

ICF

World Health Organization

Classification Assessment Surveys & Terminology Group



as the

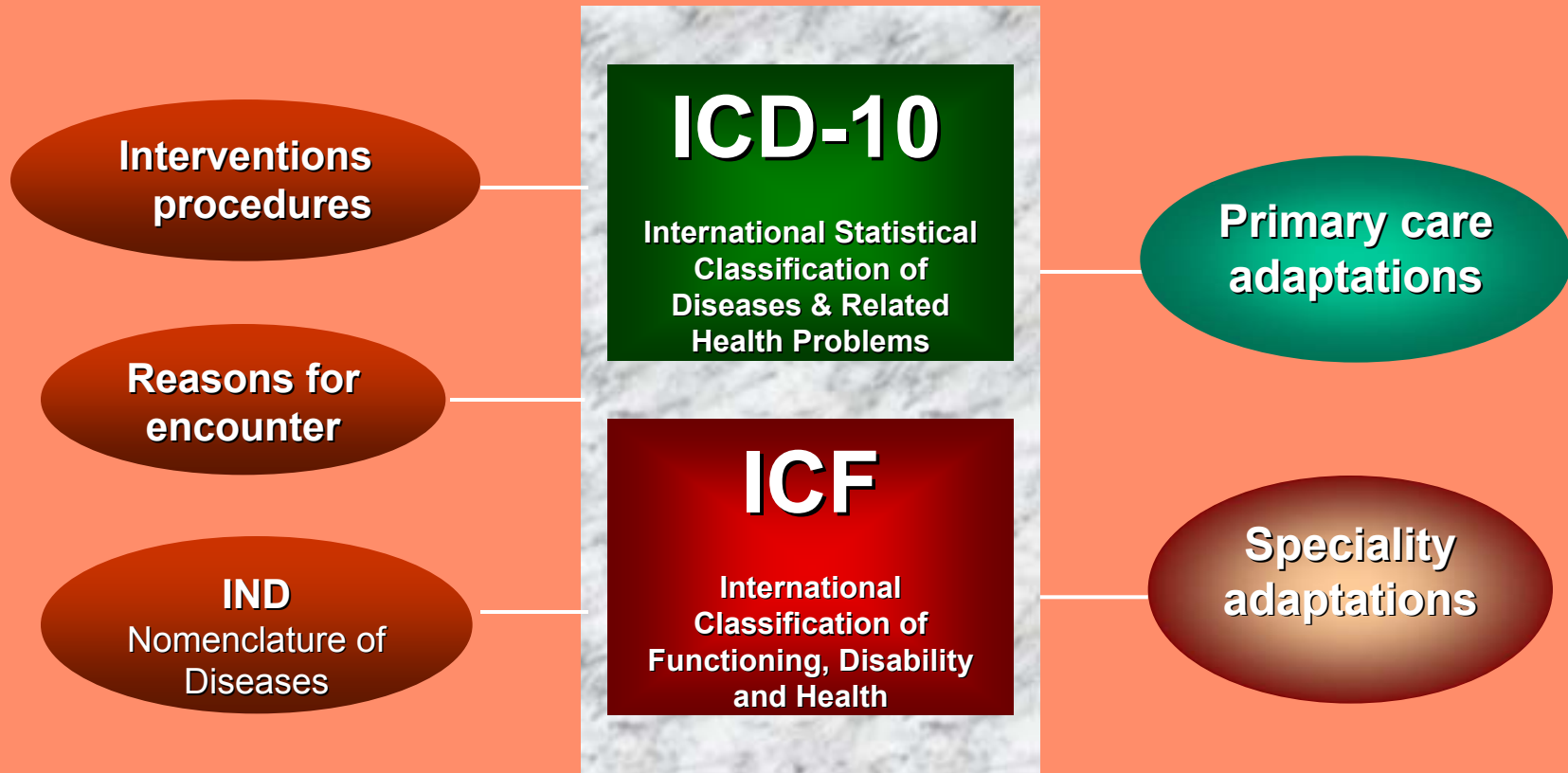
**New Member in the
WHO Family of**

International Classifications



www.who.int/classification/icf

WHO Family of International Classifications



Associated Products

Main Classifications

Adaptations



WHO Family of International Classifications

- Primary Aim: International comparability of health information
- Basic principles: scientific and transcultural
- Interrelated use: Coherent, agreed and appropriate
- Versatility: responds to current or developing health information needs of different users
- Foundation classes: categories of conceptual & metric equivalence
- Coding Rules: Transparent and reliable
- Standards: Uniform and meets ISO standards



