



INVESTICE DO ROZVOJE VZDĚLÁVÁNÍ







Intellectual Disabilities

Home preparation

Read the following classification criteria for intellectual disability and get ready to explain these criteria in your own words to your partner.

Classification criteria for INTELLECTUAL DISABILITY

The diagnostic criteria for intellectual disability used by INAS-FID and the IPC are consistent with those of the World Health Organisation (WHO, ICD- 10 and ICF, 2001) and the American Association on Mental Retardation (AAMR, 2002), and are recognized internationally by professional organisations (International Association for the Scientific Study of Intellectual Disability, American Psychological Association).

The criteria include three requirements all of which must be met:

- 1. Significant impairment in intellectual functioning as indicated by a full scale score of 75 or lower on an internationally recognized and professionally administered IQ test (for example, a Wechsler Intelligence Scale for Children [WISC-R], Wechsler Intelligence Scale for Adults [WAIS-III])
- 2. Significant limitations in adaptive behaviour as expressed in conceptual, social, and practical adaptive skills. Examples of these skills include: communication, self-care, self-direction, and social/interpersonal skills. Limitations in adaptive behaviour affect both daily life and the ability to respond to life changes and environmental demands. Significant limitations in adaptive behaviour are established through the use of standardised measures that have been norm-referenced on the general population including people with disabilities (e.g., Vineland Adaptive Behaviour Scales, AAMR Adaptive Behaviour Scales).
- **3.** Intellectual disability must be evident during the **developmental period**, which is from conception to 18 years of age.

(http://www.aisnsw.edu.au/CIS/LinkClick.aspx?link=Disability%2FDocuments%2FClass+Information+Sheet++ID.pdf&tabid=738&mid=1810&language=en-US)

In-class material

- 1. In pairs try to formulate what criteria must be met when recognising somebody as a person with intellectual disability.
- 2. Read the following paragraphs presenting basic information about intellectual/mental disability/impairment. Each of these paragraphs answers one question choose the correct question for each paragraph.

QUESTIONS

- A) What are the typical characteristics of different levels of intelectual disability?
- B) What are the main causes of intellectual disabilities?
- C) How can we recognise different levels of intellectual disability?
- D) What's the difference between children with intellectual disability and intact children? Which competences are usually affected in people with intellectual disabilities?
- E) What terminology is being used nowadays and which was used in the past?

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There are different degrees of Intellectual disability, ranging from mild to profound. A publication in the state of the support they need.	
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A long time ago there were used terms such as "idiot", "imbecile", and "moron" derived from early IQ tests, which acquired pejorative connotations in nowadays society. The term "mental retardation" acquired pejorative connotations over the last few decades too. This may have contributed to its replacement with euphemisms such as "mentally challenged" or "intellectual disability".

While "developmental disability" may be considered to subsume also other disorders (such as epilepsy, autism or cerebral palsy), "developmental disability" and "intellectual disability" are generally considered more acceptable terms than "mental retardation". The term "mental retardation" is mainly used as a diagnostic medical term.

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In early childhood **mild mental retardation** (IQ 50–69) may not be obvious, and may not be identified until children begin school. Even when poor academic performance is recognized, it may take expert assessment to distinguish mild mental retardation from learning disability or emotional/behavioral disorders. As individuals with mild mental retardation reach adulthood, many learn to live independently and maintain some non-demanding employment.

Moderate mental retardation (IQ 35-49) is nearly always apparent within the first years of life. Children with moderate mental retardation will require considerable supports in school, at home, and in the

community in order to participate fully. As adults they may live with their parents, in a supportive group home, or even semi-independently with significant supportive services to help them, for example, manage their finances.

A person with a more **severe mental retardation** (IQ 34 and lower) will need more intensive support and supervision his or her **entire** life.

Class	IQ
Borderline intellectual functioning	70 – 80
Mild mental retardation	50 – 69
Moderate mental retardation	35 - 49
Severe mental retardation	20 – 34
Profound mental retardation	Below 20



Children with intellectual disability can and do learn new skills, but they develop more slowly than children with average intelligence and adaptive skills. Children with intellectual disability may learn to sit up, to crawl, or to walk later than other children, or they may learn to talk later. Both adults and children with intellectual disability may also exhibit the following characteristics:

- Delays in oral language development
- Deficits in memory skills
- Difficulty learning social rules and social skills
- Difficulty with problem solving skills
- Delays in the development of adaptive behaviors such as self-help or self-care skills

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Intellectual disability can start anytime before a child reaches the age of 18. It can be caused by injury, disease, or a brain abnormality. These causes can happen before a child is born or during childhood. For many children, the cause of their intellectual disability is not known. Some of the most common known causes of intellectual disability are Down syndrome, and fetal alcohol syndrome, which occur before birth.

Other causes that take place before a child is born include genetic conditions (such as Cri-du-chat syndrome or Prader-Willi syndrome), infections (such as congenital cytomegalovirus), or birth defects that affect the brain (such as hydrocephalus or cortical atrophy). Other causes of intellectual disability (such as asphyxia) happen while a baby is being born or soon after birth. Still other causes of intellectual disability do not happen until a child is older. These may include serious head injury, stroke, or certain infections such as meningitis.

(adapted from http://www.cdc.gov/ncbddd/dd/ddmr.htm and www.wikipedia.org)

3. In pairs sum up the key information about: terminology, levels, symptoms and causes of intellectual disabilities using your own words.

4. Video (http://www.youtube.com/watch?v=_Cz7ZkwMjk4) 5:16 - 8:26

Watch t	he v	rideo	and	answer	the	following	questions:
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Watch the video and answer the following questions:
1. How many children does Tina have?
2. Who is intellectually disabled in this video?
3. Why was the time when Tina got pregnant for the third time so difficult for her?
4. What did Ann help Tina with?
5. What is Tina and her family doing these days and what her plans for future are?
6. How is Tina describing the help from Every Child?

What is your opinion on the issue of people with intellectual disabilities having their own children?