Supplemental Table

*Summary of Previous Studies Examining Latent Classes of Oppositional Defiant Disorder*

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| **Study** | **Samplea** | **N** | **Ageb** | **Sex** | **Region or Race/**  **Ethnicityc** | **Designd** | **Measurese** | **Identified Classes and Findings** |
| Aebi et al., 2016 | Juvenile offenders | 158 | *M*=16.89, *SD*=1.13 | 100% male | Switzerland / 45.6% “foreign nationality” | C | CR: Mini-International Neuropsychiatric Interview for Child and Adolescents (MINI-KID);  Crime registry reports of recidivism | 4 classes: none, severe, defiant, and irritable. Irritable and severe classes related to suicidality, comorbid anxiety disorders, and reoffending. Severe, defiant, and irritable classes related to conduct disorder. Irritable class was strong predictor of violent reoffending. |
| Althoff et al., 2014 | S1: CL and CO  S2: CO  S3: CO | S1: 2029  S2: 2076 S3: 399 | S1: 6-18, *M*=11.9  8, *SD*=3.53 S2: 4-16 at T1 with 6 waves of follow-up  S3: 6-18, *M*=10.88, *SD*=3.06 | S1: 53% male S2: 49% male S3: 53% male | S1: US / NR  S2: Nether-lands  S3: US (VT) / NR | S1: C  S2: L (classes only estimated at T1)  S3: C | PR: oppositional scale of CBCL, DSM-IV Checklist (S3 only)  CR: (S2 only): Composite International Diagnostic Interview (CIDI), Self-Reported Violent Delinquency | 4 classes for S1 and S2: no symptoms, all symptoms, irritable, and defiant. Using S3 as a replication sample and DSM-IV Checklist to test for concurrent validity, “all symptoms” class had a high frequency of concurrent ODD, while irritable and defiant classes had a low frequency of concurrent ODD. In S2, membership in all symptoms and defiant classes increased odds of adult violence; membership in irritable class increased odds of adult mood disorders. |
| Burke, 2012 | CL | 177 | 7-12 at T1; followed-up annually | 100% male | US (PA and GA) / 70% WH, 30% B | L (classes only estimated at T1) | PR: DISC  CR (at age 18): Diagnostic Interview Schedule, NEO Personality Inventory | 3 classes: oppositional, irritable, and low symptoms. Youth in the irritable class had a higher rate of later depression and anxiety across waves than the oppositional and low classes. |
| Gomez & Stavropoulos, 2018 | CO | 457 | 3-15, *M*=8.60, *SD*=1.94 | 49% male | Australia / 92.2% European, 6.3% AS, 1.1% Middle East/African, 0.4% other | C | MR: Disruptive Behavior Rating Scale | 2 classes: high and low. A 3-class/3-factor factor mixture model provided optimal fit (classes: high, intermediate, and low; factors: negative affect, oppositional behavior, and antagonistic behavior). |
| Herzhoff & Tackett, 2016 | CO | Primary: 439 Replicat-ion: 291 | Primary: *M*=9.96, *SD*=0.83 at TI; *M*=12.10, *SD*=0.80 at T2  Replication:  *M*=9.85, *SD*=0.64 | Primary: 51% female; Replicat-ion: 52% female | Primary: Canada / 67.6% WH, 9.8% AS, 3.5% B, 0.5% H, 18.6% other Replication: US (TX) / 32.8% B, 26.2% H, 25.5% WH, 4.8% AS, 10.7% other | Primary: L (classes only estimated at T1); Replicat-ion: C | PR & CR: CDISC  PR: CBCL, Inventory of Child Individual Differences | 3 classes: low severity, irritable, and oppositional in primary sample; low severity, oppositional and irritable, oppositional only in replication sample. No sex differences in classes. For primary sample, irritable class scored higher on later internalizing than oppositional class; low severity class scored lower on later externalizing than oppositional and irritable classes; no difference in later externalizing between irritable and oppositional classes. |
| Kuny et al., 2013 | Twin Registry | 14,844 (7,422 twin pairs) | 7, 10, and 12 | Age 7: 46% female; Age 10: 49% female; Age 12: 48% female | Netherlands | L | MR: oppositional subscale of Conners’ Parent Rating Form, CBCL | 4 classes at ages 7, 10, and 12: no symptoms, defiance, irritability, and high on all symptoms. Children in irritable class more likely to have higher mood symptoms on CBCL than children in defiance class, but no difference in aggression and externalizing. Children in high class showed highest scores in both externalizing and internalizing. |
| Current Study (blinded for review) | CO | 521 | Grades 6-9, *M*=12.01, *SD*=0.43 at baseline (grade 6) | 51.9|% male | US (Pacific Northwest) / 48.7% WH, 28.2% B, 18.5% AS, 4.0% NA, 10.4% H | L | PR & CR: DISC | 3 classes according to both parent- and self-report across all 4 grades: low, medium, and high, reflecting symptom severity. Black adolescents more likely to be in high and medium classes according to self-report, while White adolescents more likely to be in high and medium classes according to parent report. Membership in both high and medium classes predicted later increases in symptoms of depression and conduct disorder, with high classes showing greatest risk for later psychopathology. |
| Roetman et al., 2020 | CL | 2185 | 5-18, *M*=9.96, *SD*=3.22 | 36.9% female | Western Netherlands | L (classes only estimated at intake) | PR, TR, & CR: DAWBA, SDQ  Clinician report: DSM classifications, GAF | 3 classes: low, moderate, and high. High class had highest levels of mental health problems and DSM disorders. High class had higher prevalence of ODD, ADHD, and conduct disorder (per clinician and computer-generated diagnoses), and lowest levels of pre- and post-treatment functioning. Low class showed higher prevalence of anxiety and fear disorders. |
| Wesselhoeft et al., 2019 | CO | 3435 | 7-10, *M*=8.94, *SD*=0.75 | 56.1% male | Denmark | C | MR: SDQ, DAWBA | 4 classes: low, medium, high, and angry/irritable. High and angry/irritable classes had higher proportion of comorbid ODD (per physician diagnosis) as compared to low class; angry/irritable had more comorbid emotional disorder as compared to low class. High and angry/irritable classes also had more overall psychological problems, more functional impairment, and more life difficulties than the medium and low classes; high class experienced the most difficulties. |

*Note.* NR = not reported. aS = sample; CO = community sample, CL = clinical. bReported as age in years, unless otherwise noted. cB = Black/African-American, WH = White/Caucasian, H = Hispanic/Latinx, NA = Native American, AS = Asian. dL = longitudinal, C = cross-sectional. eMR = mother report, PR = parent report, CR = child/adolescent/youth report, TR = teacher report, CBCL = Child Behavior Checklist, CDISC = Computerized Diagnostic Interview Schedule for Children, DISC = Diagnostic Interview Schedule for Children, DAWBA = Development and Well-Being Assessment, SDQ = Strengths and Difficulties Questionnaire, GAF = Global Assessment of Functioning.