ICF

International
Classification of
Functioning,
Disability
and
Health



World Health Organization
Geneva

ICF Publications

- 1. Main volume with glossary**
 - Full version 9999 cat.
 - Short version 99 cat.
- 2. Clinical Descriptions & Assessment Guidelines**
- 3. Assessment Criteria for Research**
- 4. Other versions**
 - Specialty adaptations
 - Children and Youth
- 5. Dedicated Assessment Tools**

ICF Checklist

- One component- One page “at-a-glance”
- Salient Categories (169 out of 1494)
 - *Impairments with:*
 - *Body Functions*
 - *Body Structures*
 - *Activity and Participation*
 - *Environmental Factors*
- Other Contextual information
- Available for:
 - Clinicians & providers
 - Consumers

Part 1 b: IMPAIRMENTS with BODY STRUCTURES

- *Body structures are anatomical parts of the body such as organs, limbs and their components.*
- *Impairments are problems in body function or structure as significant deviation or loss.*

First Qualifier: Extent of impairment	Second Qualifier: Location
0 No impairment	0 More than one region
1 Mild impairment	1 right
2 Moderate impairment	2 left
3 Severe impairment	3 both sides
4 Complete impairment	4 front
8 Not specified	5 back
9 Not applicable	6 proximal
	7 distal

Short List of Body Structures	First Qualifier extent of impairment	Second Qualifier location
s1. STRUCTURE OF THE NERVOUS SYSTEM		
s110 Brain		
s120 Spinal cord and peripheral nerves		
s2. THE EYE, EAR AND RELATED STRUCTURES		
s3. STRUCTURES INVOLVED IN VOICE AND SPEECH		
s4. STRUCTURE OF THE CARDIOVASCULAR, IMMUNOLOGICAL AND RESPIRATORY SYSTEMS		
s410 Cardiovascular system		
s430 Respiratory system		
s5. STRUCTURES RELATED TO THE DIGESTIVE, METABOLISM AND ENDOCRINE SYSTEMS		
s6. STRUCTURE RELATED TO GENITOURINARY SYSTEM		
s610 Urinary system		
s630 Reproductive system		
s7. STRUCTURE RELATED TO MOVEMENT		
s710 Head and neck region		
s720 Shoulder region		
s730 Upper extremity (arm, hand)		
s740 Pelvis		
s750 Lower extremity (leg, foot)		
s760 Trunk		
s8. SKIN AND RELATED STRUCTURES		
ANY OTHER BODY STRUCTURES		



Aims

- to provide a *scientific basis* for consequences of health conditions
- to establish a *common language* to improve communications
- to permit *comparison of data* across:
 - countries
 - health care disciplines
 - services
 - time
- to provide a *systematic coding scheme* for health information systems

*Inter***Dis**



ICIDH-1 → ICF

- Conceptual transformation
- User needs
- Advocacy → science
 - Service Outcomes: *measure to manage*
 - Health Measures: *evidence to inform policy*
 - Causality: *multi-linear web*



Foundations of ICF

Human Functioning	- <u>not</u>	<i>merely disability</i>
Universal Model	- <u>not</u>	<i>a minority model</i>
Integrative Model	- <u>not</u>	<i>merely medical or social</i>
Interactive Model	- <u>not</u>	<i>linear progressive</i>
Parity	- <u>not</u>	<i>etiological causality</i>
Context - inclusive	- <u>not</u>	<i>person alone</i>
Cultural applicability	- <u>not</u>	<i>western concepts</i>
Operational	- <u>not</u>	<i>theory driven alone</i>
Life span coverage	- <u>not</u>	<i>adult driven</i>



