# National Information Center for Children and Youth with Disabilities



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# Mental Retardation

# ♦ Matthew's Story ♦

Matt is 15 years old. Because Matt has mental retardation, he has been receiving special education services since elementary school. These services have helped him tremendously, because they are designed to fit his special learning needs.

Last year he started high school. He, his family, and the school took a good hard look at what he wants to do when secondary school is over. Does he want more education? A job? Does he have the skills he needs to live on his own?

Answering these questions has helped Matt and the school plan for the future. He's always been interested in the outdoors, in plants, and especially in trees. He knows all the tree names and can recognize them by their leaves and bark. So this year he's learning about jobs like forestry, landscaping, and grounds maintenance. Next year he hopes to get a part-time job. He's learning to use public transportation, so he'll be able to get to and from the job.

Having mental retardation makes it harder for Matt to learn new things. He needs things to be very concrete. But he's determined. He wants to work outside, maybe in the park service or in a greenhouse, and he's getting ready!

#### ♦ What is Mental Retardation? ♦

Mental retardation is a term used when a person has certain limitations in mental functioning and in skills such as communicating, taking care of him or herself, and social skills. These limitations will cause a child to learn and develop more slowly than a typical child. Children with mental retardation may take longer to learn to speak, walk, and take care of their personal needs such as dressing or eating. They are likely to have trouble learning in school. They will learn, but it will take them longer. There may be some things they cannot learn.

#### What Causes Mental Retardation?

Doctors have found many causes of mental retardation. The most common are:

• *Genetic conditions.* Sometimes mental retardation is caused by abnormal genes inherited from

- parents, errors when genes combine, or other reasons. Examples of genetic conditions are Down syndrome, fragile X syndrome, and phenylketonuria (PKU).
- Problems during pregnancy. Mental retardation can result when the baby does not develop inside the mother properly. For example, there may be a problem with the way the baby's cells divide as it grows. A woman who drinks alcohol or gets an infection like rubella during pregnancy may also have a baby with mental retardation.
- Problems at birth. If a baby has problems during labor and birth, such as not getting enough oxygen, he or she may have mental retardation.
- Health problems. Diseases like whooping cough, the measles, or meningitis can cause mental retardation. Mental retardation can also be caused by extreme malnutrition (not eating right), not getting enough medical care, or by being exposed to poisons like lead or mercury.

Mental retardation is not a disease. You can't catch mental retardation from anyone. Mental retardation is also not a type of mental illness, like depression. There is no cure for mental retardation. However, most children with mental retardation can learn to do many things. It just takes them more time and effort than other children.

# How is Mental Retardation Diagnosed?

Mental retardation is diagnosed by looking at two main things. These are:

- the ability of a person's brain to learn, think, solve problems, and make sense of the world (called IQ or *intellectual functioning*); and
- whether the person has the skills he or she needs to live independently (called *adaptive behavior*, or adaptive functioning).

Intellectual functioning, or IQ, is usually measured by a test called an IQ test. The average score is 100. People scoring below 70 to 75 are thought to have mental retardation.

To measure adaptive behavior, professionals look at what a child can do in comparison to other children of his or her age. Certain skills are important to adaptive behavior. These are:

- daily living skills, such as getting dressed, going to the bathroom, and feeding one's self;
- communication skills, such as understanding what is said and being able to answer;
- social skills with peers, family members, adults, and others.

To diagnose mental retardation, professionals look at the person's mental abilities (IQ) and his or her adaptive skills. Both of these are highlighted in the definition of mental retardation in the box below. This definition comes from the Individuals with Disabilities Education Act (IDEA). The IDEA is the federal law that guides how schools provide early intervention and special education and related services to children with disabilities.

Providing services to help individuals with mental retardation has led to a new understanding of how we define mental retardation. After the initial diagnosis of mental retardation is made, we look at a person's strengths and weaknesses. We also look at how much support or help the person needs to get along at home, in school, and in the community. This approach gives a realistic picture of each individual. It also recognizes that the "picture" can change. As the person grows and learns, his or her ability to get along in the world grows as well.

