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Webinar

Recognising and managing oppositional defiant disorder

Monday, 30th April 2018

“Working together. Working better.”

Supported by The Royal Australian College of General Practitioners, the Australian Psychological Society, the Australian College of Mental Health Nurses and The Royal Australian and New Zealand College of Psychiatrists

Tonight's panel



**Adjunct Associate
Professor Michael Fasher**
General Practitioner



Georgie Fleming
Psychologist



Professor David Coghill
Psychiatrist



Facilitator: Professor Steve Trumble
General Practitioner

Audience tip:

To open the chat box, click the "Open Chat" tab located at the bottom right. The chat will open in a new browser window.

Ground Rules

To ensure everyone has the opportunity to gain the most from this live webinar, please:

- **Be respectful of other participants and panellists.** Behave as you would in a face-to-face activity.
- Interact with each other via the **chat box**. As a courtesy to other participants and the panel, please keep your comments on topic. Please note that if you post your technical issues in the participant chat box you may not be responded to.
- For help with technical issues, click the **Technical Support FAQ tab** at the top of the screen. If you still require support, call the Redback Help Desk on **1800 291 863**.
- If there is a significant issue affecting all participants, you will be alerted via an announcement.

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Learning Outcomes

- Increase skills and understanding of diagnosing and managing children with oppositional defiant disorder and improve awareness of evidence based interventions.
- Identify strategies to engage specialist services and improve referrals when treating a child who has oppositional defiant disorder.
- Identify opportunities to include families in the therapy of children with oppositional defiant disorder.

Audience tip:

This slideshow, Dylan's story and supporting resources can be found in the resources library tab at the bottom right hand corner of your screen.

GP's perspective

- Felicity is seeking help reluctantly.
- She is seeking help to “fix” Dylan.
- Progress will eventually depend on Felicity learning to trust a clinician/community worker.



Michael Fasher

GP's perspective

The GP can:

- Start on building that trust
- Devise a mental health plan
- Apply for fully subsidised intervention by psychologist/mental health nurse
- Refer to a paediatrician.



Michael Fasher

GP's perspective

DYLAN'S ACE Score = 6 (at least)

- Often sworn at / frightened of physical hurt
- Family not looking out for each other
- Parent often too drunk to take care of Dylan
- Parents divorced
- Violence against mother
- Problem drinker in house.



Michael Fasher

GP's perspective

- It is likely that Felicity and Brad themselves have high ACE scores.
- Having a score of 4 increases the risk
 - of chronic lung disease by nearly 400%
 - of attempted suicide by 1200%.
- Having a score of 6 increases the risk of lifespan shortened by 20 years.



Michael Fasher

Psychologist's perspective

What should I address first?

Are basic needs being met?

- Assess for basic needs to acquire sufficient information to determine risk, needs, and strengths of the family.
- Consider Dylan's physical safety (abuse), supervision/nutrition (neglect).

Is a report required?

- Synthesise referral and assessment information to determine whether a report is required.
- If indicated, lodge report with appropriate child protection agency.

What other services are or should be involved?

- E.g. GP, case/crisis management, DV support, Relationships Australia.
- Be aware of "too many cooks in the kitchen" for a high-risk family.



Georgie Fleming

Are the caregivers ready and willing for a parenting intervention?

The importance of
assessment

Does mother have
capacity and **motivation**?

Does step-father have
motivation?

Assess substance use and
other MH / psychosocial
difficulties (i.e. capacity)

Assess mother's
attributions re: Dylan's
behaviour (i.e. motivation)

