Getting Along

HOW BEHAVIOURAL DISORDERS AFFECT PEER RELATIONSHIPS

WHO?
A team of researchers including Dr Hedwig Eisenbarth, a lecturer at Victoria University of Wellington.

WHAT WERE THEY LOOKING AT?
The differences between how teachers and parents perceive the effects of externalising psychopathologies on the way young people interact with each other.

WHAT IS AN EXTERNALISING PSYCHOPATHOLOGY?
Psychopathology is used to mean both the study of mental illness, and mental illness itself. There are two categories of psychopathologies:

1. Internalising psychopathologies, where sufferers keep their problems to themselves. This can result in symptoms like depression, anxiety, and suicidal thoughts.

2. Externalising psychopathologies, where sufferers direct their behaviour towards their environment, and the people around them. Symptoms can include physical or verbal aggression, antisocial behaviours, or behaviours like destroying property.

In this study, researchers were looking at ‘externalising psychopathologies’, specifically a attention-deficit/hyperactivity disorder (ADHD), oppositional defiant disorder (ODD), conduct disorder (CD), and callous-unemotional traits (CU traits).

HOW WAS THE STUDY DESIGNED?
The 127 young people examined were drawn from the SHARE project—a database of families with young people seeking assessment for symptoms of ADHD, anxiety, and conduct disorders.

Their parents and teachers were given a series of questionnaires that asked them to rate their behaviours and attitudes in two areas:

1. ADHD, ODD, CD, and CU traits
2. Peer relationships and prosocial (helping or sharing) behaviours.

Researchers then compared the results and tried to see which externalised psychopathologies could predict peer interactions and prosocial behaviour.

Why do you think the researchers wanted to see the differences between how parents and teachers reported the behaviours of the young people?

Why do you think they grouped ADHD, ODD, CD, and CU together? What kinds of questions do you think the parents and teachers were asked?
EXPLORING THE RESULTS

What kinds of differences do you think the researchers found between the teachers and parent reporting?

Which psychopathologies do you think can be used to predict problems with peer relationships, and which do you think can predict prosocial behavior?

Researchers found the following relationships.

Parent reports:

**Increased peer relationship problems** - associated with higher attention deficit ADHD symptoms, and higher CU traits.

**Decreased prosocial behavior** - associated with higher CU traits and being male.

Teacher reports:

**Increased peer relationship problems** - associated with lower hyperactivity ADHD symptoms and higher CU traits.

**Decreased prosocial behavior** - associated with higher CU traits, higher ODD symptoms, and being male.

Check out the article.
https://link.springer.com/article/10.1007%2Fs00787-018-1249-2#Sec7


Why do you think there is such a difference between parent and teacher reporting on the effects of ADHD and ODD symptoms on peer relationship problems?

Why do you think there is no difference between parent and teacher reporting on the effects of CU traits on peer relationship problems and prosocial behaviours?

Why do you think teachers observed a decrease in peer relationship problems in young people with ADHD symptoms?

Why do you think male children/adolescents were rated poorly when it came to displaying prosocial behaviour? What other factors may need to be taken into account?

What are some limitations of this study?

What are some future studies that could be carried out to further understand the effects of external psychopathologies on peer relationships and prosocial behaviours?