

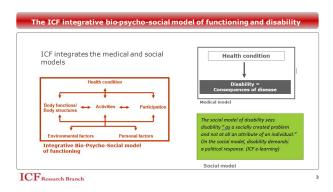
I'm Anu Myllyharju-Puikkonen from Jamk, University of Applied Sciences Finland. I work as a senior lecturer in Rehabilitation Institute and I am member of Finnish ICF educator network too. This video is developed during the Erasmus + INPRO project 2021-22 to support the learning of International Classification of Functioning, Disability and Health, ICF on INPRO ICF basic course.

These two videos are planned to complement the ICF e-learning material, so you can use them alongside to e-learning tool. I hope this helps you to learn ICF.

Remember to take notes, if you don't understand something or something is unclear. There will be time in the ICF reflection seminar or webinar during this INPRO ICF basic course go over any points that are unclear.



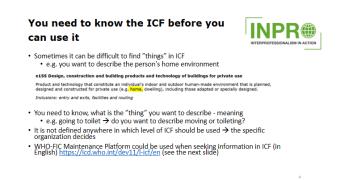
The purpose of these slides is to explain the different terms of ICF to help you better understand the ICF. ICF is planned to be a common language between different professionals, which is why these terms are so important. As you know, different languages are spoken in different countries, so you need to learn these terms in your own language as well. ICF is person centred. That means, we do not use ICF terminology when we talking to our clients or patients.



The name ICF comes from its emphasis on health and functioning, rather than on disability. Previously, disability started where health ended; once you were disabled, you were in a separate category. ICF wants to get away from this way of thinking. The WHO wanted to make ICF a tool to describe functioning, no matter of the cause of person's disability. ICF combines the medical and social models.

An individual's functioning is on an interaction between the health condition and the contextual factors; that is factors related to environment and the person. You can see the interaction (the arrays) between the different components of ICF. It means, that if something changes in one component, it might cause the chance also in other component or components.

The ICF definitions and categories are formulated in neutral language wherever possible, so that it can be used to record both positive and negative aspects of functioning.



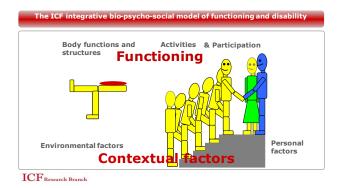
You need to be familiar with ICF before you can use it. The better you know the ICF, the better you can use it. It depends on what terms have you used; how easy it is to find a particular thing in ICF. Here is an example of the word "home". For example, if you type "home" into ICF Browser, it will not recognize the word and can't find that at all or only partly, although it can be found in many places in ICF. Many times, synonyms are needed when looking for something about ICF or when learning to know the ICF.

It is also important that you know, what you want to describe. For example, the person you are interviewing tells you that she finds difficult to call his friends. Does he mean, that it is difficult to use the mobile phone or does he mean, it is difficult to contact his friends. These things are described in different ways in ICF.

You can use WHO-FIC Maintenance Platform, when you are learning to know the content and terms of ICF. The address is here. Perhaps you have also this kind of tools in your own language, find it out!



Here is the view of the WHO-FIC Maintenance Platform.



ICF consists of five components, which interact with each other.

# The ICF integrative bio-psycho-social model of functioning and disability



### **Body functions**

 Body Functions are physiological functions of body systems including psychological functions

### **Body structures**

 Body Structures are anatomical parts of the body such as organs, limbs and their components

### **Activities and Participation**

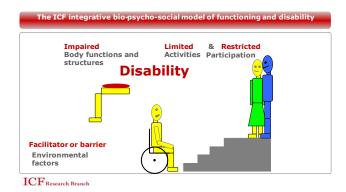
- Activity is the execution of a task or action by an individual.
  Participation is involvement in a life situation
- There is a single list of categories in the ICF for Activities and Participation. WHO recommends to use that instead of distinguishing these terms.

Let's take a closer look at the components: Here you can read what is meant by Body Functions, Body Structures and Activities & Participation. Body functions are....Note, that although there are differences between activities and participation, they are used always together in practical settings. It is explained in ICF e-material how to distinguish between them, but not worry about it.

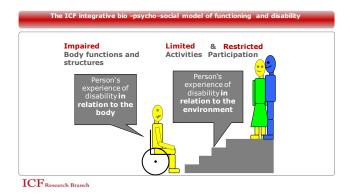


Here are explaned two very important terms that are part of activities and participation. When describing activities and participation, you can use these terms to clarify the situation. Performance describes what an individual does.....While capacity describes an individuals' ability... without any support of environment.

Here you see an example of how you can express this using "codes". The numbers after the dot are called qualifiers. In the next video you will learn more about qualifiers.



Here you can see the so-called "negative" terms for functioning. ICF uses specific terms for problems and challenges. They are called impairments, when we describe Body Functions and Structures. Those are **limitations** when there are some problems or challenges in Activities, or **restrictions** if there are problems to participate. Note that when describing Environmental factors, ICF has both positive and negative terms; facilitators and barriers. The Personal Factors can be described using positive or negative terms too.



Disability is an umbrella term for impairments, activity limitations and participation restrictions. It can be described in relation to the body or relation to the environment. Note, that ICF is a person centred, which means that we need to ask person's experience.



Environmental factors are the physical, social, and attitudinal environment where people live and conduct their lives. It consists of these five domains.

#### Personal factors



- Personal factors are particular backround of an individual's life and living, consisting different features of the individual, that are not part of any other chapter of ICF: gender, age, other health conditions, lifestyle, habits, coping styles, social backround, education, profession, experiences...
- There are no inclusion exclusion criterias
- There are no taxonomy of codes
- · Important to describe

Another contextual factor is Personal factors. Here you can read a list of different things that can be described here. This ICF component is a bit complicated because there are no inclusion or exclusion criteria. These things are important to list when describing person's functioning and need to be taken into consideration.

## **Health condition**



- Health condition is an umbrella term for disease, disorder, injury, trauma or other health conditions, like ageing, pregnancy, stress, congenital anomaly etc.
- May coded using the ICD-10 or ICD-11 by doctors
- Describing the persons functioning does not necessarily need the health condition
- If the person has multiple health conditions (diagnosis), the "other health conditions" are listed in personal factors

ICF is not related with specific health problems or diseases but describes related dimensions of functioning from multiple perspectives at the level of body, person and society. Health problems or diseases are called Health conditions in ICF and can be described using ICD-10 or 11 classification. ICF can be used even if the absence of a diagnosis.

If a person has multiple diagnoses, select one to Health condition and list the others under Personal factors. The most important thing is to take everything into account, because we don't know how different things will affect a person's functioning. Remember that we are individuals.