Extended Childhood Disorder (ECD): New Empirical Support for a Proposed Diagnostic Category

Robert Epstein (re@aibrt.org)
Natalie Le (nle@aibrt.org)
American Institute for Behavioral Research and Technology

Paper presented at the 98th annual meeting of the Western Psychological Association, Portland, OR, April 2018

Summary

In previous studies, we have suggested that existing diagnostic categories of teen dysfunction, such as major depression and conduct disorder, do not do justice to the social causes of many teen problems in the U.S., most of which are absent in more than 100 cultures around the world. As an alternative, we have proposed adopting a diagnostic category called “extended childhood disorder” (ECD), characterized by three features: (1) excessive and sometimes harmful involvement with peers, (2) conflict centering around control issues with parents or authority figures, and (3) mood problems centering around control issues with parents or authority figures. In the present study, a convenience sample of 3,785 individuals was evaluated: a racially and ethnically diverse group of 2,309 females, 1,296 males, and 180 others, with a mean age of 22.5. Some information was provided by the subjects themselves and other information was provided by parents, teachers, or mental health professionals. An evaluative test contained 20 questions in three categories: four regarding excessive involvement with peers, eight regarding conflict issues, and eight regarding mood issues. The results generally supported the validity of the ECD concept. As predicted, total scores on the test (that is, the total number of diagnostic criteria selected) decreased with both age and educational level. Total scores were also negatively correlated with level of happiness and positively correlated with levels of anger, depression, and anxiety, whether reported by self or others. Total scores also predicted whether subjects had ever been hospitalized, had ever been diagnosed with a mental disorder, were currently or had ever been on medication, were currently or had ever been in therapy, had ever been arrested, had obtained a college degree, were currently employed, and other variables. A large effect was found for sexual orientation, and smaller effects were found for gender and race/ethnicity. Methodological limitations of the study are discussed, along with advantages and disadvantages of the ECD concept versus existing diagnostic labels.