# How Common is Mental Retardation?

As many as 3 out of every 100 people in the country have mental retardation (The Arc, 2001). Over 614,000 children ages 6 to 21 have some

#### IDEA's Definition of "Mental Retardation"

Our nation's special education law, the IDEA, defines mental retardation as . . .

"... significantly subaverage general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a child's educational performance."

34 Code of Federal Regulations §300.7(c)(6)

level of mental retardation and need special education in school (*Twenty-third Annual Report to Congress*, U.S. Department of Education, 2001). In fact, 1 out of every 10 children who need special education has some form of mental retardation.

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There are many signs of mental retardation. For example, children with mental retardation may:

- sit up, crawl, or walk later than other children;
- learn to talk later, or have trouble speaking,
- find it hard to remember things,
- not understand how to pay for things,
- have trouble understanding social rules,
- have trouble seeing the consequences of their actions,
- have trouble solving problems, and/or
- have trouble thinking logically.

About 87% of people with mental retardation will only be a little slower than average in learning new information and skills. When they are children, their limitations may not be obvious. They may not even be diagnosed as having mental retardation until they get to school. As they become adults, many people with mild retardation can live independently. Other people may not even consider them as having mental retardation.

The remaining 13% of people with mental retardation score below 50 on IQ tests. These people will have more difficulty in school, at home, and in the community. A person with more severe retardation will need more intensive support his or her entire life.

Every child with mental retardation is able to learn, develop, and grow. With help, all children with mental retardation can live a satisfying life.

#### ♦ What About School? ♦

A child with mental retardation can do well in school but is likely to need individualized help. Fortunately, states are responsible for meeting the educational needs of children with disabilities.

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### Tips for Parents

- ☐ Learn about mental retardation. The more you know, the more you can help yourself and your child. See the list of resources and organizations on page 4 of this publication.
- ☐ Encourage independence in your child. For example, help your child learn daily care skills, such as dressing, feeding him or herself, using the bathroom, and grooming.
- ☐ Give your child chores. Keep her age, attention span, and abilities in mind. Break down jobs into smaller steps. For example, if your child's job is to set the table, first ask her to get the right number of napkins. Then have her put one at each family member's place at the table. Do the same with the utensils, going one at a time. Tell her what to do, step by step, until the job is done. Demonstrate how to do the job. Help her when she needs assistance.
- ☐ Give your child frequent feedback. Praise your child when he or she does well. Build your child's abilities.
- ☐ Find out what skills your child is learning at school. Find ways for your child to apply those skills at home. For example, if the teacher is going over a lesson about money, take your child to the supermarket with you. Help him count out the money to pay for your groceries. Help him count the change.
- ☐ Find opportunities in your community for social activities, such as scouts, recreation center activities, sports, and so on. These will help your child build social skills as well as to have fun.
- □ Talk to other parents whose children have mental retardation. Parents can share practical advice and emotional support. Call NICHCY (800.695.0285) and ask how to find a parent group near you.
- ☐ Meet with the school and develop an educational plan to address your child's needs. Keep in touch with your child's teachers. Offer support. Find out how you can support your child's school learning at home.

### Tips for Teachers

- ☐ Learn as much as you can about mental retardation. The organizations listed on page 4 will help you identify specific techniques and strategies to support the student educationally. We've also listed some strategies below.
- ☐ Recognize that you can make an enormous difference in this student's life! Find out what the student's strengths and interests are, and emphasize them. Create opportunities for success.
- ☐ If you are not part of the student's Individualized Education Program (IEP) team, ask for a copy of his or her IEP. The student's educational goals will be listed there, as well as the services and classroom accommodations he or she is to receive. Talk to specialists in your school (e.g., special educators), as necessary. They can help you identify effective methods of teaching this student, ways to adapt the curriculum, and how to address the student's IEP goals in your classroom.
- ☐ Be as concrete as possible. Demonstrate what you mean rather than just giving verbal directions. Rather than just relating new information verbally, show a picture. And rather than just showing a picture, provide the student with hands-on materials and experiences and the opportunity to try things out.
- ☐ Break longer, new tasks into small steps.

