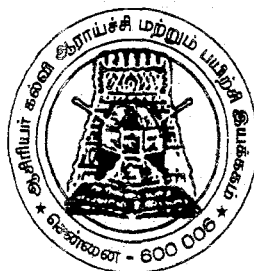


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BEHAVIOURAL AND ASSOCIATED PROBLEMS AMONG CHILDREN WITH CONDUCT DISORDERS

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Abstract

Conduct disorder is a repetitive and persistent pattern of behaviour in which the rights of others or the rules of society are violated. It involves at least three or more of fifteen criteria that fall into the categories viz. aggression, destroying or losing of property, deceitfulness or theft and serious violation of rules. Epidemiological studies are of various sorts- descriptive, phenomenological, astrolological and interventive epidemiology. The study aimed at finding the percentage of children who exhibited different types of conduct problems and also at identifying the types of problems faced by the children with conduct disorders and their parents. Standardised tools were administered for the purpose of identification and assessment of children with conduct disorders. The findings of the study have educational implications.

Introduction:

Children and adolescents are frequently referred to mental health professionals because their behaviour is undesirable, inappropriate or out of school. Conduct disorder is one of the most expensive mental health problems, with significant financial expenditure incurred by a number of services, including education, the youth service and health. As they exhibit aggressive disruptive and defiant behaviour many children with conduct disorder create major difficulties and problems to teachers as well as society. Although their behaviour many evoke anger and outrage in others, many children with conduct problems are distressed and in need of help (Atkinson and Hornby 2002).

Nature of Conduct Disorder:

DSM-IV (American Psychiatric Association 1994) defines conduct disorder "as a repetitive and persistent pattern of behaviour in which the rights of others or the rules of society are violated". It involves at least three or more of fifteen criteria that fall into the following categories.

(Atkinson and Hornby 2002) namely

- ▶ Aggression
- ▶ Destroying or losing of property
- ▶ Deceitful or theft
- ▶ Serious violation of rules

School has an important role to play in handling children with conduct disorders. Conduct disorders in children often create a lot

of stress and sufferings for everyone involved which provides a strong argument for an emphasis on prevention. (Offord and Bennet 1994)

Objectives of the study:

- 1 To determine the percentage of children exhibiting different types of conduct problems belonging to different groups based on gender and grades.
- 2 To identify the associated problems like depression, anxiety, ADHD and academic difficulties in a few selected students.
- 3 To conduct a detailed study of the phenomenology of a few cases by interviewing parents.

Sample :

For the purpose of conducting the study, 14 elementary schools (both government and private) were selected from Mysore district based on feasibility.

The study included children from pre-school through Grade VII. From the above schools the children with conduct disorders were identified with the help of behaviour schedule prepared by Ramaa, Ashok and Balachandra 1997. The children who exhibited at least 3 symptoms and those who developed the problem before 10 years of age were only considered while identifying the children with conduct disorders.

Table I : Number of children with conduct disorder

Total No of schools	Govt.			Private		
	Boys	Girls	Total	Boys	Girls	Total
Total no of children (preschool to Grade VIII)	1555	1343	2898	1121	1522	2643
Percentage	53.65	46.34	-	42.41	57.58	-
No of CWCD	43	10	53	39	2	41
Percentage of CWCD	2.76	0.7	1.82	3.4	0.12	1.51

CWCD - children with conduct disorder

Analysis of the Data:

In order to find out the number of children exhibiting the three types of conduct problems, namely aggressive behaviour, deceitfulness and serious violation of rules, a grade wise and problem wise analysis of data was done qualitatively.

Findings and Conclusion

It is observed that the aggressive behaviours like bullying, teasing animals, initiating physical fights, use of weapons are more common problems exhibited by CWCD. However, the number of females exhibiting both these problems are considerably less compared to that of boys. Among the problems indicative of deceitfulness or theft, telling lie, is more common both among boys and girls. The frequency of children violating rules seriously are relatively less among CWCD elementary school level.

Among the three main categories of conduct disorders (Atkinson and Hornby, 2002), aggressiveness, deceitfulness and serious violation of rules assessed in the study, more number of children both boys and girls exhibited aggressiveness followed by deceitfulness and serious violation of rules. This observation is slightly different from that of the American Psychiatric Association (1994). They noticed that males tend to express themselves more overt ways whereas females tend to express themselves more covert ways such as lying, truancy and running away.

The phenomenological study of all the three cases studied in detail indicated the following.

a) As revealed in CBCL, two children exhibited hyper activity, aggressive behaviour and tendency towards delinquency whereas one case (SH) exhibited lack of guilt, preferring older children in addition to the above mentioned three problems. This finding is similar to that of Nottelman and Jensen (1995) and Atkinson and Hornby (2002) who tried to explain these problems in terms of a common underlying problem such as impulsivity. b) Two cases did not show any history of developmental problem, one case (RR) suffered from jaundice and epilepsy during early childhood. c) Two cases (RR & SH) exhibited learning problems. d) In all the cases psychosocial stressors were present. e) All the three cases posed challenge to parents to manage them in the past as well as in the present. They also exhibited temperamental characteristics. Psychosocial aspects of temperament like-not sensitive to others' emotions, no moral discrimination, not trust worthy. This supports the finding of Atkinson & Hornby (2002) that there is a minority of school age children who lack guilt and seem heartless and have greater number of variety of problems. As far as biosocial factors of temperament is concerned, two children exhibited different types of problems like-too much of activity, too little persistence, intensive anger (verbal and physical), pronounced tension, not sociable with family members, variability in sociability with others.



