

type of intellectual disability. The term *intellectual disability* has widely replaced the term **mental retardation** as defined by the American Association on Intellectual and Developmental Disabilities ([American Association on Intellectual and Developmental Disabilities, 2013](#); [American Psychiatric Association, 2013](#)). In this chapter, the term *CI* is used synonymously with *intellectual disability*.

Intellectual disability defined by the American Association on Intellectual and Developmental Disabilities in children consists of three components: (1) intellectual functioning, (2) functional strengths and weaknesses, and (3) age younger than 18 years at time of diagnosis. Intellectual functioning is measured by the intelligence quotient (IQ) test score of 70 and below or as high as 75. The child with an intellectual disability must demonstrate functional impairment in a number of different adaptive areas: communication, self-care, home living, social skills, leisure, health and safety, self-direction, functional academics, community use, and work ([American Association on Intellectual and Developmental Disabilities, 2013](#)). The American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, fifth edition (DSM-5), new criteria recommend moving away from exclusively relying on IQ testing toward using additional measures of adaptive functioning ([American Psychiatric Association, 2013](#); [Moran, 2013](#)). The DSM-5 is the diagnostic standard and states that the child with CI must demonstrate deficits in adaptive functioning that result in failure to meet developmental and sociocultural standards for personal independence and social responsibility ([Moran, 2013](#)).

The American Psychiatric Association's DSM-5 terminology and diagnostic criteria are consistent with those terms established by American Association on Intellectual and Developmental Disabilities ([Tassé, Luckasson, and Nygren, 2013](#)). Careful evaluation to identify the needs of individuals with CI is focused on promoting habilitation for each person. It is anticipated that the functional capabilities of children with CI will improve over time when support is provided.

Diagnosis and Classification

The diagnosis of CI is usually made after professionals or the family