

RIGHTS OF PEOPLE WITH MENTAL RETARDATION

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1. Core Definition

The concept of the **Rights of People with Mental Retardation** refers to the fundamental set of human rights and freedoms guaranteed to individuals living with intellectual disabilities, ensuring their full dignity, equality, and inclusion within society. Historically formalized through international mandates, these rights affirm that individuals with intellectual disabilities possess the same inherent entitlements as every other person, rejecting past practices of institutionalization, discrimination, and neglect. This principle dictates that disability should not serve as a justification for the infringement of basic liberties or the denial of opportunities necessary for self-determination and full participation.

The formal articulation of these rights is crucial because persons with intellectual disabilities often face systemic barriers, including discriminatory legislation, lack of accessible services, and societal prejudice, which necessitate specific legal safeguards. These rights transition the societal approach from a charity-based or medical model--where individuals are viewed solely as recipients of care or subjects of treatment--to a modern human rights model, which mandates state accountability for ensuring equal opportunities and non-discrimination. The core definition rests on the foundational statement provided by international bodies: that the rights of people with intellectual disabilities should never be infringed upon, demanding proactive measures by governments to eliminate barriers and provide necessary supports.

Central to this definition are specific areas of entitlement, which encompass autonomy, physical integrity, social participation, and access to essential services. As codified in seminal documents such as the United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities, these rights specifically include the entitlement to suitable treatment, therapy, and rehabilitation; the ability to obtain and retain employment; the right to family life or a family-like residential setting; and, critically, the right to be protected from exploitation, abuse, and degrading treatment. These provisions collectively define a framework intended to support a life of maximal independence and integration.

2. Etymology and Historical Development

The historical trajectory of rights for individuals with intellectual disabilities (historically referred to using the term **mental retardation**, which is now largely superseded by **intellectual disability** in clinical and legal contexts) reflects a profound shift in societal values, moving from centuries of marginalization and institutional confinement toward recognition as rights-holders. Prior to the mid-20th century, individuals with severe intellectual disabilities were frequently segregated into

large, often inhumane residential institutions, where their rights to autonomy, education, and social interaction were severely restricted or entirely denied. This era was characterized by a medical model that focused purely on deficits and failed to recognize potential or civil rights.

The modern human rights movement began to address these abuses in the 1960s, driven by parent advocacy groups and legal challenges that exposed the systemic deprivation occurring in state institutions. This advocacy culminated in the United Nations adopting the Declaration on the Rights of Mentally Retarded Persons in 1971. This declaration was groundbreaking, asserting for the first time on an international stage that these individuals deserved the same basic rights as their peers, including the right to proper medical care, economic security, and competence in managing their own affairs.

Further progress was cemented in 1993 with the adoption of the United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities. While not legally binding treaties, these Rules provided a detailed ethical and practical blueprint for states to achieve the full participation and equality of persons with disabilities across all spheres of life, including specific reference to those with intellectual disabilities. They shifted the focus from merely declaring rights to outlining the practical implementation requirements, such as accessibility, support services, and personnel training. This document served as a critical intermediary step toward the creation of the most powerful legal instrument in the field, the Convention on the Rights of Persons with Disabilities (CRPD).

3. Key Characteristics and Mandates

The rights framework established by international instruments, particularly the UN Standard Rules, is characterized by several specific mandates designed to ensure the equalization of opportunities. One fundamental characteristic is the insistence upon **normalization**--the principle that life circumstances for individuals with disabilities should be as close as possible to the norms and patterns of society that are generally accepted. This underpins the right to choose where and with whom one lives, moving away from centralized institutional settings toward community-based housing that resembles family life as closely as possible, often involving foster families or small residential settings.

Another key characteristic involves the right to comprehensive support services necessary for independence. The source content highlights the right to seek out and receive suitable **treatment, therapy, and rehabilitation**. This is not restricted to medical care but extends to educational, vocational, and social training designed to maximize functional capacity and social integration. Furthermore, the right to obtain and keep employment, if applicable, mandates that states must actively promote supported employment models and ensure vocational training and placement services are non-discriminatory and accessible, recognizing the economic contribution and self-

worth derived from meaningful work.

Crucially, the rights framework places significant emphasis on **protection from exploitation and abuse**. Historically, individuals with intellectual disabilities were exceptionally vulnerable in institutional settings or isolated community placements. The international rules require robust legal and social protections, effective reporting mechanisms, and judicial oversight to ensure that these individuals are safeguarded against financial exploitation, physical abuse, and neglect. This protection extends to ensuring that any intervention, treatment, or restrictive measure is based on informed consent, respecting the individual's inherent dignity and autonomy to the greatest extent possible, even when support is required in decision-making.

