



USING ICF as planning and evaluation instrument in Early Childhood Intervention

Manfred Pretis
Dissemination workshop within
www.icf-plan.eu

30.11.2023
Moldova



MINISTERUL SĂNĂTĂȚII
AL REPUBLICII MOLDOVA



From
the People of Japan

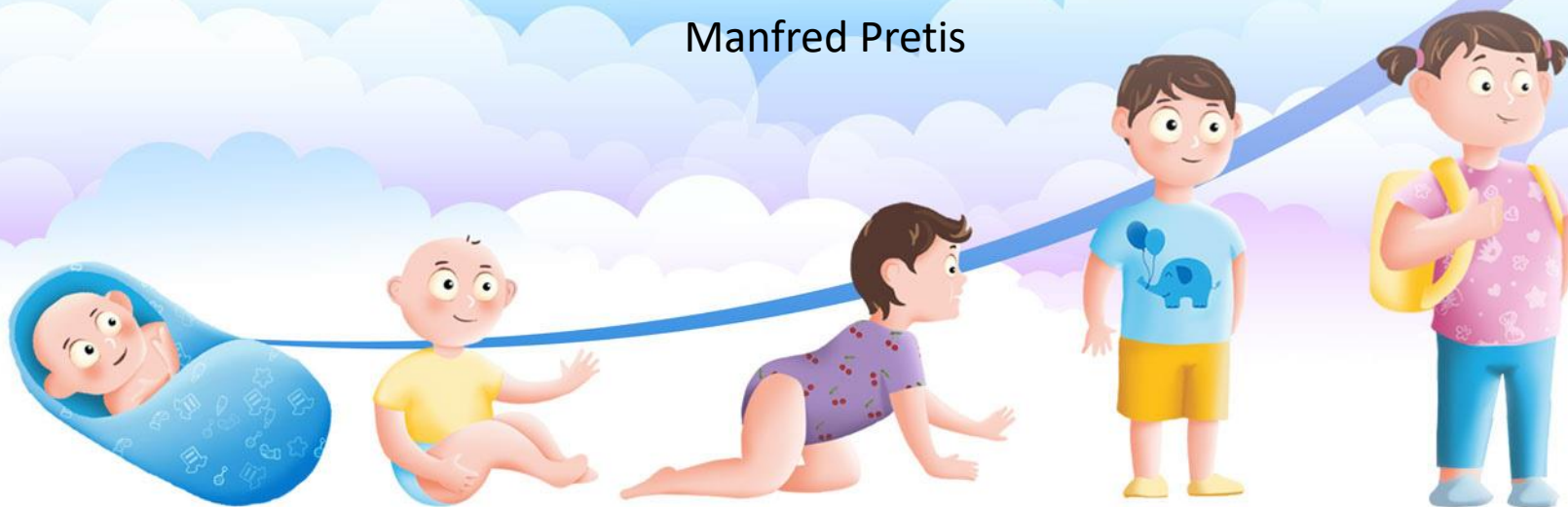


INITC

Intervenția timpurie în copilărie face diferența!

USING ICF as planning and evaluation instrument in Early Childhood Intervention

Manfred Pretis



Structure of the workshop

A: Module 1: Philosophy and background of ICF

1. Background of the ICF?
2. Where do we use it?
3. What is the ICF and how does it work?

B: Module 2: The structure of ICF

1. Health components within ICF
2. Assessment of components
3. What is ICF not about?
4. Implementing ICF in Early Childhood Intervention: challenges

C: Module 3: Practicing ICF in ECI

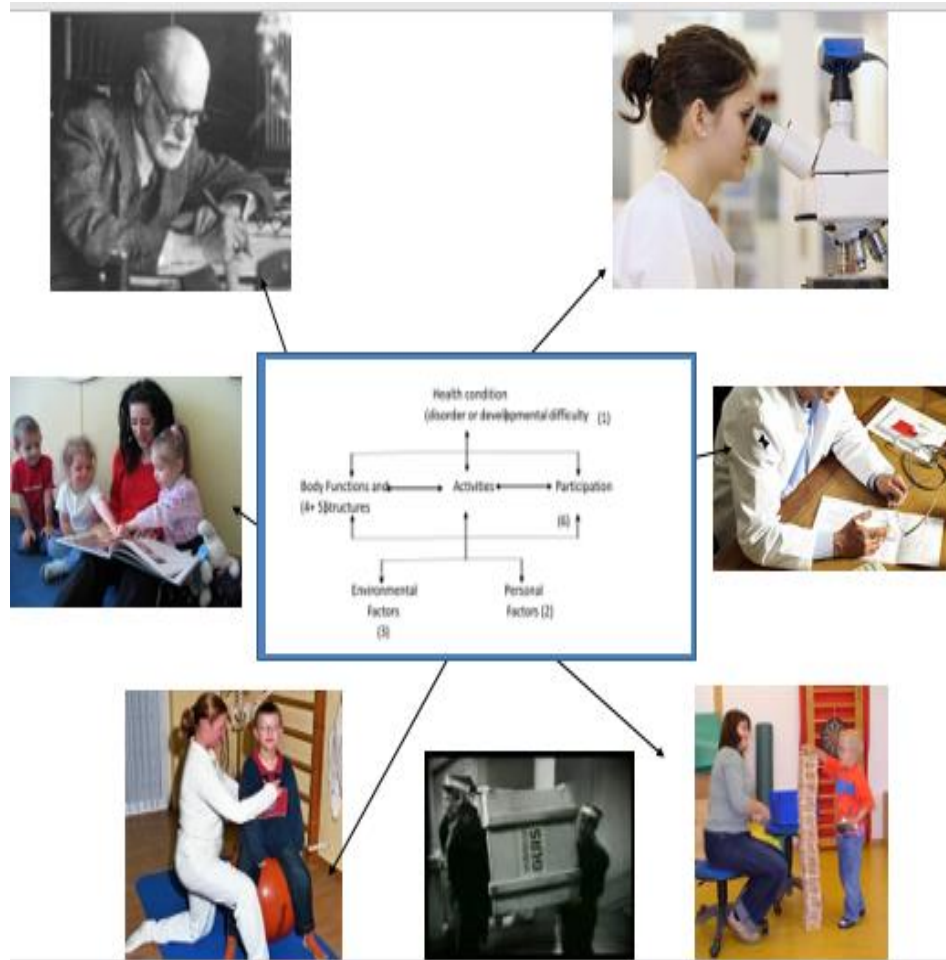
Intervenția timpurie în copilărie face diferența!

1) Philosophy and background of ICF: International Classification of Functioning, Disability and Health



Interventia timpurie în copilărie face diferența!

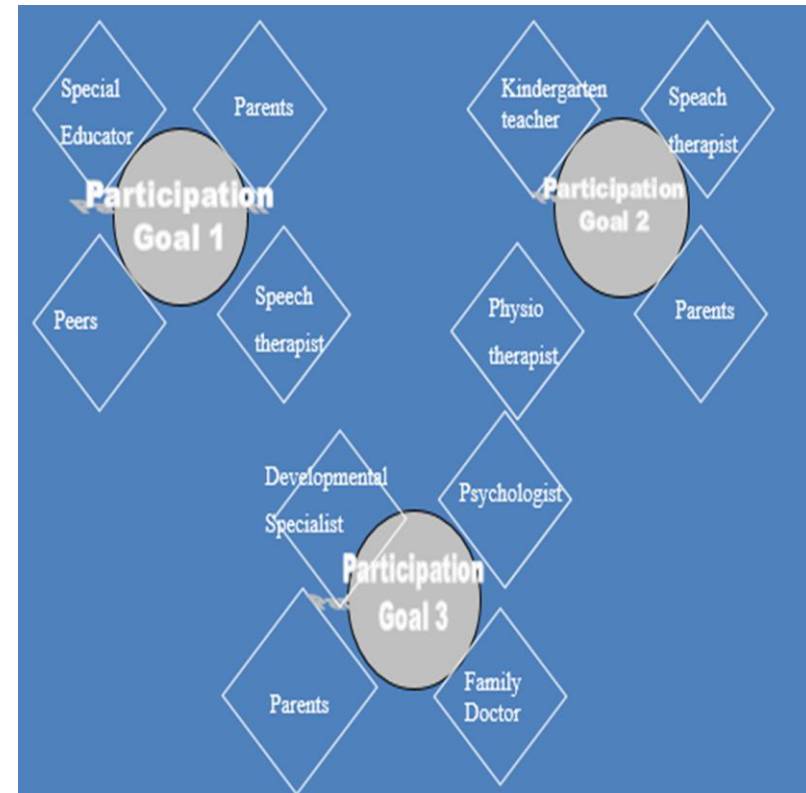
2) Where to use it? The „Team around the family“



Interventia timpurie în copilărie face diferența!

3) What is the ICF and how does it work?

ICF is a complementary (ability-focused and environment-interacting) description system (by means of health components and well defined common categories) to address the complex situation of a person with a health problem in a holistic interconnected – non-stigmatizing way in order to empower „participation“ of the child and the family.



Intervenția timpurie în copilărie face diferența!

Key aspects

1. Complementarity towards ICD 10 (or 11) or DSM V
2. Well defined (transsectoral) categories
3. Ability focused (primarily based on OBSERVATIONS)
4. Disability as a person-environment interaction
5. Thinking and acting based on networks and interconnections

Intervenția timpurie în copilărie face diferența!

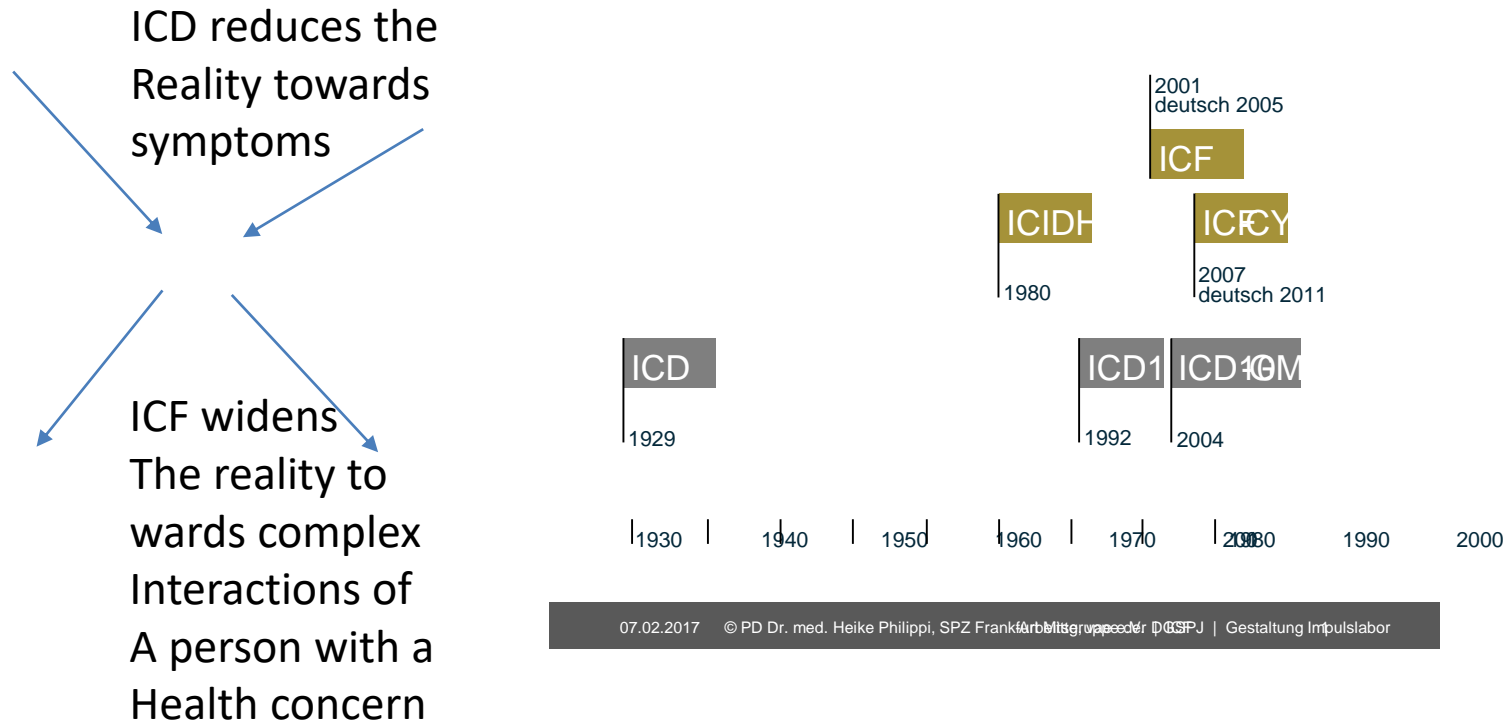
Goal:

6. Plan, describe, evaluate interventions with a COMMON language and COMMON evaluation criteria (WHO qualifiers) focussing on
7. meaningful participation goals of persons (with a health problem)

3.1. Complementary approach



Development of the WHO family of health-classifications

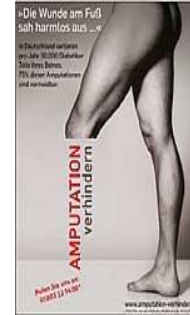


Interventia timpurie în copilărie face diferența!

3.2 Well Defined categories: From ICD to ICF: ICIDH

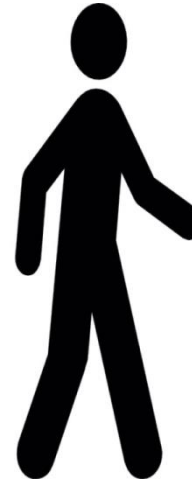
Body structures

“



<http://www.diab site.de/aktuelles /nachrichten/20 12/120321c.html>

Body functions



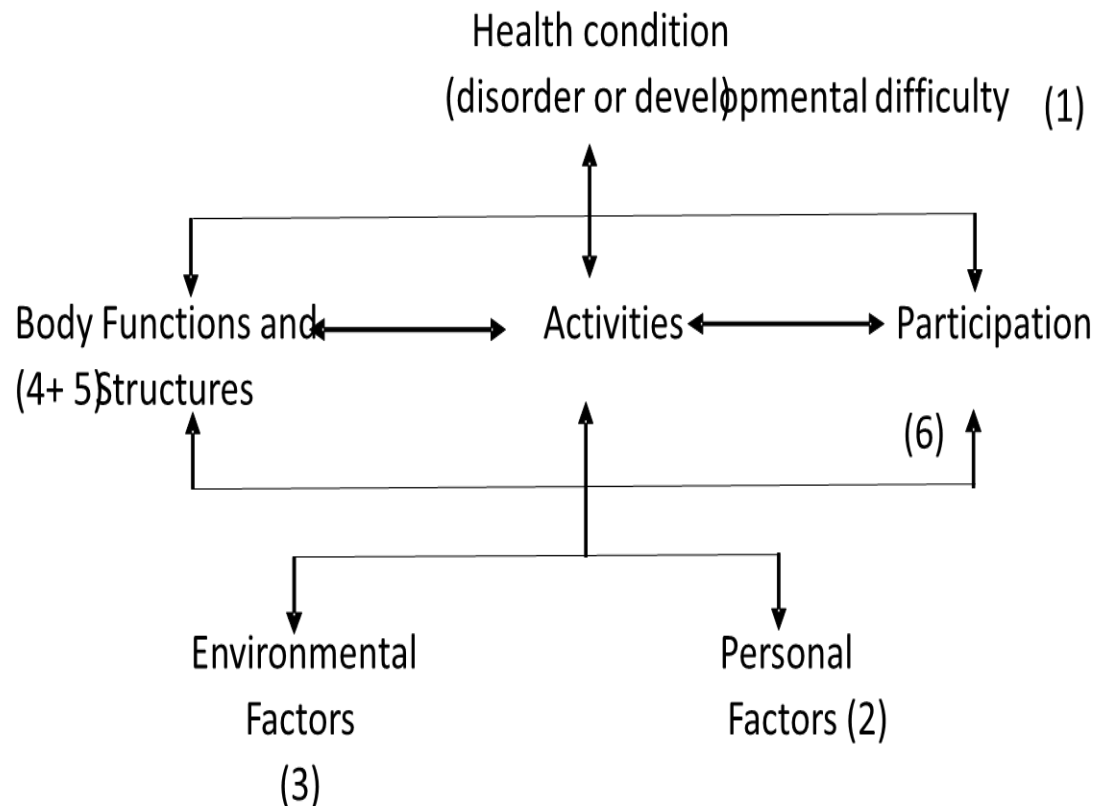
http://de.fre epik.com/fre ie- ikon/en/silho uette-eines- mannes-zu- fuss_703031. htm#term=s paziergang& page=1&posi tion=33

Participation



<http://www.schule- und- familie.de/ausmalbi ld- drucken/malvorlage -fussballspiel.html>

Description system by means of health components and well defined common categories



Intervenția timpurie în copilărie face diferența!

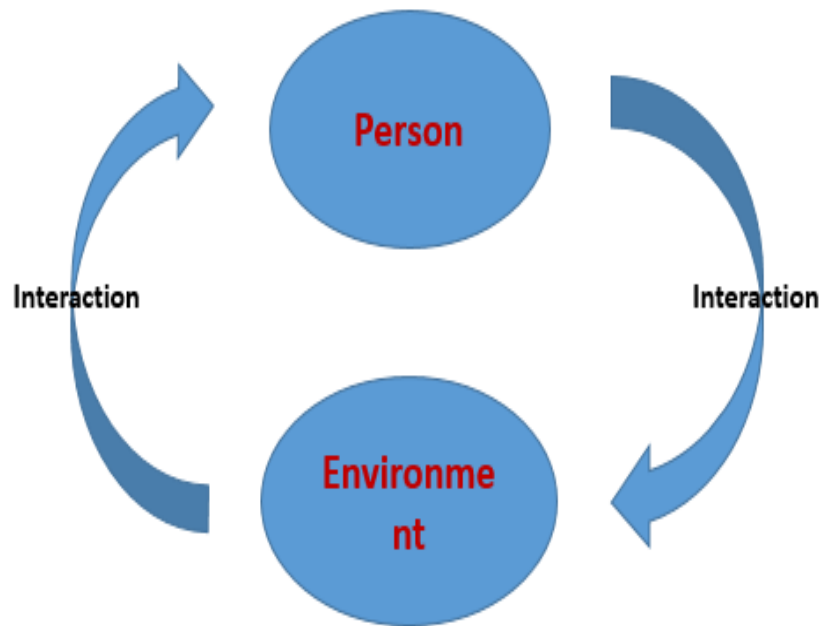
3.3 Paradigm shifts towards ability



Intervenția timpurie în copilărie face diferența!

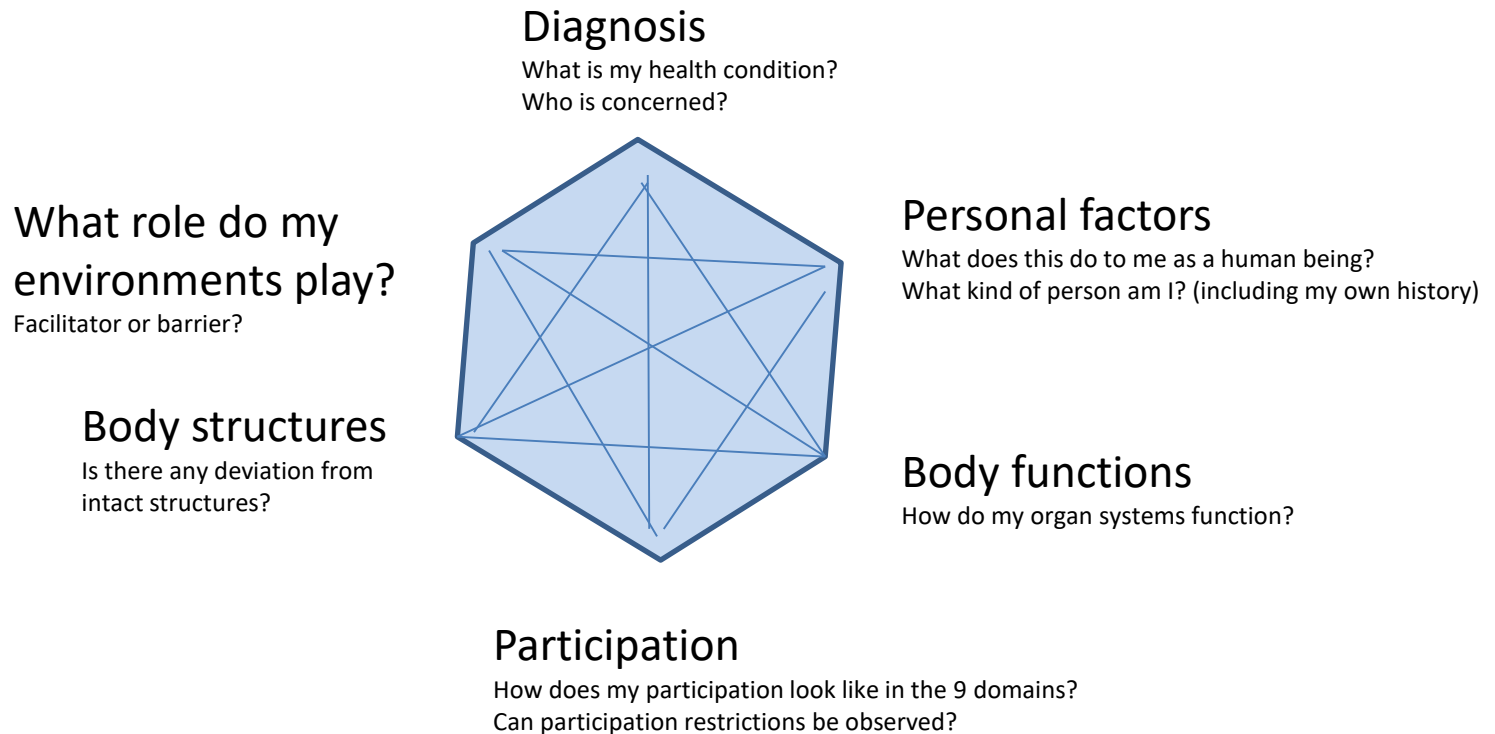
3.4 Environment interacting

The new understanding of Disability within ICF



Intervenția timpurie în copilărie face diferența!

3.5 Thinking and acting in a holistic interconnected way



Intervenția timpurie în copilărie face diferența!

3.6 Planning, documenting and evaluated interventions using a common „meta“ language

„ICF transfered in daily practice“



B: Module 2 „Structure of ICF“

1. Health components within ICF
2. Assessment of components
3. What is ICF not about?
4. Implementing ICF in school: challenges