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INCIDENCE AND PREVALENCE OF CONDUCT DISORDER IN ELEMENTARY SCHOOL CHILDREN IN MYSORE DISTRICT

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Abstract

The present study was undertaken to identify the percentage of children with conduct disorder in elementary schools of Mysore district. It was also aimed at knowing the prevalence of the disorder in terms of demographic characteristics like type of schools, gender and grades. For this purpose 14 elementary schools were selected from Mysore district based on the feasibility of collecting data. However, due representation was given to government and private schools as well as gender of the students. The study included children from pre school through grade VII. From these schools children with conduct disorders were identified with the help of behavior schedule prepared by Ramaa, Ashok, Balachandra (1997). Children who exhibited at least three symptoms and those who developed the problem before 10 years of age were identified as children with conduct disorder. The details of the number of children with conduct disorders (CWCD) are discussed in the paper. The investigators have suggested measures for reducing conduct disorder early in school.

Introduction:

The identification of children with emotional and behavioural problems in the community setting has important implications for the children themselves and for the community, both in terms of current disability and future disorder (Robins 1983; Rutter 1884). The most persistent childhood emotional disorder is conduct disorder (Loeber 1991) Most of the children with conduct disorder had persistent problems as adults, mainly in the form of anti social personality disorders with characteristic criminality, impaired social relationships, alcohol and drug abuse and poor employment records (Robins 1983; West 1982)

Nature of Conduct Disorder:

DSM-IV (American Psychiatric Association 1994) defines conduct disorder "as a repetitive and persistent pattern of behaviour in which the rights of others or the rules of society are violated". It involves at least three or more of fifteen criteria that fall into the following categories.

(Atkinson and Hornby 2002) namely

- ▶ Aggression
- ▶ Destroying or losing of property
- ▶ Deceitful or theft
- ▶ Serious violation of rules.

Objectives:

The present study was undertaken to identify the percentage of children with conduct disorder in elementary schools of Mysore district. It was also aimed at knowing the prevalence of the disorder in terms of demographic characteristics like type of schools, gender and grades.

Methodology:

For this purpose 14 elementary schools were selected from Mysore district based on the feasibility of collecting data. The study included children from pre school through Grade VII in Govt as well as private schools

Table I : Distribution of Sample

Grade	Preschool	I	II	III	IV	V	VI	VII
Male	146	316	333	348	289	320	388	452
Female	312	327	385	363	352	390	467	442
Total	467	643	718	711	641	710	855	894

From the above schools children with conduct disorders were identified with the help of behaviour schedule prepared by Ramaa, Ashok, Balachandra(1997). The schedule constitutes 12 characteristic behaviours as observable and measurable based on the DSM IV guideline. Children who exhibited at least three

symptoms and those who developed the problem before 10 years of age were identified as children with conduct disorder. The details of the number of children identified with conduct disorders are given in the table below:

Table 2 : Number of children with conduct disorder

Total No of schools	Govt.			Private		
	Boys	Girls	Total	Boys	Girls	Total
Total no of children (preschool to Grade VIII)	1555	1343	2898	1121	1522	2643
Percentage	53.65	46.34	-	42.41	57.58	-
No of CWCD	43	10	53	39	2	41
Percentage of CWCD	2.76	0.7	1.82	3.4	0.12	1.51

*CWCD - children with conduct disorder

The above table shows that 1.5 to 2 %of children exhibited conduct disorder. The number of boys outnumbered that of girls. The percentage of children exhibiting conduct disorders is more or less same in government and private schools.

Major findings and discussion:

- 1 About 1.5 to 2% of children studying in grades preschool through VII exhibited conduct disorder. This percentage is considered lower in India compassed with other countries.
- 2 The number of boys with conduct disorders outnumber that of girls. The finding is similar to the observation made by Earls(1994) that childhood conduct disorder is three to four times more common in boys.
- 3 The number of CWCD is more or less same in government and private school. This suggests that the disorder is not the result of just the environmental factors.
- 4 The percentage of CWCD vary from grade to grade ranging from 0.8 to 2.5 percent. The percentage is relatively more in grades V and VI, particularly among boys.

Recommendations:

- 1 Conduct disorder constitutes a major portion in the elementary classes. It has to be identified with a view to help the children to continue their education
- 2 Owing to the seriousness of the problem, early identification is crucial; Corrective measures must be planned involving multidisciplinary team.
- 3 Mental health programmes have to be implemented in all the schools.
- 4 Conducive socio-emotional climate should be created in the schools.

Conclusion:

School plays a crucial and formative role in all the dimensions-physical, cognitive, language, emotional, social and moral development of the children. 10% of the child population suffer from mental disturbances with serious associated impairments. Hence it is essential to train children with conduct disorder in social cognition, social problem solving and social skills. Teachers should make effort to incorporate the training of essential social and emotional skills.

