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# A Short Note on Personality Disorders in Children

## Glenda Porta\*

Department of Public Health, College of Medicine and Health Sciences, Arba Minch University, Arba Minch, Ethiopia

#### Abstract

settings. These patterns are associated with signifcant disress or disability, are rigid, and begin early. The of cial criteria for diagnosing personality disorders are lised in the sixth chapter of the International Classifcation of Diseases (ICD) and in the American Psychiatric Association's Diagnosic and Statisical Manual of Mental Disorders (DSM). However, the definitions vary from source to source and remain contentious.

### Ke d : Personality disorders; Mental Disorders

# I dci

Psychologically, personality is the set of enduring mental and behavioral characteristics that set people apart. As a result, experiences and actions that defy social norms and expectations de ne personality disorders. People who have a personality disorder may have trouble thinking, feeling, getting along with others, or controlling their impulses. e behavior patterns of personality disorders are typically recognized by adolescence, the beginning of adulthood, or sometimes even childhood and frequently have a pervasive negative impact on the quality of life. Treatment for personality disorders is primarily psychotherapeutic. e prevalence of personality disorders among psychiatric patients is estimated to be between 40 and 60 percent. Cognitive behavioral therapy and dialectical behaviour therapy, particularly for borderline personality disorder, are examples of evidence-based psychotherapies for personality disorders. A variety of psychoanalytic approaches are also used. Personality disorders are associated with a signi cant amount of stigma in both clinical and popular discourse. Despite the various methodological schemas designed to categorize personality disorders, many issues arise when trying to classify a personality disorder because the theory and diagnosis of such disorders occur within prevailing cultural consequently, some experts question their validity on the grounds of their inherent subjectivity. ey argue that social, or even sociopolitical, and economic considerations are the sole foundation for the theory and diagnosis of personality disorders [1-5].

A multidimensional and early treatment approach is required for personality disorders in their early stages and preliminary forms. In addition, Robert F. Krueger's review of their research indicates that some children and adolescents do experience clinically signi cant syndromes that resemble adult personality disorders, and that these syndromes have meaningful correlates and are consequential. Personality development disorder is considered to be a childhood risk factor or early stage of a later personality disorder in adulthood. e adult personality disorder constructs from Axis II of the Diagnostic and Statistical Manual have served as the framework for much of this



\*Corresponding author:

Citation: