



Module 7

INTRODUCING THE ICF



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7.1 INTRODUCING THE ICF



▶ 7.1 ICF-CY – Introduction

- What is the ICF-CY?
- How did ICF-CY come about?
- How is the ICF-CY structured?
- How can the ICF-CY be used in Early Childhood Intervention?

▶ 7.1 ICF-CY – Introduction

- ICF-CY
 - International **C**lassification of **F**unctioning, Disability and Health – **C**hildren and **Y**outh
 - Published by WHO 2007 (www.who.int/classifications/icf/en)
 - Common language for different professionals and lay people to describe health and impairment

▶ 7.1 ICF-CY – Introduction

- 19th Century
 - Emergence of modern medicine
 - Systematic detection of diseases
- 1923: First Health Organization
- 1948: WHO (**W**orld **H**ealth **O**rganisation)

▶ 7.1 ICF-CY – Introduction

- ICD-10

= International Classification of Diseases,
10. Revision

classified diseases, disorders and health injury

- ICF

= International classification of functioning,
disability and health

classifies functioning and disability associated with
a health problem

▶ 7.1 ICF-CY – Introduction

- Bio-medical model
 - ICD (International Classification of Diseases)
- Bio-psycho-social model
 - ICF (International Classification of Functioning, Disability and Health)

▶ 7.1 ICF-CY – Introduction

- ICF
 - Describes the state of health in relation to the reality of life of a person
 - Ratified in 2001
 - 2006: Turkish translation of ICF
 - ([apps.who.int › iris › bitstream › handle › 9241545429 tur](http://apps.who.int/iris/bitstream/handle/9241545429_tur))
 - 2007: Youth version (CY)

▶ 7.1 ICF-CY – Introduction

- Functional Health (Schuntermann 2009)
 - Concept of context factors
 - Concept of body function and body structures
 - Concept of activities
 - Concept of participation
- Disability
 - negative interaction between person and context factors

▶ 7.1 ICF-CY – Introduction

- Functional Health Definition
(Schuntermann 2009):

A person is functionally healthy, though
before her entire life background
(concept of context factors)
their bodily functions (including the mental area)
and body structures conform to generally accepted
norms
(concept of bodily functions and body structures)

▶ 7.1 ICF-CY – Introduction

- they can do as it is expected by a person without a health problem (**concept of activities**) and according to the type and extent
- they can develop their existence in all areas of life that are important to them in the way and extent expected of a person without damage of body functions / body structures and activity restrictions (**concept of participation**)

▶ 7.1 ICF-CY – Introduction

- Disability
negative interaction between person and context factors

Example: amateur soccer player

Leg amputation → structural damage

= Concept of body functions and body structures

not able to go → loss of function

= Concept of activities

can not participate in the football match → disability

= Concept of participation

Football field, friends, and so on are part of his life background

= Concept of context factors

▶ 7.1 ICF-CY – Introduction

Objectives of the ICF-CY

- Common language
- Description instrument
- Description of health status
- Formulation of treatment plans
- Comparative data analyzes
- Creation of statistics

▶ 7.1 ICF-CY – Introduction

Structure of the ICF

- **Part 1: Functioning and disability**
 - 1.1. body functions and body structures
 - 1.2. Activity and participation
- **Part 2: Contextual factors**
 - 2.1. environmental factors
 - 2.2. personal factors

▶ 7.1 ICF-CY – Introduction

The range of other applications

The ICF provides a framework for the description of human functioning, on a continuum. It is important to remember that it classifies functioning, not people. Because the development and testing of the ICF involved people from a broad range of backgrounds and disciplines, including people with disability, the ICF has a wide range of potential applications.

People use the ICF across broad sectors including health, disability, rehabilitation, community care, insurance, social security, employment, education, economics, social policy, legislation and environmental design and modification.

The ICF offers an international, scientific tool to study disability, in all its dimensions. It may be used by persons with disabilities and professionals alike, across different sectors and care settings, (e.g., community services and support, primary care, hospitals, rehabilitation centers, nursing homes) and populations.

► 7.2 ICF Categories - components and their contents

Table 1: ICF components and domains/chapters

Body Function: Mental functions Sensory functions and pain Voice and speech functions Functions of the cardiovascular, haematological, immunological and respiratory systems Functions of the digestive, metabolic, endocrine systems Genitourinary and reproductive functions Neuromusculoskeletal and movement-related functions Functions of the skin and related structures	Activities and Participation: Learning and applying knowledge General tasks and demands Communication Mobility Self care Domestic life Interpersonal interactions and relationships Major life areas Community, social and civic life
Body Structure: Structure of the nervous system The eye, ear and related structures Structures involved in voice and speech Structure of the cardiovascular, immunological and respiratory Systems Structures related to the digestive, metabolic and endocrine systems Structure related to genitourinary and reproductive systems Structures related to movement Skin and related structures	Environmental Factors: Products and technology Natural environment and human-made changes to environment Support and relationships Attitudes Services, systems and policies

Source: WHO 2001: 29-30

▶ 7.2 ICF-CY – Categories

- 5 categories / classifications
 - Body structures (s)
 - Body functions (b)
 - Activities and participation (d)
 - Environmental factors (e)
 - Personal factors

▶ 7.2 ICF-CY – Categories

- Body structures (s)
= anatomical parts of the body
- Body functions (b)
= physiological functions of Body systems, including psychological
- Activity (d)
= performed task or action of a human being

features

▶ 7.2 ICF-CY – Categories

- Participation (d)
= being included in one life situation
- Environmental factors (e)
= the material, social and attitude-related environment
- Personal factors
= personal background of the life of a human

▶ 7.2 ICF-CY – Categories

- Example:
 - Classification of activities and participation Chapter **communication**
- Items:
- d330 speaking
 - d335 Produce nonverbal messages Use
 - d3350 body language

► 7.2 ICF-CY – Categories

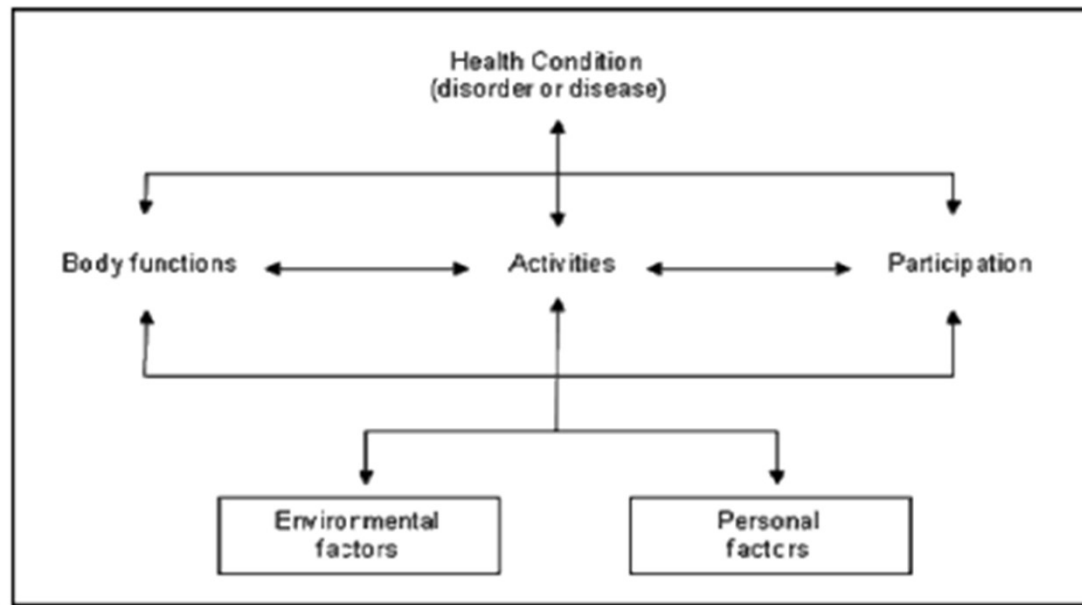
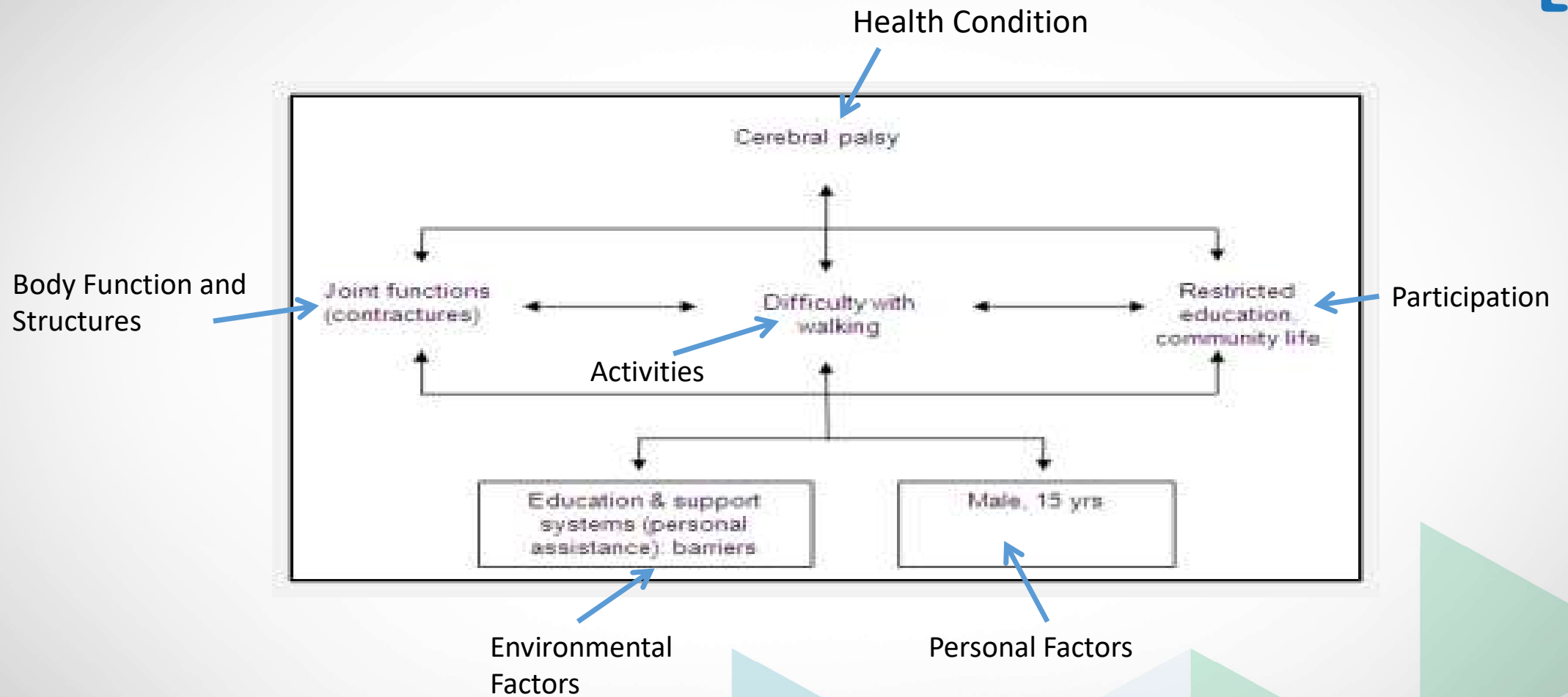


Figure 1: Interactions between the components of ICF (WHO 2001:18)

► 7.2 ICF-CY – Categories



► 7.3 Measurement

Two constructs, 'performance' and 'capacity', can be used in operationalising the qualifier scale for the activities and participation domains. These constructs provide a way of indicating how the environment (in which measurement has taken place) impacts on a person's activities and participation, and how environmental change may improve a person's functioning.

'Capacity' relates to what an individual can do in a 'standardized' environment (this often involves some kind of clinical assessment). 'Performance' relates to what the person actually does in his or her 'current' (usual) environment.

'The gap between capacity and performance reflects the difference between the impacts of current and uniform environments, and thus provides a useful guide as to what can be done to the environment of the individual to improve performance' (WHO 2001:15)

There are a variety of optional and additional qualifiers that can be useful, including qualifiers for performance without assistance and capacity with assistance, which are particularly useful in institutionalized settings. A 'qualifier for involvement or subjective satisfaction' for the activities and participation component is a future possibility (WHO 2001:230-231).