  Demsonstrate the steps. Have the student do
  the steps, one at a time. Provide assistance, as
  necessary.
- ☐ Give the student immediate feedback.
- ☐ Teach the student life skills such as daily living, social skills, and occupational awareness and exploration, as appropriate. Involve the student in group activities or clubs.
- ☐ Work together with the student's parents and other school personnel to create and implement an educational plan tailored to meet the student's needs. Regularly share information about how the student is doing at school and at home.

For children up to age three, services are provided through an early intervention system. Staff work with the child's family to develop what is known as an Individualized Family Services Plan, or IFSP. The IFSP will describe the child's unique needs. It also describes the services the child will receive to address those needs. The IFSP will emphasize the unique needs of the family, so that parents and other family members will know how to help their young child with mental retardation. Early intervention services may be provided on a sliding-fee basis, meaning that the costs to the family will depend upon their income. In some states, early intervention services may be at no cost to parents.

For eligible school-aged children (including preschoolers), special education and related services are made available through the school system. School staff will work with the child's parents to develop an Individualized Education Program, or IEP. The IEP is similar to an IFSP. It describes the child's unique needs and the services that have been designed to meet those needs. Special education and related services are provided at no cost to parents.

Many children with mental retardation need help with adaptive skills, which are skills needed to live, work, and play in the community. Teachers and parents can help a child work on these skills at both school and home. Some of these skills include:

- communicating with others;
- taking care of personal needs (dressing, bathing, going to the bathroom);
- health and safety;
- home living (helping to set the table, cleaning the house, or cooking dinner);
- social skills (manners, knowing the rules of conversation, getting along in a group, playing a game);
- reading, writing, and basic math; and

as they get older, skills that will help them in the workplace.

Supports or changes in the classroom (called adaptations) help most students with mental retardation. Some common changes that help students with mental retardation are listed in the "Tips for Teachers" box on page 3. The resources below also include ways to help children with mental retardation.

#### ♦ Resources ♦

American Association on Mental Retardation. (2002). Mental retardation: Definition, classification, and systems of supports (10th ed.). Washington, DC: Author. (See contact information below.)

Baker, B., & Brightman, A. (with Blacher, J., Heifetz, L., Hinshaw, S., & Murphy, D.). (1997). Steps to independence: Teaching everyday skills to children with special needs (3<sup>rd</sup>ed.). Baltimore, MD: Paul H. Brookes. (Telephone: 800-638-3775. Web: www.brookespublishing.com)

Kaufman, S. (1999). Retarded isn't stupid, Mom! (Rev. ed.). Baltimore, MD: Paul H. Brookes. (See contact information above.)

Trainer, M. (1991). Differences in common: Straight talk on mental retardation, Down syndrome, and life. Bethesda, MD: Woodbine House. (Telephone: 800-843-7323. Web: www.woodbinehouse.com)

### ♦ Organizations ♦

The Arc of the United States, 1010 Wayne Avenue, Suite 650, Silver Spring, MD 20910. Telephone: 301-565-3842. E-mail: Info@thearc.org Web: www.thearc.org

For publications: www.TheArcPub.com

American Association on Mental Retardation (AAMR) 444 N. Capitol Street N.W., Suite 846, Washington, D.C. 20001. Telephone: 202-387-1968; 800-424-3688 (Toll Free, outside of DC). Web: www.aamr.org

Division on Mental Retardation & Developmental Disabilities (MRDD), The Council for Exceptional Children, 1110 North Glebe Road, Suite 300, Arlington, VA 22201-5704. Telephone: 703-620-3660; 703-264-9446 (TTY); 888-232-7733.

E-mail: cec@cec.sped.org Web: www.mrddcec.org



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