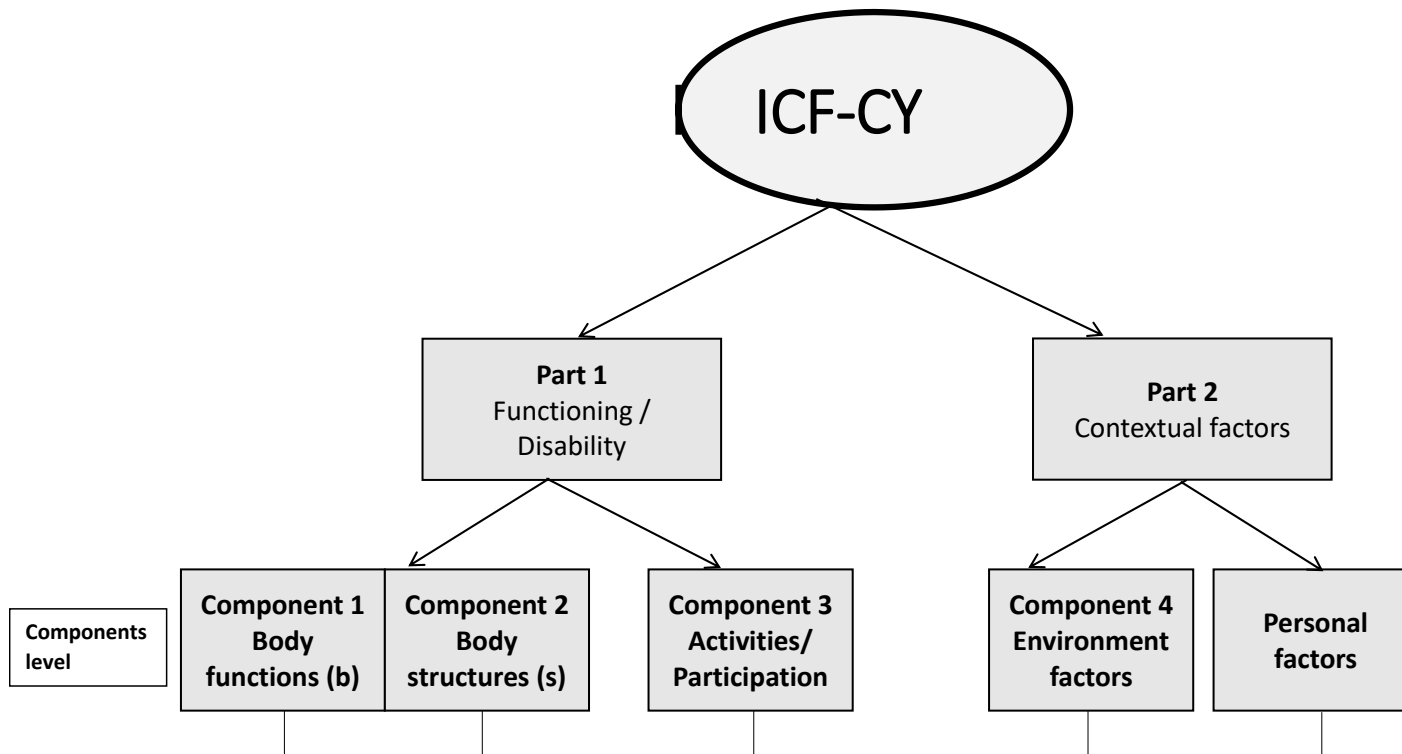
Interventia timpurie în copilărie face diferența!

1) Health components within ICF

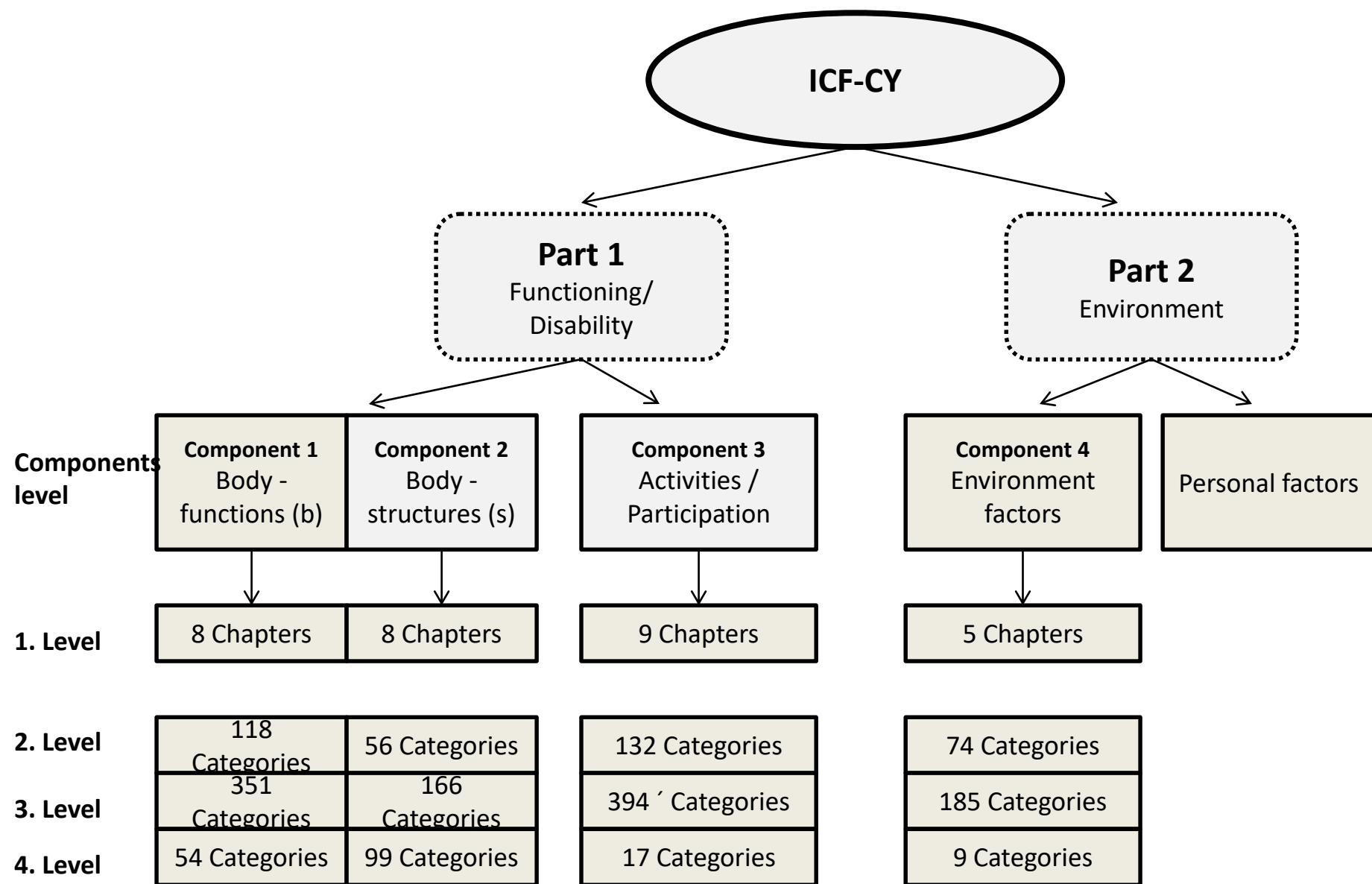
- ICF defines components of health and some health – related components of well-being (such as education and labor). Therefore the ICF domains can be seen as health domains and **health – related domains**.
- These domains are described from the perspective of the the individual and the society in two basic lists:
 - (1) **Body functions** and **body structures** and
 - (2) **Activities and participation**

