

## Conduct Disordered, Oppositional Defiant, Violent, Disruptive Students: Must-know Safety Information You May Not Have

By Ruth Wells There are three types of kids who may be at the highest risk of extreme violence. Obviously, you must take seriously any threat or indication of danger from any kid, so if a dangerous child you know doesn't fit one of these categories, please don't just breathe a sigh of relief. Rather, the point of emphasizing these three top-risk youth, is to have you apportion your time wisely. You can't monitor each child equally. This information may guide you on who you monitor most closely, especially in the absence of other events or information to guide you.

In this space, we will have time to cover only one of these youth in any kind of detail. We will cover the second two kids in a subsequent article. But, we understand you may want to know all that right now, so if you want to learn more immediately about any of these three youth, go to our web site to <http://www.youthchg.com/hottopic.html> and read a reprint of the full article that this text is excerpted from. Our information on the 3 most violent kids was first published by The Child Welfare Report in 1998, and is updated and revised here.

The youth at highest risk of extreme violence may be the conduct disordered child. If you don't already know this term, visualize the fictional character, J.R. from the TV show "Dallas" because the hallmark of being a conduct disorder (c.d.), is having no heart, no conscience, no remorse. Only a mental health professional can diagnose a conduct disorder for sure, but being aware that you may have a conduct disordered child in your class or group, is important to ensuring your safety, along with the safety of your kids, because you work with conduct disorders completely differently than other kids. Since the c.d. child has little relationship capacity, you should not use relationship-based approaches with a diagnosed conduct disorder.

It would be insensitive to call a conduct disorder a "baby sociopath," but that is close to what the term means. It means that the child acts in ways that appear to be seriously anti-social, and the concern is that the child may grow up to be a sociopathic type of person. Since this child cares only about himself (c.d.'s are predominately male), there are little brakes on this child from serious or extreme violence. Not every conduct disordered child will engage in horrific behavior. There is a range of misbehavior c.d.'s may get involved with, ranging from lying to setting fires or being a sexual predator. At the most serious end of the spectrum, lies the possibility of extreme violence, such as a school shooting.

In our Breakthrough Strategies to Teach and Counsel Troubled Youth Workshop (<http://www.youthchg.com/live.html>), we spend at least an hour helping you understand how to work with conduct disorders. You can come to one of our classes, or get books (like our All the Best Answers for the Worst Problems: Conduct Disorders, <http://www.youthchg.com/guide.html>) that help teach you how to work with this most hard-to-manage kid. But do something to make sure you thoroughly understand how to work completely differently with this youth than any other child.

### METHODS FOR CONDUCT DISORDERED YOUTH

There's not space for all the critical do's and don't's that you must know but here are some of the most important:

#### DO'S:

\*The main point we give in our classes is that these children operate on a cost-benefit system, and that to control your c.d. kids, you must keep the costs high, and benefits low.

\*These children also especially need to pro-actively learn how to manage their fists, mouth, and actions.

\*Your goal is to teach them that when they hurt others, it often hurts them too. All interventions must be in the context of "I-Me," because that is all this kid is capable of caring about.

#### DON'T'S:

There are so many of them, it is hard to know where to start because so many of the techniques you use with other kids fall apart with this kid. Here are some of the most critical don't and do's when you work with a diagnosed-- that's the important word here-- conduct disorder. Without the diagnosis, use these guides especially carefully.

\*Don't: have a heart-to-heart relationship.

- \*Don't work on building trust.
- \*Don't put an emphasis on compassion, caring, empathy, values, morals.
- \*Don't expect compassionate behavior.
- \*Don't trust.
- \*Don't give second chances.
- \*Don't believe they care or feel remorse.

Hopefully this brief guide to the hardest-to-manage, most potentially dangerous kid will help you avoid using everyday interventions that will be unproductive, even dangerous. Hopefully this information will steer you towards relying on non-relationship-based interventions that emphasize learning skills like anger control, managing the fist, etc. along with firm rules, boundaries and limits.

### About the Author

Get much more information on this topic at <http://www.youthchg.com>. Author Ruth Herman Wells MS is the director of Youth Change, (<http://www.youthchg.com>.) Sign up for her free Problem-Kid Problem-Solver magazine at the site and see hundreds more of her innovative methods. Ruth is the author of dozens of books and provides workshops and training.

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