

background

Report # 82

Problem Behaviors And More Serious Disorders

December 2006

Early Problem Behaviors

Something More Serious

For a few children, behaviors are signs of a disorder

Knowing when common problem behaviors, such as tantrums or anxiety, are symptoms of a serious disorder is difficult for most adults who care for young children, including parents, child care staff, and preschool teachers. That is why they are urged to consult with a professional when a disorder is suspected.

Professionals rely on several sets of guidelines developed from years of research to help them make a diagnosis and sort out normal variations of behavior and short-lived difficulties from behaviors that indicate a more serious problem that could worsen over time without proper intervention.

Problems seen among young children are usually defined as internalizing behaviors or externalizing behaviors. Internalizing behaviors include worry, anxiety, sadness, and social withdrawal and represent self-focused expressions of distress. Externalizing behaviors include tantrums, defiance, fighting, and impulsivity. Externalizing disorders that apply to preschool-aged children include oppositional defiant disorder and attention deficit hyperactivity disorder.

The American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders provides developmental guidelines for such disorders in young children. A companion volume, published by the American Academy of Pediatrics, also offers guidelines helpful in distinguishing typical variations in behavior from behaviors that indicate a serious problem.

Oppositional Defiant Disorder

One more serious behavior problem is oppositional defiant disorder

(ODD). Young children with ODD have at least four out of the following symptoms: loses temper, argues, defies or refuses to comply, deliberately annoys others, often blames others, is touchy, is angry, is spiteful.

In addition, this cluster of behaviors must occur more frequently and persistently than is typically seen in children of a similar age and developmental stage. The child's family and social context must also be considered.

Temporary, stressful circumstances, such as the birth of a sibling or family conflict, can lead young children to display behaviors similar to the symptoms of ODD.

ODD can occur in preschool-aged children, more likely in boys. In one study, ODD was by far the most common disorder diagnosed. Among preschool children attending primary care practices, 16.8% of the children met the criteria for at least a probable ODD diagnosis and 8.1% of those showed se-

Related Reports

During the preschool years, it is common for children to display some problem behaviors, such as angry feelings, an unwillingness to comply with adults, failure to follow directions, and squabbles with other children.

See Report 81

vere symptoms.¹ Most cases of ODD did not last over a long period, except when family adversity or harsh parenting were issues.

ADHD

Another common behavior problem is attention deficit hyperactivity disorder (ADHD), especially in boys. ADHD includes six symptoms of inattention and/or six symptoms of hyperactivity/impulsivity, and requires that the symptoms are present for at least six months and seen across a range of settings. A family history of ADHD symptoms is another important indicator.

Symptoms of inattention include not paying close attention to details, trouble holding attention, not seeming to listen, not following instructions, trouble with organizing, avoiding or disliking things that require a lot of mental effort for a long period of time, losing things, being easily distracted, and forgetfulness.

(Continued on back)

(Continued from front)

Symptoms of hyperactivity/impulsivity include fidgeting; talking excessively; and having trouble staying seated, taking turns, and playing quietly. These symptoms, however, are fairly common among young children, which raises concern about the potential for over-diagnosing this disorder.

Separation Anxiety

Separation anxiety disorder is the only anxiety disorder specific to children. At least three symptoms must be present for at least four weeks, and significant distress and/or impaired functioning must occur. Symptoms include repeated excessive stress in anticipation of separation, worry about losing a parent or other attachment figure, school refusal, and fear of being alone or sleeping alone. Nightmares may also occur.

But these symptoms also are common among young children, who may not have the cognitive abilities to understand sudden or dramatic changes in their lives and cannot be expected to cope with certain stressful events.

Symptoms of extreme and long-lasting clinginess and upset, especially in the absence of an obvious stressful event, are more likely to be a sign of serious problems in the family and in the child's relationship with caregivers.²

Parent-Child Problem

Many problems in early childhood are related to the quality of the relationships between parents and their children and to issues such as limit-setting and control. "Parent-child relational problem" may be diagnosed when the child's primary problems stem from parent strategies and behaviors, such as inconsistency or coercive parenting. One study reported parent-child problems as the second most common classification found among preschool children.³ It was most widely identified in a sample of 2-year-olds as the "terrible

twos" emerged. By age four, the condition affected far fewer children.

Family Influences

Children's problems typically arise in the context of the family. Research suggests that the emotional and behavior problems seen among young children often, although not always, warn of problems in the relationships between parents and their children.

Child abuse and neglect are well-documented predictors of adjustment problems in children. Less severe indicators of poor parenting are also influential. For example, punitive, angry, detached, and rejecting parenting behaviors are associated with high levels of non-compliance among children, defiance, temper tantrums, and aggression.⁴

The link between harsh parenting and externalizing behavior among young children suggests that it is important to consider family context when trying to

predict whether a hard-to-manage preschool child will develop more severe and long-lasting problems. Many studies suggest that interventions that modify negative parenting are effective, especially with young children.

Poverty, low maternal education, marital conflict, maternal depression, and single parent status are all associated with higher frequency of early onset behavior problems – particularly externalizing behaviors – that tend to last into middle childhood.⁵

Such findings underscore the challenge of interpreting common behavior problems in young children and the need for understanding developmental and social context, definitions of common behavioral disorders, and other factors in identifying and helping children who are at risk for serious, possibly long-lasting problems. □

references

This report is based on the following publications:

Campbell, S.B. (in press). Maladjustment in preschool children: A developmental psychopathology perspective. Chapter to appear in K. McCartney and D. Phillips (Eds.), *The Blackwell Handbook of Early Childhood Development*.

Campbell, S.B., Shaw, D.S., & Gilliom, M. (2000). Early externalizing behavior problems: Toddlers and preschoolers at risk for later maladjustment. *Development and Psychopathology*, *12*, 467-488.

References noted in the text follow:

¹Lavigne, J.V., Gibbons, R.D., Christoffel, K.K., Arend, R., Rosenbaum, D., Binns, H., Dawson, N., Sobel, H., & Isaacs, C. (1996). Prevalence rates and correlates of psychiatric disorders among preschool children. *Journal of the American Academy of Child and Adolescent Psychiatry*, *35*, 204-214.

²National Center for Clinical Infant Programs (1994). *Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood*. Arlington, VA: Author.

³Lavigne et al., op. cit.

⁴Campbell, S.B., Pierce, E.W., Moore, G., Marakovitz, S., & Newby, K. (1996). Boys' externalizing problems at elementary school: Pathways from early behavior problems, maternal control, and family stress. *Developmental and Psychopathology*, *8*, 701-720.

⁵Ibid.

contacts

Susan B. Campbell, Ph.D., Professor, Developmental Program Chair, University of Pittsburgh Department of Psychology. Contact: Sharon Blake, University of Pittsburgh Office of News and Information, (412) 624-4364.

Children, Youth & Families background is published by the University of Pittsburgh Office of Child Development (OCD), a program of the University of Pittsburgh School of Education. These reports are based on available research and are provided as overviews of topics related to children and families.

OCD Co-Directors: Christina J. Groark, PhD.; Robert B. McCall, PhD.

background Editor: Jeffery Fraser, e-mail: jd.fraser@comcast.net

University of Pittsburgh Office of Child Development, 400 N. Lexington Avenue Pittsburgh, PA 15208; (412) 244-5447; fax: (412) 244-5440

This report and others can be found on the Internet by visiting: <http://www.education.pitt.edu/ocd/family/backgrounders.asp>