



## Mental Retardation

### KEYWORDS

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**ABSTRACT** *Mental retardation is a developmental disability that first appears in children under the age of 18. It is defined as an intellectual functioning level (as measured by standard tests for intelligence quotient) that is well below average and significant limitations in daily living skills (adaptive functioning). Mental retardation exists in children whose brains do not develop properly or function within the normal range. There are four levels of retardation: mild, moderate, severe, and profound. Mental retardation can result in learning, speech, physical, and social disabilities. Severe cases are diagnosed at birth. However, milder forms might not be noticed until a child fails to meet a common developmental goal. Today, new words like special or challenged are replacing the term retarded. The term developmental delay is popular among caretakers and parents of individuals with intellectual disability because delay suggests that a person is slowly reaching his or her full potential rather than being disabled.*

### INTRODUCTION

**Retarded** comes from the Latin *retardare*, "to make slow, delay, keep back, or hinder," so *mental retardation* meant the same as *mentally delayed*. The term was recorded in 1426 as a "fact or action of making slower in movement or time." The first record of retarded in relation to being mentally slow was in 1895. The term *retarded* was used to replace terms like *idiot*, *moron*, and *imbecile* because *retarded* was not then a derogatory term. The term *mental retardation* was a diagnostic term denoting the group of disconnected categories of mental functioning such as, *idiot*, *imbecile* and *moron* derived from early IQ tests. The term *mental retardation* acquired negative and shameful connotations over the last few decades due to the use of the words *retarded* and *retard* as insults. This may have contributed to its replacement with euphemisms such as *mentally challenged* or *intellectually disabled*. While *developmental disability* includes many other disorders, *developmental disability* and *developmental delay* (for people under the age of 18), are generally considered more polite terms than *mental retardation*. Mental retardation occurs in 2.5-3% of the general population. About 6-7.5 million mentally retarded individuals live in the United States alone. Mental retardation begins in childhood or adolescence before the age of 18. In most cases, it persists throughout adulthood. A diagnosis of mental retardation is made if an individual has an intellectual functioning level well below average and significant limitations in two or more adaptive skill areas.

According to the American Association on Mental Deficiency, mental retardation is defined as sub average general intellectual functioning that originates during the developmental period (prenatal to 16 years) and is associated with impairment in adaptive behavior.

### CHARACTERISTICS OF MENTAL RETARDATION

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.

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

### TYPES OF MENTAL RETARDATION

#### Mild mental retardation

Approximately 85% of the mentally retarded population is in the mildly retarded category. Their IQ score ranges from 50-75, and they can often acquire academic skills up to the 6th grade level. They can become fairly self-sufficient and in some cases live independently, with community and social support.

#### Moderate mental retardation

About 10% of the mentally retarded population is considered moderately retarded. Moderately retarded individuals have IQ scores ranging from 35-55. They can carry out work and self-care tasks with moderate supervision. They typically acquire communication skills in childhood and are able to live and function successfully within the community in a supervised environment such as a group home.

#### Severe mental retardation

About 3-4% of the mentally retarded population is severely retarded. Severely retarded individuals have IQ scores of 20-40. They may master very basic self-care skills and some communication skills. Many severely retarded individuals are able to live in a group home.

#### Profound mental retardation

Only 1-2% of the mentally retarded population is classified as profoundly retarded. Profoundly retarded individuals have IQ scores under 20-25. They may be able to develop basic self-care and communication skills with appropriate support and training. Their retardation is often caused by an accompanying neurological disorder. The profoundly retarded need a high level of structure and supervision.

### CAUSES OF MENTAL RETARDATION

**Genetic Irregularities** -- for example x-ray exposure, incompatibility of genes inherited from parents, Rh blood factor incompatibility, Down's syndrome, error in metabolism, or recessive genetic traits.

**Pregnancy Complications** -- for example poor nutrition, German measles, tumors, glandular disorders, infections, exposure to toxic agents, or radiation.

**Birth Problems** - for example premature birth, too rapid birth, prolonged birth, or any circumstance that reduces the oxygen supply to the infant's brain.