4. International Legal Frameworks

While the initial source material centers on the 1993 UN Standard Rules, the comprehensive rights of individuals with intellectual disabilities are now primarily governed by the Convention on the Rights of Persons with Disabilities (CRPD), adopted by the UN General Assembly in 2006. The CRPD represents the most significant advance in the history of disability rights, transforming the non-binding recommendations of the Standard Rules into binding international law for all signatory states. It explicitly adopts a social model of disability, viewing disability as resulting from the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others.

The CRPD establishes a broad spectrum of rights relevant to intellectual disability, including the right to legal capacity (Article 12), ensuring that persons with disabilities have the right to recognition everywhere as persons before the law, often requiring states to shift from systems of full guardianship (where rights are removed) to systems of supported decision-making. Other critical articles mandate accessibility (Article 9), inclusive education (Article 24), the right to live independently and be included in the community (Article 19), and protection of integrity (Article 17), which forbids medical or scientific experimentation without free and informed consent.

The transition from the Standard Rules to the CRPD significantly strengthened the enforcement mechanism. States ratifying the CRPD are obligated to report regularly to the Committee on the Rights of Persons with Disabilities regarding their implementation progress. This legal accountability ensures that the enumerated rights--covering areas like education, health, employment, and political participation--are integrated into national legislation and policy. The CRPD thus serves as the definitive standard against which the treatment of individuals with intellectual disabilities is measured globally, demanding radical changes in infrastructure and legal frameworks to achieve genuine inclusion.

5. Significance and Impact on Policy

The articulation of these specific rights has exerted a profound transformative impact on public policy and service delivery worldwide, necessitating comprehensive reforms in law, education, health care, and housing. The mandate for **equalization of opportunities** has directly driven the movement toward deinstitutionalization across developed nations. Recognizing the right to reside in a family or foster setting, or an appropriate residential setting resembling family life, has triggered the closure of large state-run hospitals and the reallocation of resources toward dispersed, community-based support systems, improving quality of life and opportunities for social integration for thousands of individuals.

Furthermore, the emphasis on employment rights has challenged traditional expectations regarding the economic productivity of persons with intellectual disabilities. Policy responses now increasingly favor **supported employment** models, where individuals are placed in integrated competitive job settings with ongoing support, rather than being confined to segregated workshops. This shift supports the dignity and economic independence of individuals, reinforcing the principle that the ability to work, if applicable, is a right that must be facilitated by the state through vocational training, reasonable accommodations, and anti-discrimination laws.

In the realm of education, the rights framework mandates **inclusive education**, requiring public school systems to accommodate students with intellectual disabilities alongside their non-disabled peers in general education classrooms, to the maximum extent possible. This systemic change requires significant teacher training, resource allocation, and curriculum adaptation, moving away from segregated special education schools. The cumulative impact of these policy mandates is the continuous dismantling of physical and attitudinal barriers, progressively fostering a more inclusive society where individuals with intellectual disabilities can exercise genuine autonomy and participate fully in civic life.

6. Debates and Criticisms

Despite the robust legal framework provided by international conventions, the implementation of rights for people with intellectual disabilities remains a subject of ongoing debate and critical scrutiny. One primary area of contention revolves around the concept of **legal capacity and supported decision-making**. While the CRPD strongly advocates for replacing substituted decision-making (such as full guardianship) with systems of supported decision-making, ensuring the individual retains agency, practical challenges persist in determining the appropriate level and type of support required without inadvertently infringing on autonomy or placing vulnerable individuals at risk of undue influence or financial exploitation. The boundary between necessary protection and unwarranted restriction is frequently debated in legal and ethical contexts.

A second major criticism relates to the global disparity in implementation. While developed nations

have made strides in deinstitutionalization and legal reform, many developing countries lack the necessary financial resources, specialized personnel, and infrastructural development to meet the standards set by the UN Standard Rules or the CRPD. This gap often results in continued reliance on underfunded, isolated institutional settings or inadequate community supports, undermining the promise of equalization of opportunities on a worldwide scale. Monitoring and ensuring compliance in diverse political and economic landscapes remains a significant challenge for international bodies.

Finally, there is persistent debate regarding language and stigma. The use of the term **Mental Retardation**, while historical in the foundational documents cited in the source, is now widely considered outdated, clinically inaccurate, and profoundly offensive, having been replaced by **Intellectual Disability**. Critics argue that retaining the older terminology perpetuates stigma and highlights the historical context of deficiency rather than focusing on capabilities and rights. Although academic and legal bodies have largely adopted the newer terminology, the lingering presence of historically loaded language underscores the ongoing need for sensitivity and evolution in discourse surrounding disability rights.

Further Reading

[United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities \(1993\)](#)

[Convention on the Rights of Persons with Disabilities \(CRPD\) \(2006\)](#)

[Declaration on the Rights of Mentally Retarded Persons \(1971\)](#)

[Wikipedia: Intellectual Disability](#)