بسم الله الرحمن الرحيم

شبكة المعلومـــــات الجامعية

التوثيق الالكتروني والميكروفيلم

شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الالكتروني والميكروفيلم

﴿ قـــســـم ﴾

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها
علي هذه الأفلام قد اعدت دون آية تغيرات

يجب أن

تحفظ هذه الأفلام بعيداً عن الغبار

في درجة حرارة من 15 – 20 مئوية ورطوبة نسبية من 20-40 %

To be kept away from dust in dry cool place of
15 – 25c and relative humidity 20-40 %

بعض الوثائق الأصلية تالفة

بالرسالة صفحات

لم ترد بالأصـــل

STUDYING RISK FACTORS FOR DEVIANT BEHAVIOR AMONG ADOLESCENTS AND A PROGRAM FOR INTERVENTION

THESIS

Submitted to the Faculty of Medicine

University of Alexandria

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Attention-Deficit/Hyperactivity Disorder (ADHD).

Oppositional Defiant Disorder (ODD).

Conduct Disorder (CD).

The American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, fourth edition (DSM-IV).

Gamma Amino Buteric Acid (GABA).

Cerebro-Spinal Fluid 5- Hydroxy Indol Acetic Acid (CSF 5-HIAA).

Child Behavior Checklist (CBCL).

Teacher Report Form (TRF).

Multivariate Analysis of Variance (MANOVA).

Analysis of Variance (ANOVA).

Definition of Terms

Aggression:

It is a behavior that threatens or causes harm to people or animals, and/or damage to property. Under the current psychiatric nosology, aggression appears in several psychopathological contexts, but it does not constitute a separate diagnostic entity in itself. The list of psychiatric disorders that are more likely to be accompanied by aggression includes psychoses, substance abuse, conduct disorders, intermittent explosive disorder, neurological disorders involving the frontal and temporal lobes, and personality disorders such as antisocial and borderline. The presence of mental retardation increases the likelihood of aggressive behavior [(1)].

Violence:

It is a behavior that deliberately aims at inflicting physical damage to persons and/or property [(2)].

Attention-Deficit/Hyperactivity Disorder:

The essential feature of this disorder is a persistent pattern of inattention and/or hyperactivity-impulsivity that is more frequent and severe than is typically observed in individuals at a comparable level of development. Some hyperactive-impulsive or inattentive symptoms that cause impairment must have been present before age 7 years, although many individuals are diagnosed after the symptoms have been present for a number of years. Some impairment from the symptoms must be present in at least two settings. There must be clear evidence of interference with developmentally appropriate social, academic, or occupational functioning [(3)]. The constellation of over activity and