School and Classroom Strategies: Oppositional Defiant Disorder

This Quick Fact Sheet contains strategies designed to address potential symptoms of Oppositional Defiant Disorder and should be used in consultation and collaboration with your school's mental health personnel or as part of a larger intervention approach. These pages contain only a portion of many possible strategies available to address symptoms of Oppositional Defiant Disorder in the classroom. Strategies should always be individualized and implemented with careful consideration of the differences of each student and the context of their individual circumstances. Additionally, this information should never be used to formulate a diagnosis. Mental health diagnoses should be made only by a trained mental health professional after a thorough evaluation.

If you notice a significant change in mood in any child that lasts for more than a week or two, share your observations with the child's parent and/or guardian and with your school's mental health support team

Belonging, Competence/Mastery, Safety, Self-Determination

School and classroom environment, policies, and procedures as well as academic programming should strive to provide these students with a sense of belonging, competence, and safety throughout the school day, every day. Successful intervention is dependent on structuring a classroom that promotes more socially acceptable means for the student to acquire not only what WE think they need, but also what THEY think they need.

Sustained Commitment

Much of the initial work with students with Oppositional Defiant Disorder may involve managing the student's attempts to thwart your own efforts to help and support him or her. School personnel must remain committed to these students through such difficult periods. It may take a long time to see change and things may worsen before they improve.

Compassionate Understanding

Schools must develop a compassionate understanding of these students and of the dynamics underlying their behavior. Understanding the student's present environment, as well as the environment where his or her difficulties began, the student's perception of his or her experience, and the motivation and purposes behind his or her behavior will help provide a guide for the development of effective interventions.

High Levels of Stimulation

Activities that are highly stimulating (perceived risk taking, physical activity, activities of high interest) are best incorporated as an integral part of the student's school day, not exclusively something used as a reward for good behavior. Without extensive opportunities for engaging in stimulating, socially acceptable activities, the student will readily move to socially unacceptable and problematic avenues for stimulation.

Prevention

To be most effective with these students, schools need to focus largely on the environment and antecedents to unacceptable behavior. School personnel often spend an enormous amount of energy "chasing" behaviors, many of which could have been diverted with appropriate environmental modifications that respond to the emotional needs of the student.

Rule-Centered Classroom with "Padded" Boundaries

These students most often respond best to a rule-centered (vs. authority-centered) classroom. This allows the educator and the student to defer to the power of the rules, refocusing power struggles away from their relationship. Rules must be applied consistently to allow the student to focus on his/her behavior rather than on the educator's behavior. At the same time, unduly harsh limit setting (i.e. yelling, backing student into a corner) will activate a 'fight or flight' response in many of these students. Limit setting that is calm, clear, firm, and supportive will have the greatest positive impact.

Skills for Emotional Management/Affective Regulation

These students will usually benefit from skills training in emotional management/affective regulation. One of the best strategies for teaching and reinforcing these skills is participation in structured and supported activities with some degree of aggressive competition. These activities must be carefully supervised as the student will most often fail within this realm before developing the necessary skills to navigate such a task.

Time–Out

A student with Oppositional Defiant Disorder will benefit from the opportunity for self-imposed time-outs to give them time to cool down and/or regain perspective. This time-out should not be used as a punishment or threat, but rather as an opportunity to be offered if school staff see early signs of agitation or escalation. If incorporating a time-out option, staff should meet with the student proactively to discuss logistical details (where it will be, how to access it appropriately, how long he/she can stay there, what he/she can do there, etc.) Allowing the student to participate in stimulating activities while in the time out space will yield better results.

Behavioral Reinforcement

These students will respond best to a model that reinforces desired behavior through awarding of concrete reinforcement or sanctioned power. Level/token systems tend to work well with these students if the reinforcers are something of value to them. Take the time to get to know the student and understand what types of reinforcers they are most driven by and integrate these into the student's behavioral planning.

Logical Consequences

The student should be held accountable for his or her actions with consequences that are logical (or natural) to his or her actions. Keep in mind that consequences are designed to teach and not to punish. Wherever possible, allow the student to choose between two logical consequence alternatives. Programs designed to hold these students accountable while helping them to develop empathy for those who have been negatively affected by their actions (i.e. Restorative Justice Programs) are beneficial to these students.

Opportunities to Practice Generosity

Provide these students with ample opportunity to practice generosity. Without opportunities to give to others, young people do not develop as caring individuals. Strategies to support and help students with this disorder must combine both behavioral intervention and efforts to enhance moral development.

Support for Staff

Success with these students is dependent upon the adult's ability to deal with the student's overwhelming emotions without themselves becoming overwhelmed. School staff need opportunities to constructively process their own feelings about working with these challenging students. A clinical supervision model (like in the mental health field) is a good model for school staff hoping for additional support.

Suicidal Risk/Crisis

There are some signs that may indicate overt suicidal crisis and should be acted upon **immediately** by engaging your school's mental health crisis team and calling First Call at 488-7777 or dialing 9-1-1. These include:

- Threats or attempts to hurt or kill oneself
- Looking for the means (e.g. gun, pills, rope) to kill oneself
- Making final arrangements such as writing a will or a farewell letter or giving away cherished belongings
- Pre-occupation with suicide or dying (often expressed through writing, art, music, online chat spaces) in conjunction with depression symptoms or high risk behavior
- Showing sudden improvement after a period of extreme sadness and/or withdrawal