	Mild intellectual disability	Moderate intellectual disability	Severe intellectual disability	Profound intellectual disability
Population with intellectual disability	85% of people with intellectual disability	10% of people with intellectual disability	3 – 4% of people with intellectual disability	1 – 2 % of people with intellectual disability
Cognitive functioning	10 50 – 69	IQ between 35 – 49	IQ between 20 – 34	IQ Less than 20
Adaptive functioning	 Slow and delayed developmental milestones. Communicates reasonably well. Can learn basic job-related skills. Can learn to read and master computer skills similar to 9 – 11 year old. Able to work but may need regular support. 	 Developmental milestones delayed. Communicates in simple sentences, hold simple conversation. Significant difficulty learning and thinking logically. May learn to recognise and write a few words. Adults need different degrees of support to live and work. 	 Noticeable delay in all developmental areas. Speech difficulties and limited vocabulary. Learns basic self-help skills with practise over time but needs support in the community. Best functional abilities of a 3 – 5 year old. 	 Cannot take care of themselves independently and may have little or no verbal language. Emotional expression may be poorly understood. Seizures, physical disabilities and lower lifespan are common. Best functional abilities of under 3 years old.

When and how to get help?

If you are worried about your child's development seek help as soon as possible. Speak to a nurse or doctor at your local health clinic to arrange for your child to be assessed or referred to a developmental clinic.

If your child is at preschool or school speak to your child's teacher or principal to develop a plan to support your child's learning and development.

Information adapted from Adnams C and Johns R (eds). *Understanding Intellectual Disability* (WCFID, 2016)

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UNDERSTANDING INTELLECTUAL DISABILITY

Introduction

Intellectual disability has been known by many different names, including "mental handicap" and "mental retardation". The name "intellectual disability" reminds us that, under international and South African law, all people, including people with disabilities, have a right to dignity and support for full participation in all aspects of life, including access to healthcare, education, employment and social support. It is very important for young children with intellectual disability to receive support as early as possible in life to assist their development and participation in society to their full potential.

What is intellectual disability?

Intellectual disability affects the development of a child, starting before the age of 18 years, and continuing throughout life. It affects the brain and can affect physical abilities too.

Intellectual disability results in children developing and learning slower than typical children of their age in two main areas:

- *Intellectual functioning:* Their ability to think, learn, solve problems, reason and make sense of the world at the same level as others of their age.
- Adaptive functioning: Their ability to learn behaviours and skills which help them adapt to the needs of everyday living on the same level as others of their age.

Important adaptive skills include self-help skills (for example, feeding one's self, going to the bathroom, getting dressed) and performing other daily household activities, communication skills (learning to talk, understanding what is said and being able to answer), social skills (knowing how to relate to friends, family and others appropriately), as well as practical, educational and work skills, eventually, together, providing the skills needed to live semi-independently or with support as an adult.

What causes intellectual disability?

There are many causes of intellectual disability. The most common causes are:

1. Causes before the child is born



- Genetic conditions and other health conditions (e.g. Down syndrome, Fragile X syndrome, Prader-Willi syndrome, Rett syndrome, Turner syndrome)
- Problems in brain growth and development of the baby in the womb
- Exposure to poisons during pregnancy (e.g. smoking/alcohol/drug use)
- Infections (e.g. rubella)
- Mother's health during pregnancy (e.g. HIV/ AIDs, poor nutrition)

2. Causes during the birth of the child



- Premature birth & underdevelopment (e.g. immature heart/lungs)
- Birth injury or complications
- Health complications after birth (e.g. jaundice)

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3. Causes during childhood



- Head or brain injuries (e.g. due to car accidents)
- Childhood infections (e.g. meningitis)
- Seizure disorders (e.g. epilepsy)
- Poor nutrition (feeding problems or malnutrition)

4. Biomedical and environmental causes



- Exposure to toxins and chemicals such as alcohol, lead and mercury
- Poverty (low birth weight and poor nutrition)
- Injury due to trauma & violence
- Lack of environmental stimulation and opportunities for learning skills

How is intellectual disability diagnosed?



The intellectual and adaptive functioning of people with intellectual disability varies from person to person.

Intellectual functioning is often assessed with standardised tests called IQ tests which sets a standard score of 100 (typically developed people will score between 85-115 while people with intellectual disability will score below 70).

Adaptive functioning assessments assess conceptual, social and practical skills needed to cope with everyday living.

Both types of assessments together assist in identifying the kinds of support a child, adolescent or adult with intellectual disability will need to best support their development and participation to full potential. People with greater degrees of intellectual disability will need higher levels of support than people with less disability. Generally there are four categories of intellectual disability: mild intellectual disability; moderate intellectual disability; severe intellectual disability; profound intellectual disability.

People with intellectual disability have the right to access the same services as the rest of the population.