Human Functioning **not disability alone**

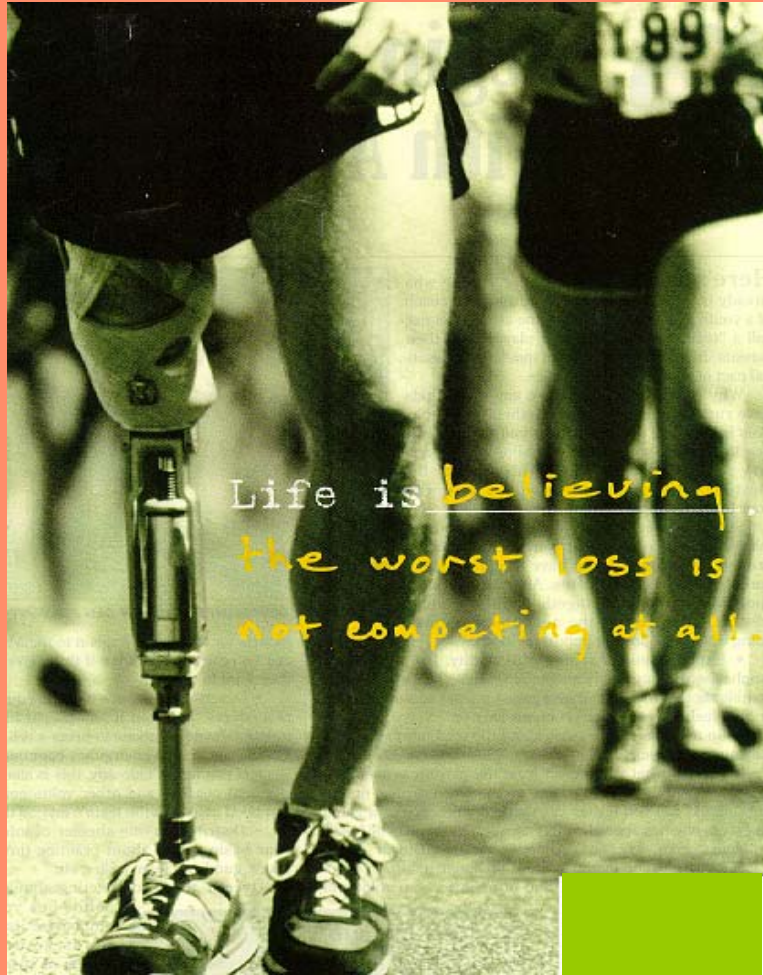
- **Body functions** vs impairments
- **Body Structures**

- **Activities** vs activity limitation
1980 disability

- **Participation** vs handicap



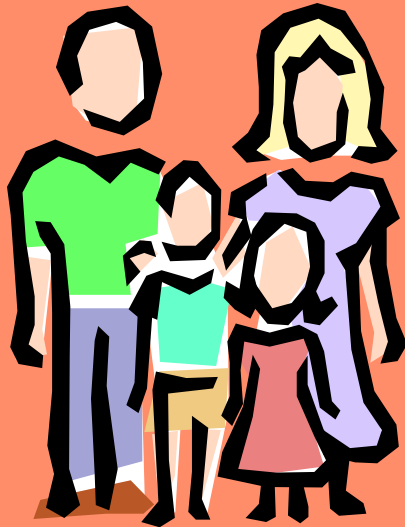
Participation or Handicap?



neutral language

- *“politically correct”*
- **correct use**
 - intervention
 - opportunity
 - positive aspects

Universal Model vs. Minority Model



Everyone may have disability
Continuum
Multi-dimensional

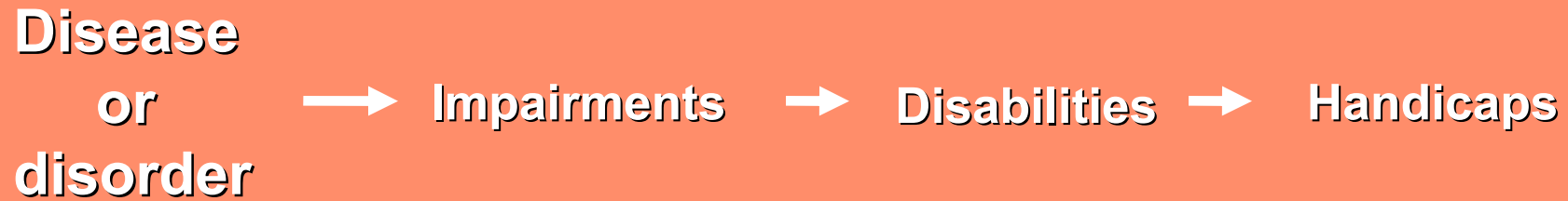
Certain impairment groups
Categorical
Uni-dimensional