► 7.3. Measurement

Box 2: ICF Qualifier scales

Generic qualifier:

- 0 No problem
- 1 Mild problem
- 2 Moderate problem
- 3 Severe problem
- 4 Complete problem
- 8 Not specified
- 9 Not applicable

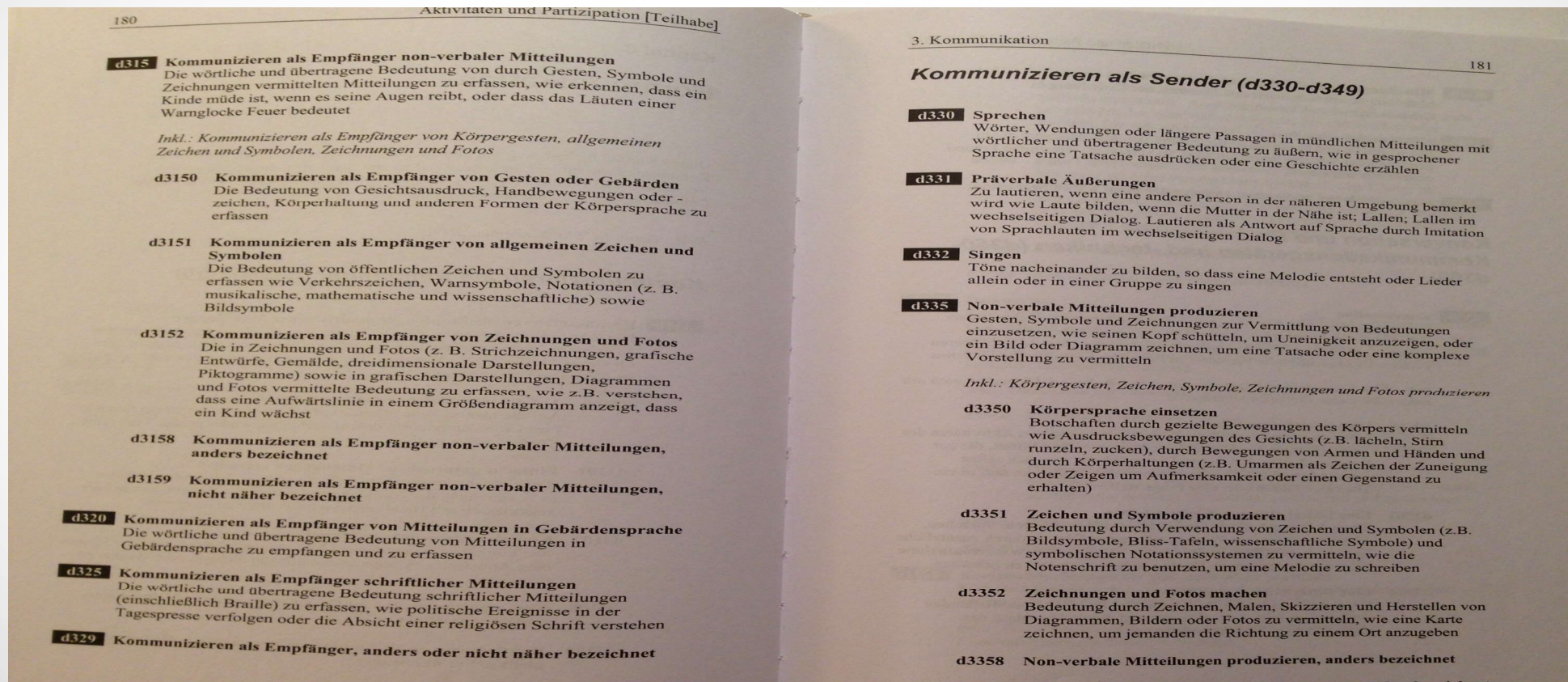
Qualifier for Environmental factors:

- | | |
|---------------------------|-------------------------------|
| .0 No barrier | +0 No facilitator |
| .1 Mild barrier | +1 Mild facilitator |
| .2 Moderate barrier | +2 Moderate facilitator |
| .3 Severe barrier | +3 Substantial facilitator |
| .4 Complete barrier | +4 Complete facilitator |
| .8 Barrier, not specified | +8 Facilitator, not specified |
| .9 Not applicable | +9 Not applicable |

► 7.4 ICF-CY – Application



7.4 ICF-CY – Application



► 7.4 ICF-CY – Application

Example:

- Classification of **body functions** Chapter **Mental functions**

Items:

- b167 cognitive-language functions
- b1670 The language comprehension features
- b16700 Understanding spoken language relevant functions

► 7.5 Benefits of ICF-CY

- The affected person is in focus.
- It provides a consistent language.
- The special living environments of children and adolescents are considered.
- It takes into account the different developmental processes of children and adolescents.

