and rules for all students.
- Watch for signs of anxiety and consult with the parents and school/jurisdictional team to determine if, and when, further consultation or supports are needed.
- Engage the student and parents in planning for transitions between grade levels and different schools.
- Support the development of self-advocacy skills by providing explicit feedback and encouraging goal setting. When appropriate, involve the student in monitoring the success of supports and strategies used in the classroom.
- Structure activities to build positive peer relationships. Provide cooperative learning opportunities. Ensure that the student with ODD is not always left out or the last one picked by peers.
- Identify a mentor or buddy in the school, with whom the student has a strong, positive relationship and can check in or touch base with throughout the day.
- Systematically teach social skills and strategies that the student can use to cope with frustration and to calm down when angry.
- Speak to the student privately about his or her behaviour instead of in front of others, to prevent loss of face and avoid escalation.
- Teach and encourage the student to remove himself or herself from stressful events and situations by walking away or going to a quiet space away from others.
- To ensure the safety of other students in the classroom, explain to students the importance of walking away from possible confrontations that may lead to aggression.
- Encourage students to get help as soon as they feel the situation is getting out-of-hand.
- Identify the types of activities that are likely to cause frustration and work with the student to actively manage frustration.
- Use praise, when appropriate, to reward good behaviour and build self-esteem. Be aware that students with ODD may have an unusual response to positive reinforcement.
- Identify environments that may be very stressful (e.g., music class, gymnasium, noisy lunch room) and develop strategies for reducing stress in these environments (e.g., use of earplugs, assigned seating in the lunchroom, etc.).
- Give the student advance notice when there will be a change in the schedule or routine (e.g., school assembly, fire drill, a substitute teacher in the classroom).

Parents know their children well and can offer insights on how to support their social and emotional well-being. There is strength in collaborating on strategies that could be used at home, at school and in the community.
As you consider the implications for this disability, think about the following questions:

1. Do I need further conversations with the parents to better understand this student’s strengths and needs?  □ Yes □ No

2. Are further assessments required to assist with planning for this student? If yes, what questions do I need answered?  □ Yes □ No

3. Do I need targeted professional learning? If yes, what specific topics and strategies would I explore?  □ Yes □ No

4. Is consultation with jurisdictional staff required? If yes, what issues and questions would we explore?  □ Yes □ No

5. Is consultation with external service providers required (e.g., Student Health Partnership, Alberta Children’s Hospital, Glenrose Hospital)? If yes, what issues and questions would we explore?  □ Yes □ No

6. Is service to the student from an external provider required? If yes, what outcomes would be anticipated?  □ Yes □ No

Links for further information:


Center for Mental Health in Schools at UCLA. Conduct and Behavior Problems: Intervention and Resources for School Aged Youth. http://smhp.psych.ucla.edu/pdffiles/conduct/conductCONDUCT.pdf

Please note: These websites are for information only and the user is responsible for evaluating the content and appropriate uses of the information.