Chapter 12

Intellectual Disability: An Awareness towards Intervention

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ABSTRACT

Intellectual Disability is sub-average intellectual ability with impaired adaptive functioning, which starts before the age of 18. They have IQ below. There are many issues which require attention while dealing with ID like human resources, quality training of clinical psychologists in India, the conflicts among the team approach, acceptance in the family and society and many more. There are 1.5 million people with intellectual disability in India. However, experts working in the field of developmental disabilities feel that prevalence is much higher. The population with ID is increasing but the resources to deal with these issues are few. The mental health profession is a multidisciplinary one. The psychiatrist, the clinical psychologist and the psychiatric social worker all have their significant role in the management of ID. There is a long way to go. There are many things that can be offered but what we need is acceptance in our society of such people and Awareness towards Intervention.

INTRODUCTION

Being disabled should not mean being disqualified from having access to every aspect of life. – Emma Thompson

The World Health Organization defines Disability as “an umbrella term, covering impairments, activity limitations, and participation restrictions.” Impairment is a problem in body function or structure; activity limitation is a difficulty encountered by an individual in executing a task or action; participation restriction is a problem experienced by an individual in involvement in life situations. Thus disability is a complex phenomenon, reflecting an interaction between features of a person’s body and features of the society in which she or he lives. Intellectual disability (ID) means disability in the cognitive capacity of

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an individual. In simple terms, whatever a mentally normal child can do within a particular frame of time the mentally sub-normal child is either unable to do or will take longer period of time to complete. The learning of particular skill will also depend upon the complexity of the task or on the rate of learning. The delay of learning also depends upon the severity of ID. The parents of developmentally disabled child often wonder about the future of their child, whether they will get a job, whether they will be accepted in the society and family, will they ever be able to live an independent life. These are the few questions which will haunt the society in general and the caregivers in particular and thus awareness towards intervention is imperative to provide a better future for this special population. This chapter will discuss awareness about ID in general with Indian scenario in particular.

Intellectual disability can be defined as impairments of general mental abilities that impact adaptive functioning in three domains. These domains determine how well an individual copes with everyday tasks:

- **The Conceptual Domain:** It includes skills in language, reading, writing, mathematics, reasoning, knowledge, and memory.
- **The Social Domain:** It refers to empathy, social judgment, interpersonal communication skills, the ability to make and retain friendships, and similar capacities.
- **The Practical Domain:** It centers on self-management in areas such as personal care, job responsibilities, money management, recreation, and organizing school and work tasks.

The various levels of severity are defined on the basis of adaptive functioning, and not IQ scores, because it is adaptive functioning that determines the level of supports required. Moreover, IQ measures are less valid in the lower end of the IQ range (DSM V).

It has been estimated that persons with ID comprise from 1% – 3% of populations around the world (WHO, 2001). The total number of disabled people in India are 26 million out of which 1.5 million have ID (Indian Census, 2011). This disability demarcates such people from the normal individuals of the society and because of discrimination and social stigma they face various problems throughout their life. They don’t get proper education, they require supervision, they are unable to get a job and are isolated by the peer groups.

In the Medical model for definition of disability, individuals with certain physical, intellectual, psychological and mental impairments are defined as being disabled. According to this, disability lies in the individual as it is equated with restrictions of activity with the burden of adjusting with the environment through medications and rehabilitation. In contrast in the Social model the focus is on the society, which imposes undue restrictions on the behavior of persons with impairment. In this, disability does not lie in individuals, but in the interaction between individuals and the society. The transition from an individual, medical perspective to a structural, social perspective has been described as the shift from a “medical model” to a “social model”. (WHO, 2011)

It is indeed unfortunate that the condition of the ID population is poor in India. Though the government has planed various schemes for this special population but majority of the population is unaware about these benefits and special schemes. An important area of concern is that, the benefits which can be availed by the ID population depend upon the level of severity of disability. To qualify for the benefits, the disability should be at least 40%.(The PWD Act of 1995). The question arises: What if the disability is less than 40%? Are they functionally maintaining so well that they are equivalent to normal population? They will face the same discrimination and isolation from society as other population of more than