► 7.5 Benefits of ICF-CY

- It simplifies the networking work.
- It provides a basis for interdisciplinary planning and intervention implementations.
- It allows data comparisons between countries, health services, etc. and over time.
- People with disabilities and their relatives are considered as equal partners.

► 7.5 Benefits of ICF-CY

- Standardized language
- Transparency and traceability
- quality control
- Easier work planning
- networking opportunity
- Standardized documentation
- Comparability of state of development resource orientation
- Parents are equal partners

▶ 7.6 ICF-CY – Examples

- Practical usage of the ICF-CY in Early Childhood Intervention
 1. Description of the deficits / funding areas and resources of the child
 2. Assign the appropriate ICF codes
 3. Preparation of the development plan
 4. Preparation of a first report
 5. Documentation of the conveyor units

► 7.6 ICF-CY – Examples

Descriptions for **resources**

For example:

L., 3 years old, likes to rock, moves well in running and jumping well coordinated. He is curious and open and deals constantly with himself. He can assign simple pictures in the lottery and also colors.

b235 vestibular functions

d4553 jumping

b1255 accessibility

b140 functions of attention

b163 Basal cognitive functions

► 7.6 ICF-CY – Examples

- Descriptions for **funding areas**

For example:

L. actively speaks a few words, makes himself felt through lamentation and pointing, understands simple verbal instructions. He does not respond consistently to speech when asked to interact. He refuses dirt on his hands, but allows to touch. In guided tasks, he is still distractible and jumpy, he quickly loses motivation, tests his limits and wants to enforce his strong will.

d330 speaking

b1670 speech understanding

b1403 With other shared attention

b1564 tactile perception

d250 control his behavior

b1304 impulse control

7.6.1 ICF- CY Examples - Child Age 4



This example is made by institution of Vinco, Austria and also measurement is done in a practical easy way.

Boy V. with tetraparesis after early birth and cerebral hemorrhage -> Observation process:

V. grabs a cone with his left hand, can take it from the breadboard, hold it and lead it towards the cup, the deliberate release is still difficult for him, although he always succeeds on request {d4403, b735,b760}

V. understands simple questions about his needs, which he consciously answers non-verbally {d335}

V. understands simple job orders or commando commands hands on the table, swallow, head up, sit straight and slowly performs movements against his muscle tension slowly {b16700, b1301}

7.6.1 ICF- CY Examples - Child Age 4

V. speaks out some important words in a similar way,, uses them on request {d331, d330}

V. is open and friendly, laughs in the interaction and shows his displeasure by screaming {b1264 , b1520}

V. quickly shows frustration when he does not succeed in making targeted hand movements by shouting through even higher body tension, pushing his head and upper body backwards {b126}

Child's mother is actively involved in the promotion and motivates and supports V. optimally {e410}

V. attentively follows a storybook story {d160}



7.6.1 ICF- CY Examples - Child Age 4

He does not succeed in moving on his own, he turns in the back position to the side position {d410, d455, d4201}

V. sitting cross-legged, he sits a maximum of half a minute free on the ground. In the armchair he sits in the seat shell, which fixes the upper body {d4153, e1151}

V. can focus his gaze badly and looks at pictures mostly from the side or from below and wander off quickly. Nevertheless, he can often recognize pictures {b210}

Once a day, one eye is masked, as he switched. {b2152}

7.6.1 ICF- CY Examples

- Child Age 4

Observed resources	
0	resources could not be defined now
1	resources are minimal but existing
2	resources are existing with potential of development
3	good resources with potential of development
4	very good resources
Observed damage, impairments, barriers	
0	could not be defined now
1	minimal damage, impairments no barriers
2	reparable damage, impairments, barriers
3	hardly reparable damage, impairments, barriers
4	massive damage, impairments, barriers

