

Difference between
adhd, conduct
disorder, oppositional
defiance disorder and
ant...



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Running Head: BEHAVIORAL AND ATTENTION DISORDERS Relationships between CD, ODD, and AD, and ADHD Relationships between CD, ODD, and AD, and ADHD The comorbidity between the behavior disorders CD, ODD and AD (conduct disorder, oppositional defiance disorder and antisocial disorder) and ADHD has been, according to Matthys and Lochman (2010), undervalued as an area of inquiry. The study of the connections between behavior disorders and ADHD could provide a better understanding of both sets of issues, however most often studies have been conducted without the acknowledgement of a connectivity that exists. According to Matthys and Lochman (2010) “ comorbidity is the norm, not the exception”, thus the research that exists that investigates these issues independently has yet to fully reach an understanding of either set of problems as they are becoming more clearly related as they are studied concurrently within subjects who are afflicted (p. 28). Before defining how the disorders are related, it is necessary to know if they are related, but according to the studies that Matthys and Lochman (2010) have investigated, there is more evidence to support the correlated liability model than to support the independent disorders model. There are eighteen behavioral symptoms that are divided into two groups in which nine symptoms each are given under a heading. These two groups are divided by those symptoms that are under the heading of inattention and the other under the heading of hyperactivity-impulsivity. These groups are broken down further to create three basic subtypes of ADHD: combined-type (ADHD-CT), predominantly inattentive type (ADHD-IA), and predominantly hyperactive inattentive type (ADHD-HI). Children who show signs of ADHD-CT will have six out of nine of those symptoms from the inattention group. The other two subtypes show oppositional features where ADHD-IA symptoms

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are shown to be at least six inattention type, with less than six hyperactivity-impulsivity, with ADHD-HI symptoms include at least six hyperactivity-impulsivity, with less than six inattentive symptoms (DePaul & Stoner, 2003).

According to Goldstein (1997), the symptoms of ADHD will often emerge previous to those symptoms of behavioral related disorders. The behaviors that characterize and help to frame behavioral related disorders include “ a pervasive and stable pattern of aggressive and/or covert antisocial behaviors with onset before the age of 15” which are typified by “ disruptive behaviors with deficient emotional reactions to others and to the consequences of one’s own behavior, as well as with dishonest and dominance seeking interpersonal strategies” (Buitelaar, Kan, & Asherson, 2011, p. 175).

Buitelaar, Kan and Asherson (2011) show that children how have ADHD and behavioral related disorders such as CD, ODD and AD, often end up involved in criminal behavior later in life, thus creating a relationship between ADHD, the behavioral disorders, and predilections towards certain types of anti-social activities that can frame the way in which a person exists within society. The problems with these sets of disorders is that to date the genetic or environmental factors that cause the emergence of the symptoms have yet to be identified. It is suggested that there are possible genetic connections to the behaviors and the attention deficits, but these connections are still under review by researchers who have yet to definitively find answers to explain the development of these issues. Where the behavioral disorders are identifiable by their basic anti-social frameworks, ADHD also is behaviorally related with the 18 symptoms being defined by the presence of behavior. Therefore, the connection between these types of disorders makes sense, through connecting those who have both types of

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issues and through understanding the impulsivity that connects all of the disorders that are listed. Where there seems no explanation for the reasons all of the behaviors and symptoms emerge, context can be seen in the consistency with which these disorders seem to emerge within the same individuals, and in the shared outcomes towards lifelong anti-social behavior.

References Buitelaar, J. K., Kan, C. C., & Asherson, P. (2011). ADHD in adults: Characterization, diagnosis, and treatment. Cambridge: Cambridge University Press. DuPaul, G. J., & Stoner, G. D. (2003). ADHD in the schools: Assessment and intervention strategies. New York: Guilford Press. Goldstein, S. (1997). Managing attention and learning disorders in late adolescence and adulthood: A guide for practitioners. New York: J. Wiley. Matthys, W., & Lochman, J. E. (2010). Oppositional defiant disorder and conduct disorder in childhood. Chichester, West Sussex, UK: Wiley-Blackwell.