Medical *versus* Social Model

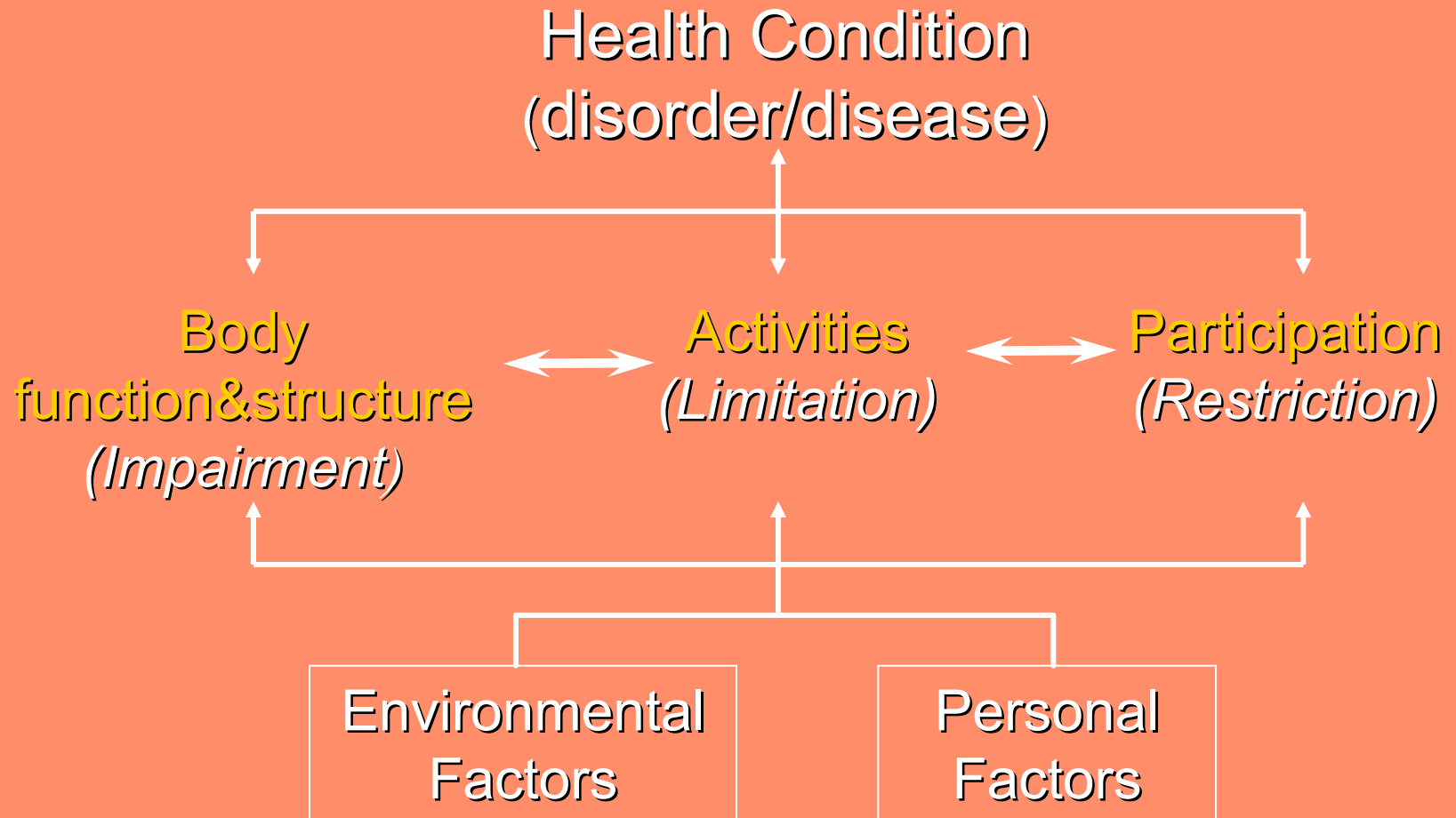
- | | | |
|-------------------------|----|--|
| • PERSONAL problem | vs | SOCIAL problem |
| • medical care | vs | social integration |
| • individual treatment | vs | social action |
| • professional help | vs | individual & collective responsibility |
| • personal adjustment | vs | environmental manipulation |
| • behaviour | vs | attitude |
| • care | vs | human rights |
| • health care policy | vs | politics |
| • individual adaptation | vs | social change |



Sequence of Concepts ICIDH 1980



Interaction of Concepts ICF 2001



Equity / Parity

- Loss of limb

landmines = diabetes = thalidomide

- Missed days at usual activities

flu = depression = back pain = angina

- Stigma

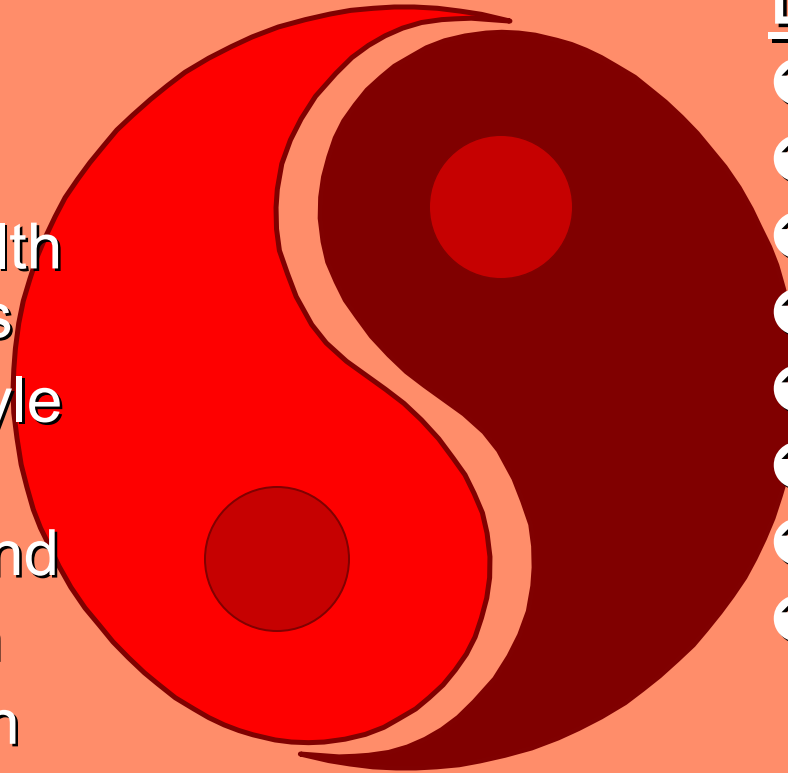
leprosy = schizophrenia = epilepsy = HIV



Contextual Factors

Person

- ↗ gender
- ↗ age
- ↗ other health conditions
- ↗ coping style
- ↗ social background
- ↗ education
- ↗ profession
- ↗ past experience
- ↗ character style



Environment

- ↗ Products
- ↗ Close milieu
- ↗ Institutions
- ↗ Social Norms
- ↗ Culture
- ↗ Built-environment
- ↗ Political factors
- ↗ Nature