7.6.1 ICF- CY Examples - Child Age 4



ICF Code	Description	Observed resources	Observed damage, impairments, barriers
b1264	Openness to new experiences	2	
b1301	Motivation	2	
b1520	Adequacy of the emotion depending on the situation	2	
b16700	the understanding of spoken language functions	2	
d160	Focus attention	2	
d331	Praeverbale utterances	2	
d335	produce non verbal message	2	
e1151	Tools and supporting technologies for personal use in daily life	3	
e410	individual attitudes of members of the closest family circle	4	
d4201	to shift while lying down	1	-1
b126	Functions of temperament and personality		-2
b210	Functions of seeing		-2
b2152	Functions of the external eye muscles		-2
b735	Functions of muscle tone		-3
b760	Functions of control of voluntary movements		-3
d131	Learning through actions with objects		-1
d330	speaking		-3
d410	change an elementary body position		-4
d4153	remain in a sitting position		-3
d4401	grab an object		-3
d4403	let go an object		-4
d455	to move in another way		-4



7.6.1 ICF- CY Examples - Child Age 4

Parents issues:

V. should become as independent as possible

V. Should learn to speak

V. should be free to sit and as possible learn to walk

7.6.1 ICF- CY Examples - Child Age 4

Overriding goals and hypotheses:

Improvement of eye hand coordination Priority 2

Resource: B1264 Openness to new experiences

Impairment: B760 Functions of control of voluntary movements

Parent issue: V. should become as independent as possible

Hypotheses: V. is very curious and ambitious. If he has sufficient incentive he will learn to take counteracting the muscle resistance purposefully and let go



7.6.1 ICF- CY Examples - Child Age 4

Improvement of concentration and retention capacity Priority 1

Resource: b16700 the understanding of spoken language functions

Impairment: b126 Functions of temperament and personality

Parent issue: V. should become as independent as possible

Hypotheses: V. can understand cognitively simple job tasks, if he is consistently encouraged to complete appropriate tasks and thus increase the sense of achievement, the avoidance strategies will be reduced and he will also be able to handle tasks with greater demands

- 1 References of documents are needed, you have dates i.e. WHO 2001 etc, but which documents do these dates relate to?
carolynb; 15.04.2019

7.6.1 ICF- CY Examples - Child Age 4

Gaining a verbal communication ability Priority 2

Resource: D331 Praeverbale utterances

Impairment: D330 Speaking

Parent issue: V. Should learn to speak

Hypotheses: V. can speak words according to the language if he is consistently supported by language
linguistically he learns to express his needs verbally

▶ 7.7 ICF-CY – Documentation

Education plans:

- Definition of the coarse targets as working hypotheses
- Assignment of ICF codes and parental concerns
- Defining the fine targets
- Methodical considerations

► 7.7 ICF-CY – Documentation

First report and documentation:

- The reports are largely drawn up according to the same scheme as the promotion plan or are copied by it into the respective forms.
- Attached to the development plan is the ongoing documentation. It is based on the structure of the development plan, which gives us clear and consistent documentation.

► 7.8 ICF-CY – Ethical use

Ethical use

Every scientific tool can be misused, and the ICF is no exception. For all uses of ICF—clinical, research, epidemiological, health and social policy—it is essential that information gathered and analysed must respect the inherent value and autonomy of the individuals from whom the information is gathered.

Standard rules about informed consent apply, but more importantly **people with disabilities must participate in all aspects of the use of ICF** and the application of the data produced.

Full participation and transparency of use are most important in the social applications of ICF and, in particular, with the anticipated use of ICF for the development of indicators for monitoring the implementation of **the UN Convention on the Rights of Persons with Disabilities**. This important human rights document—which embodies precisely the same conceptual refinement of functioning and disability as the ICF—is our moral compass towards the development of social policy and political change needed to achieve the full participation of persons with disabilities. The ethical application of ICF seeks to support and further this mandate for the future.

7.9 ICF- CY References and Links

REFERENCES AND LINKS

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WHODAS2 <http://www.who.int/classifications/icf/whodasii/en/index.html>

WHO Family of International Classifications <http://www.who.int/classifications/en/>

WHO Family of International Classifications Network (including a list of Collaborating Centres):

<http://www.who.int/classifications/network/en/>

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