**Post Birth Situations** -- for example childhood diseases, especially in the very young (chicken pox, measles, meningitis, whooping cough); high fevers, severe injuries to the brain, lack of certain chemicals in the blood, or glandular imbalance.

**Environmental Factors** -- for example being born and reared in a deprived environment where there is little opportunity to learn; or serious emotional problems.

#### SYMPTOMS OF MENTAL RETARDATION

- failure to meet intellectual standards
- sitting, crawling, or walking later than other children
- problems learning to talk or trouble speaking clearly
- memory problems
- inability to understand the consequences of actions
- inability to think logically
- childish behavior beyond a normal age
- lack of curiosity
- learning difficulties
- IQ below 70
- inability to lead a normal life because of the inability to communicate, take care of oneself, or interact with others

#### DIAGNOSIS OF MENTAL RETARDATION

There are three parts to the evaluation:

- interviews with parents
- observations of the child
- standard tests

The child will be given standard intelligence tests, such as the Stanford-Binet Intelligence Test, to determine IQ. Other tests, such as the Vineland Adaptive Behavior Scales, will be given to assess your child's daily living skills and social abilities compared with other children in the same age group. It is important to remember that children from different cultures and socio-economic statuses may perform differently on these tests. Results of these tests will be combined with information obtained from interviews with parents and observations of the child to assist in the diagnosis.

The screening process might include visits to many different professionals including the following:

- psychologist
- speech pathologist
- social worker
- pediatric neurologist
- developmental pediatrician
- physical therapist

Laboratory and imaging tests may be performed as well to detect metabolic and genetic disorders and structural problems with the brain. It is important to rule out such things as hearing loss, learning disorders, neurological disorders, and emotional problems as the cause for delayed development before making a diagnosis of MR/ID.

Once MR/ID has been diagnosed, the family, school, and primary care physician will use the results of these tests and

evaluations to develop a treatment and education plan.

#### PREVENTION OF MENTAL RETARDATION

Immunization against diseases such as measles and Hib prevents many of the illnesses that can cause mental retardation. In addition, all children should undergo routine developmental screening as part of their pediatric care. Screening is particularly critical for those children who may be neglected or undernourished or may live in disease-producing conditions. Newborn screening and immediate treatment for PKU and hyperthyroidism can usually catch these disorders early enough to prevent retardation. Good prenatal care can also help prevent retardation. Pregnant women should be educated about the risks of drinking and the need to maintain good nutrition during pregnancy. Tests such as amniocentesis and ultrasonography can determine whether a fetus is developing normally in the womb.

#### CONCLUSION

Ongoing counseling will often be needed to help the child cope with disabilities. Parents with intellectually disabled infants and toddlers will get a family service plan that describes their child's needs. The plan will also detail the services the child will need to help him or her with normal development. Family needs are also addressed in the plan. When the child is ready to attend school, a new plan, called the Individualized Education Program (IEP), will be put in place to assist the child with his or her educational needs.

#### Key terms

**Amniocentesis** — A test usually done between 16 and 20 weeks of pregnancy to detect any abnormalities in the development of the fetus. A small amount of the fluid surrounding the fetus (amniotic fluid) is drawn out through a needle inserted into the mother's womb. Laboratory analysis of this fluid can detect various genetic defects, such as Down syndrome, or neural tube defects.

**Developmental delay** — The failure to meet certain developmental milestones, such as sitting, walking, and talking, at the average age. Developmental delay may indicate a problem in development of the central nervous system.

**Hib disease** — An infection caused by *Haemophilus influenzae* type b (Hib). This disease mainly affects children under the age of five. In that age group, it is the leading cause of bacterial meningitis, pneumonia, joint and bone infections, and throat inflammations.

**Phenylketonuria (PKU)** — An inborn error in metabolism that prevents the body from using phenylalanine, an amino acid necessary for normal growth and development.

**Ultrasonography** — A process that uses the reflection of high-frequency sound waves to make an image of structures deep within the body. Ultrasonography is routinely used to detect fetal abnormalities.

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