Intervenția timpurie în copilărie face diferența!

Overall structure of ICF



Intervenția timpurie în copilărie face diferența!



Intervenția timpurie în copilărie face diferența!

Abbreviations

s: body structures

b: body functions

d: participation/activities

e: environment

Personal factors (no coding, no
abbreviaton)

Intervenția timpurie în copilărie face diferența!

Going deep:

Body structures and functions are classified according to the **organ systems**.

Impairments can involve anomaly, defect, loss or other significant deviation:

In practice: a missing corpus callosum, shortening of a muscle (=deviation), 4-finger groove = anomaly constitute impairments.

They can be permanent, temporary or progressive.

The impairments are described independently of etiology, (the cause) (this can be injury, genetic aberration...)

Intervenția timpurie în copilărie face diferența!

Chapters of the body functions and structures

	Functions		Structures	
Chapter 1	Mental functions	b1xx	Structures of the nervous system	s1xx
Chapter 2	Sensory functions and pain	b2xx	The eye, ear and related structures	s2xx
Chapter 3	Voice and speech functions	b3xx	Structures involved in voice and speech	s3xx
Chapter 4	Functions of the cardiovascular, hematological, immunological and respiratory systems	b4xx	Structures of the cardiovascular, immunological and respiratory systems	s4xx
Chapter 5	Functions of the digestive, metabolic and endocrine systems	b5xx	Structures related to the digestive, metabolic and endocrine systems	s5xx
Chapter 6	Genitourinary and reproductive functions	b6xx	Structures related to the genitourinary and reproductive systems	s6xx
Chapter 7	Neuromusculo skeletal f. and movement	b7xx	Structures related to movement	s7xx
Chapter 8	Functions of the skin ect	b8xx	Skin structures etc.	b8xx

Going deep: The scope of ICF:

PARTICIPATION

- The ICF covers all **important life areas** of an individual in sense of 9 Health domains

Domains	
d1	Learning and applying knowledge
d2	General tasks and demands
d3	Communication
d4	Mobility
d5	Self-care
d6	Domestic life
d7	Interpersonal interactions and relationships
d8	Major life areas
d9	Community, social and civic life

The ICF is not only about people with disabilities, it is about all people

Interventia timpurie în copilărie face diferența!

Activities/Participation

Distinction between „activities“ and „participation“:

Activities can be understood as context free

Participation is an activity in a meaningful life context: „ e.g. to be able to dress independently“

Interventia timpurie în copilărie face diferența!

Classification of environment

Chapter	Code		What does this means for the child's everyday life
1	e1xx	Products and technology	Toys, Medicines, household objects, tools
2	e2xx	Natural environment and human-made changes to environment	Air quality, landscape shapes, weather conditions ...
3	e3xx	Support and relationships	Available attachments and support persons (family, friends, peers, assistants...)
4	e4xx	Attitudes	Attitudes by family members, friends, peers, assistants
5	e5xx	Services, systems and policies	Availability of appropriate health/ social policies, services as SPC, Early interventions, kindergarten

Interventia timpurie în copilărie face diferența!

Something forgotten?

Personal factors are e.g. That Max is a happy child, has other siblings, that his parents are E.g. From Syria

- Personal factors are aspects of the particular background of life and life-style.
- Personal factors comprises features of the individuals that are not part of health condition and health states. These factors can be: gender, ethnical background, age, others health conditions,
- fitness, life style, habits, upbringing, coping styles,
- social background, education, profession, past and current experiences (past and current events),
- overall behavior pattern and character, individual psychological assets and other characteristics which can play a role in disability in any level.
- Personal factors are not classified in ICF.

