



International Association for the Scientific Study of Intellectual Disabilities

Fact Sheet

Aging and Intellectual Disabilities

People with intellectual disabilities, estimated at approximately 60 million, represent one of the largest groups of people with lifelong disabilities. Most live independent lives, yet many remain dependent on lifelong support from their families or from charitable organizations. As a result, more than 350 million people throughout the world are affected by intellectual disability.

The increasing life expectancy of people with intellectual disability is now an established fact.

Although adults with intellectual disabilities have been seen as having inherently shortened life-spans (largely due lack of medical care, rehabilitation services, and poor living conditions), it is now common in developed countries to have most attain an healthy old age. As developing nations and countries in transition evolve and their citizens see their life expectancy prolonged, there, too, we will see the life-spans of people with lifelong disabilities extended.

Older people with intellectual disabilities have the same needs as other older people.

People with intellectual disability are subject to the same age-related impairments and illnesses as people who do not have life-long disabilities. The vast majority have health care requirements which replicate those of the ageing population in general, and should have access to appropriate social and health care. They have the same needs and rights with regard to medical care, adequate housing, employment and retirement, leisure activities, social interaction and sufficient resources, as other older adults.

Older people with intellectual disabilities are subject to compounded stigmatization.

Achievement oriented societies tend to devalue people with intellectual disability as unproductive, dependent, even deviant. As they grow older, they encounter other negative perceptions which reinforce marginalization. For example: gender issues concerning women without disability encourage even more discriminatory attitudes against women with intellectual disability; as these women grow older, "ageism" added to "sexism" enters into play. Yet many overcome these negative stereotypes and manage to live productive lives.

Millions of adults with intellectual disabilities are still living with their families.

Estimates of living within families run as high as 50%, even in nations with highly developed service networks. Studies in a number of countries have observed significant adults with intellectual disabilities living with aging parents or other relatives. In the UK, for example, a third of people with intellectual disability cared for in the family home are living with a carer aged 70 or over. Public officials are now realizing that support of these families must be given priority, because in their absence the number of adults with special needs requiring services is far greater than service providers' capacity to accommodate them.

Planning for social involvement and inclusion

As governments and local bodies plan to accommodate a growing number of older and aging adults, it is important to include people with intellectual disabilities in these arrangements. Planning should include accommodating those adults with intellectual disabilities living on their own or with friends or spouse, those living with their families, and those living in privately and publically support living arrangements. Many adults living on their own or with their families will require and benefit from the same special services being designed and provide to the elderly in general. Of particular import is the inclusion of lifelong disability when planning and developing "age-friendly" communities.

Useful older age related services or supports for people with intellectual disabilities.

- Social needs for many adults can be met by elimination of stigmatization and discrimination in general community services and through the promotion of equal access and use. People with intellectual disabilities should be able to attend, use and benefit from the social, recreational and leisure resources and amenities that communities develop and operate for their elderly citizens.
- Housing needs can met by supporting families when they are the primary carer or by providing financial resources for rentals or ownership of property. Housing can also be providing by brokering co-living arrangements with other people or by providing for small group homes or self-catered apartments.
- Medical needs can be met by enrollment in universal health schemes or programs. Periodic health assessments and routing health care should normalized and provided as an overall system of supports when needed or as assistance provided for the adequate self-directed use of general or specialty health services. Risk assessments and routinized health reviews should be part of the individual's lifeplan and provided so as to catch diseases and conditions that could compromise longevity.
- Activity or work is a normal part of life and is no less needed by aging adults with intellectual disabilities. With research supporting continued activation as a preventative for old-age associated depression and other emotional problems, involvement in social and community activities should be the norm. Personal circumstances and abilities will dictate level of need and desire for involvement.
- Special care needs for age-associated conditions, such as Alzheimer's disease and related dementias, increasing fragility, or conditions or diseases compromising independent functioning, should be addressed with the focus on care in community or family settings. Institutionalization of persons with intellectual disabilities can never be justified or rationalized simply on the basis of old age.

Informational resources are available via the Internet

Universities and other organizations have produced many useful materials and resources that can be of help to adults with intellectual disabilities, their friends, advocates, and families. The World Health Organization has issued a series of documents expertly detailing a number of health related issues and circumstances that can affect longevity and has made these reports available on the Internet. They can be assessed at www.iassid.org. The University of Illinois at Chicago in the United States maintains an informational website with many useful publications on aging and intellectual disabilities. The site address is www.uic.edu/orgs/rrtcamr/index

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