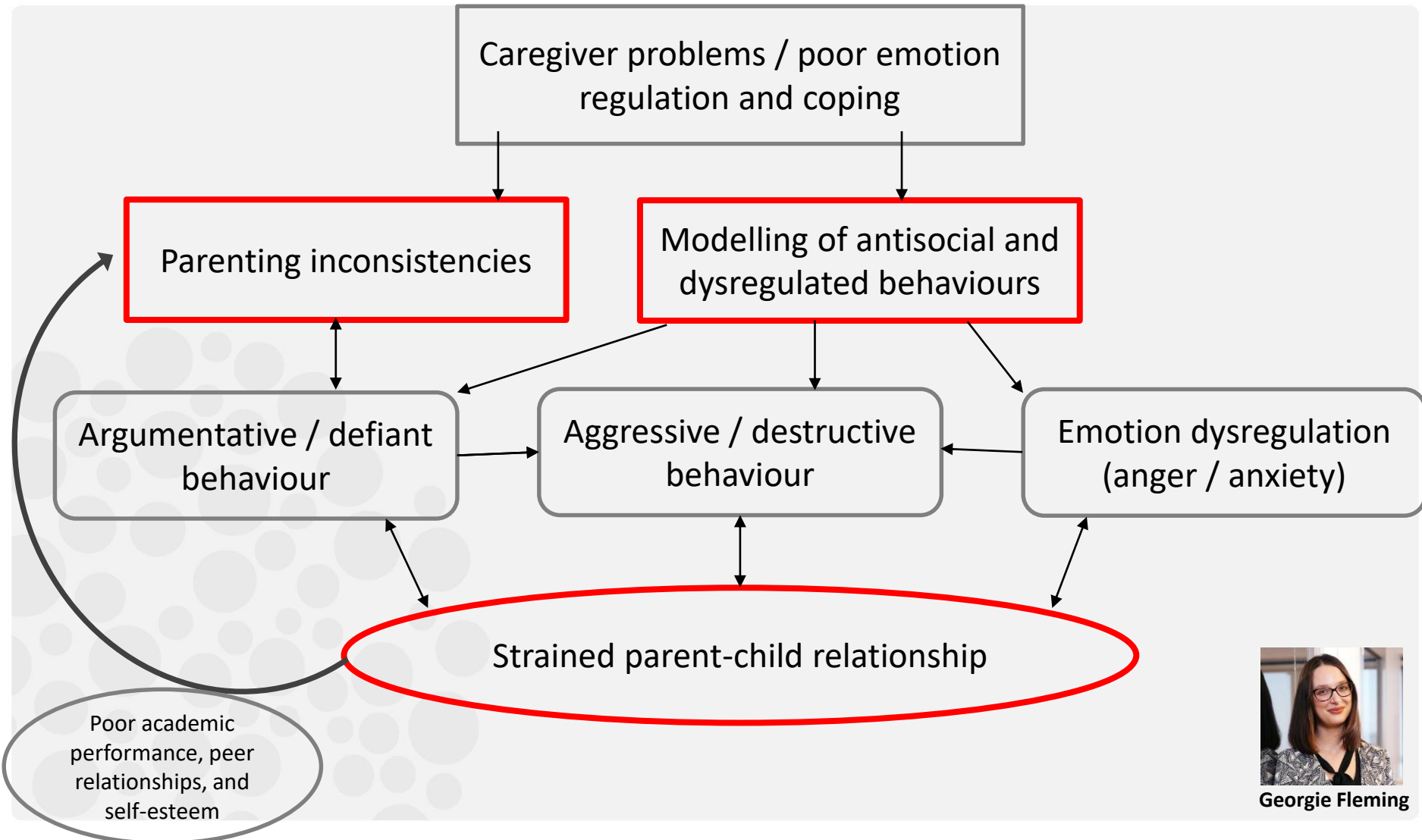
Assess barriers to
involvement of parenting
team (i.e. motivation)



Georgie Fleming

What should I target in treatment?

An example case formulation



Georgie Fleming

Treating ODD:

How do I tailor Parent Management Training

Targeting **parent modelling** behaviours:

- AKA psychoeducation
- Emphasise role of modelling in the development/maintenance of Dylan's sx.

Targeting the **parent-child relationship**:

- AKA promoting parent “sensitive responding”
- Coach parents to implement Special Play (i.e. time in) with Dylan (and sister)
- Coach parents to identify, “catch”, and reinforce positive behaviours
- Coach parents to use planned ignoring, safely and appropriately.



Georgie Fleming

Treating ODD:

How do I tailor Parent Management Training?

Targeting **parenting inconsistencies**:

- AKA promoting an authoritative parenting style
- Provide psychoeducation / emphasise rationales, regarding the:
 - Coercive cycle of parent-child interaction
 - Importance of consistency between and within parents
 - Importance of appropriate limiting setting
- Coach parents to implement consistent, effective discipline strategies.

Targeting **child emotional difficulties** (if required):

- AKA teaching and reinforcing emotion regulation skills
- Assist parents to improve child emotion literacy, perspective-taking, and regulation skills.



Georgie Fleming

Psychiatrist's perspective

Case presentation - issues for consideration

- Safety issues
- Assessment and diagnosis:
 - Need for a comprehensive and integrated assessment
 - Possible neurodevelopmental disorder
 - Learning difficulties (specific and general)
 - Oppositional defiant disorder vs. Disruptive mood dysregulation disorder.
- Treatment options:
 - Behavioural and systemic therapies
 - Pharmacological therapy.



David Coghill

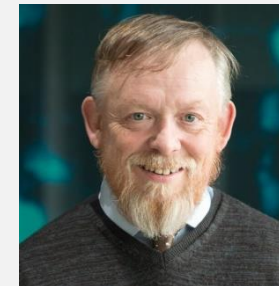
Q&A session



**Adjunct Associate Professor
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- All participants will be emailed a link to the online resources associated with this webinar within two weeks.
- Certificates of Attendance for this webinar will be issued within four weeks.
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 - [Suicide Prevention and the Veteran Community](#) (in partnership with DVA)
Tuesday 29th May 2018, 7.30-8.45 pm (AEST)
 - [Personality Disorders and Substance Use: Tips on Effective Treatment Approaches](#)
(in partnership with Project Air Strategy for Personality Disorders)
Monday 4th June 2018, 7.15-8.30 pm (AEST)

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**Thank you for your contribution
and participation**

Good evening

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