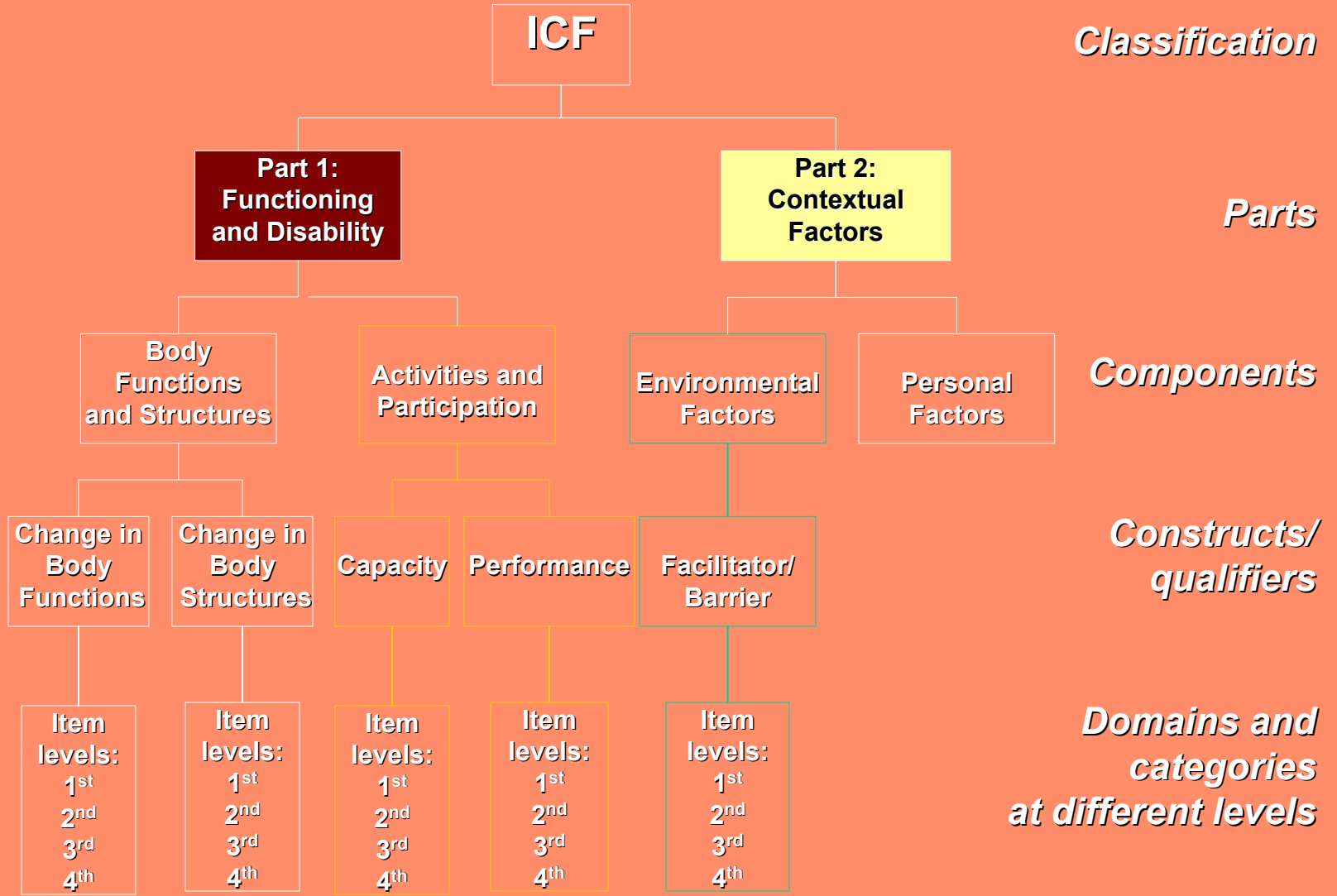


Comparability: equivalence across cultures

- Conceptual equivalence:
 - *similar understanding /meaning of concepts*
- Functional equivalence:
 - *similar domains*
- Metric equivalence:
 - *similar measurement characteristics*

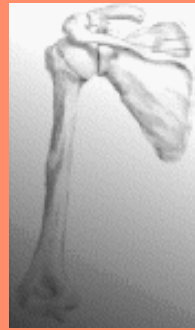


Structure



ICF Components

Body Functions & Structures



Functions

Structures

Activities & Participation



Capacity

Performance

Environmental Factors



Barriers

Facilitators

Body Functions and Structures

Mental functions	Structures of the nervous system
Sensory functions and pain	The eye, ear and related structures
Voice and speech functions	Structures involved in voice and speech
Functions of the cardiovascular, haematological, immunological and respiratory systems	Structures of the cardiovascular, immunological and respiratory systems
Functions of the digestive, metabolic and endocrine systems	Structures related to the digestive, metabolic and endocrine systems
Genitourinary and reproductive functions	Structures related to the genitourinary and reproductive systems
Neuromusculoskeletal and movement-related functions	Structures related to movement
Functions of the skin and related structures	Skin and related structures



Activities and Participation

- 1 Learning & Applying Knowledge
- 2 General Tasks and Demands
- 3 Communication
- 4 Movement
- 5 Self Care
- 6 Domestic Life Areas
- 7 Interpersonal Interactions
- 8 Major Life Areas
- 9 Community, Social & Civic Life



Environmental Factors

1. Products and technology
2. Natural environment and human-made changes to the environment
3. Support and relationships
4. Attitudes
5. Services, systems and policies



ICF in health & disability statistics

- **Common Domains**

- *Mobility* - *Cognition* - *Mood*
- *Self Care* - *Usual Activities* ...

- **link data from both health and disability**

- **Multiple Components**

- **overcomes the “impairment” focus**

- **Environmental Factors**

- **Comparability**



ICF in clinical practice & management

- Needs assessment
- Outcome assessment
- Utilization patterns
- Comparison of different interventions
- Consumer satisfaction
- Service performance
 - outcomes
 - cost-effectiveness
- Electronic records
- Clinical terminology

