

# Children with Intellectual Disabilities Factsheet

Prepared by Child Witness Service

A child with an Intellectual Disability (ID) has reduced cognitive capacity as measured by a standardised Intelligence Quotient (IQ) test, and concurrent difficulties in adaptive functioning (i.e. self-care, communication, social development and interpersonal skills). Health professionals use IQ classification to assess the presence and degree of learning disability. A person with an IQ of less than 70 has an ID; 50-69 constitutes a mild ID; 35-49 a moderate ID and 25-35 a severe ID. Scores of 20-25 or below indicate a profound ID. (DSM-IV<sup>i</sup>)

A child or young person with an ID will often have other medical issues or problems that may interact with, and exacerbate communication difficulties. These include mental health problems, developmental disorders (i.e. Autism Spectrum Disorder, Downs Syndrome), learning difficulties, or physical disabilities. *Ask your Child Witness Officer about Factsheets on ASD and Learning Difficulties.*

A child's mental (rather than chronological) age is useful as an approximate guide to their current level of functioning. Mental age can be determined by 'comparing IQ scores with the norms derived from samples of other age groups'<sup>ii</sup>. A child's school, special needs school and/ or family will usually have an assessment by a medical practitioner, psychologist or speech therapist, which can assist with understanding how the individual child or young person communicates, and other information relevant to them giving evidence. *You should also refer to the child development Factsheets for the child's mental age.*

## Words and Language

- Some children and young people with an ID may be hard to understand due to speech and language difficulties.
- Some question types carry a high risk of being misunderstood or producing unreliable answers such as tag, statement and closed questions.
- The accounts of witnesses with ID are generally shorter.
- Children with ID are prone to changing their initial answer when a closed/ leading/ specific question is repeated.
- Children with ID provide the most accurate (albeit sparse) responses to open-ended requests for 'free recall', followed by clarification questions to elicit free narrative.

## Cognitive

- Children and young people with an ID have weak listening and processing skills. They will need time to process information.
- Children with an ID are prone to suggestion and leading questions.
- Unfamiliar people and environments, being misunderstood and unexpected delays will increase stress and anxiety in children with ID.
- Children with ID require clear and unambiguous directions, commencing with their name: "Sally, I want you to tell me what Johnny did in the kitchen?"
- A child with an ID will be unable to answer questions that require complex processing: "Do you remember...", or complex syntax: "At any time before or after this event did you trying to move to another room or away from Damien?"
- Children with ID may have difficulties with inferring the intentions or emotions of others and identifying their past emotions or intentions.

## Time and Measurement

- People with ID have 'well documented problems with remembering names, numbers, times and dates and these may be highlighted in cross examination'<sup>iii</sup>.
- The child or young person's capacity to answer questions about time and measurement will depend on their mental age. Some children with specific developmental disorders will have marked strengths and weaknesses in these areas.

### **Other things to avoid**

- Hypothetical, tag, statement, why and closed questions.
- Questions containing more than one negative.
- Multiple questions in one question.
- Questions suggesting the child is lying or confused.
- Questions that jump around in time.
- Jargon and legal terms.
- Frowning, loud or cross voice/ tones.
- Figures of speech, metaphors or sarcasm.

### **Other things that are helpful**

- Using open questions followed by clarification questions.
- Use of visual communication aids to assist with communication such as pictures, maps, photographs, a sign to indicate a request for a break.
- Pre-court introductions.
- Starting on time and having regular planned breaks.
- Speaking slowly and allowing the child enough time to give a full answer.
- Repeating names, places and objects often and following a logical, chronological order.
- Checking up on a child's understanding throughout questioning.
- Signposting a change of topic: "Now we are going to talk about".

### **REFERENCES**

The Advocate's Gateway Toolkit 4, 18 February 2013, 'Planning to question someone with a Learning Disability', Lexicon Limited UK.



Australasian Institute Judicial Administration **Bench book for Children Giving Evidence in Australian Courts** update 2012

<http://www.aija.org.au/Child%20Witness%20Bch%20Bk/Child%20Witness%20BB%20Update%202012.pdf>

American Psychiatric **Association Diagnostic and Statistical Manual of Mental Disorders Fifth Edition** 2013

Henry, L., Bettenay, C., and Carney, D., 'Children with Intellectual Disabilities and Developmental Disorders' in *Child Testimony: A Handbook of Psychological Research and Forensic Practice (Second Edition)*, Lamb M, Rooy D., Malloy L., and Katz C (eds), John Wiley & Sons, Ltd, 2011.

Kebbell M., Hatton C., and Johnson S, 'Witnesses with intellectual disabilities in court: What questions are asked and what influence do they have?' in *Legal and Criminological Psychology*, The British Psychological Society, 2004.

---

<sup>i</sup> American Psychiatric Association and Statistical Manual of Mental Disorders Fifth Edition June 2013.

<sup>ii</sup> L Henry, C Bettenay and D Carney, 'Children with Intellectual Disabilities and Developmental Disorders' in *Child Testimony: A Handbook of Psychological Research and Forensic Practice (Second Edition)*, M Lamb, D Rooy, L Malloy and C Katz (eds), John Wiley & Sons, Ltd, 2011, p.255.

<sup>iii</sup> M Kebbell, C Hatton and S Johnson, 'Witnesses with intellectual disabilities in court: What questions are asked and what influence do they have?' in *Legal and Criminological Psychology*, The British Psychological Society, 2004, p.24-25.