Preventing and Treating Conduct Disorder in Children and Youth

A RESEARCH SUMMARY FROM THE
Children’s Mental Health Policy Research Program

Our Research Reviews

In 2003, the BC Ministry of Children and Family Development (MCFD) made a long-term commitment to improving the mental health of children and youth in the province. The resulting five-year Child and Youth Mental Health Plan for BC takes a coordinated approach to strengthening prevention and treatment services, monitoring outcomes for children’s mental health and enhancing public accountability for programs and services.

Our program supports MCFD’s Plan by reviewing the best available research evidence on effective strategies for preventing and treating a variety of children’s mental health problems, and by making recommendations to inform the development of related policies and services. Our full report on Preventing & Treating Conduct Disorder in Children is available at: www.childmentalhealth.ubc.ca

Understanding Conduct Disorder in Children and Youth

Conduct disorder differs from childhood mischief or adolescent rebellion. Children with conduct disorder display a persistent and repeated pattern of aggressive, defiant or anti-social behaviour. This behaviour may include aggression toward people, property or animals. Many young people with conduct disorder have other mental health issues that add to their problems coping, including learning difficulties, depression, anxiety or substance abuse.

There is no one “test” to determine if a child or youth has a conduct disorder. Instead, diagnoses are made through assessments and reports from parents, teachers, health professionals and young people themselves.

Where possible, it is important to deal with the underlying social or biological issues that may cause mental disorders to develop. Family disadvantage, genetic makeup or exposure to severe long-term stresses may all affect a child’s development over time and contribute to mental health problems. Research shows children who have been exposed to harsh discipline or inconsistent supervision, or are isolated with antisocial peers, appear to be particularly vulnerable to developing conduct disorder. On the other hand, many factors can protect children from risk. For conduct disorder, these positive factors include having steady adult care-giving and positive emotional supports, good learning abilities and social skills, an easy temperament, a sense of competence and positive beliefs about the world.

While we do not fully know what causes mental health problems to develop in some children and not others, we do know there are effective strategies for both preventing and treating them.

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Conduct disorder is a serious mental health problem affecting more than 40,000 children and youth in BC.

Research evidence indicates that it can be both prevented and treated.

The most promising prevention programs focus on parenting skills and early childhood education in high-risk groups, beginning early in the child's life.

The most promising treatment programs focus on improving parenting skills in high-risk groups.

**Effective Prevention**
The most effective prevention programs for conduct disorder start early in a child's life, before problems become deep-rooted. Programs that aim to help high-risk families, such as home visits by public health nurses, were found to be particularly promising, as were programs that provided early childhood education and support to children.

**Effective Treatment**
Promising treatment programs for conduct disorder focus on enhancing parenting skills and creating support networks for families. Since conduct problems are about social interaction, it is important work with families and communities, not just individual children and youth.

Certain anti-anxiety medications may help in severe situations, but should only be used with careful monitoring given the potential for side effects.

**Recommendations from the Research**
- Make prevention programs part of the spectrum of mental health strategies available to children in BC. Focus on supporting parents and on early childhood education.
- Focus treatment programs on parent training for high-risk groups, and model these after the most promising programs in the research.
- Approaches not supported by the best available research evidence should be carefully evaluated or discouraged. These may include treating children in groups with at-risk peers or conducting one-to-one psychotherapies that do not involve families.
- Ensure all new prevention and treatment programs are consistent with the research evidence or are evaluated to ensure they improve outcomes for children and youth.

**About Us**
The Children's Mental Health Policy Research Program is located within the Department of Psychiatry at UBC. We provide research, education and policy consultation services to build a broad public health strategy to improve the mental health and well-being of children and youth in British Columbia and Canada.