Interventia timpurie în copilărie face diferența!

2) Assessments using ICF

ICF provides not only a description of health or health related domains, but also an **assessment**.

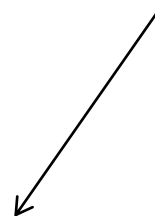
Each component can have a positive (functioning) or negative (impaired/damaged) aspect.

Environmental factors can be assessed as Facilitators or barriers.

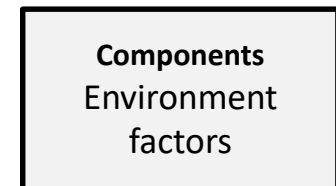
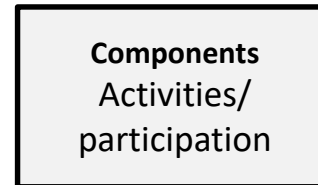
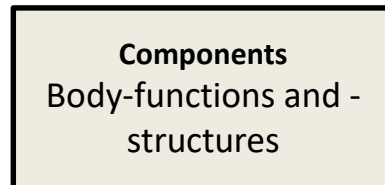
Intervenția timpurie în copilărie face diferența!

Intervenția timpurie în copilărie face diferența!

Components and functioning



Components
level



a) Functions: physiologic and psychological b) Structures

Can be functioning or impaired

Can be appropriate for the age or limited/restricted

Can be a facilitators or barriers

How to describe possible the correlation between health concerns and ICF components?

	Positive/negative terms	
Body structures	Functional and structural integrity versus impairments as significant deviations	Part 1: Functioning versus Disability
Body functions (=physiological functions)		
Activities (=undertake a simple task)	Activities versus limitation/restrictions	
Participation (=Involvement in a life situation)		
Enwironment	Barrier/Facilitators	Part 2: Contextual factors
Personal factors		

When a person shows functional problems that does not mean that he has a disease or is disabled.

Categories concerning body functions:

- a) Loss or lack
- b) Reduction
- c) Addition or excess
- d) Deviation

Environment factors are in interaction with the body functions./ A loss of a part of the body can be for example replaced with a prosthesis.

However, there might be also an interaction between the structure and the environment : e.g. a replacement with a prothesis is possible e.g. if it is paid by the health insurance...)

A myopia (short-sightedness) can be compensated by a visual aids (if they are available =environment) and the child can use them (E.g. cleaning = activities/participation)

Intervenția timpurie în copilărie face diferența!

3) What is ICF not about?

- a) Not About stigmatization and labelling: this relates mainly to personal factors (gender, ethnic background...)
- b) ICF is not a diagnostic tool. Diagnostic processes have to rely on validated diagnostic instruments/procedures
- c) ICF does not intend to „reduce“ children to code-systems.
- d) Implementing ICF in school does not (necessarily) require coding. The main goal is to think and act inclusively within the philosophy of ICF

Intervenția timpurie în copilărie face diferența!

5) Challenges for ECI to implement ICF

- ICF is a (common) meta-language. Professionals will need training to get used to think in ICF components.
- ICF might challenge existing „professional perspectives“ and ways of thinking: e.g. psychologists regularly use traditional „developmental domains“ which do not always match ICF components
- ICF invites to co-develop participation-goals with parents

Intervenția timpurie în copilărie face diferența!

Module 3: Practising ICF

- 1) Describing the situation of child with a health problem
- 2) Linking the observations with ICF health components
- 3) Assessing the situation
- 4) Defining goals and
- 5) Planning service provision

Intervenția timpurie în copilărie face diferența!

1. non stigmatizing way, focusing on PARTICIPATION

Person is not reduced a diagnosis (Down-Child, autistic...)

<http://www.thefirst1000days.net/video2.html>

PARTICIPATION refers what a person with a health problem can do in a meaningful way in a specific context.



Interventia timpurie în copilărie face diferența!

Down Syndrome (Q90)	Connecting with diagnosis	HEALTH SITUATION
Mehmet 3a old Living in a Turkish speaking context		PERSONAL ASPECTS
In a context with toys In the presence of 2 attachment persons Guided by his mother by verbal and hands on prompts	The environment as facilitator or barrier	ENVIRONMENT
With facial signs and (supposedly 3 chromosomes 21)	Acknowledging that a person has a BODY	BODY STRUCTURES
Hearing, seeing Coordinated eye-hand-coordination With joint mobility Trunk control	That this body performs FUNCTIONS	BODY FUNCTIONS
imitating his mother (clapping hands) (d1: learning) Watching his mother (d1 learning) Reacting on prompts during activities (d2 performing tasks) Handling cubes for 12 seconds (d4 Mobility) Sitting autonomously (d4 Mobility) Keeping eye contact... (d7 interactions)	Ability focused What the child can do (in a concrete context)	PARTICIPATION

Intervenția timpurie în copilărie face diferența!

Assessments

Environmental aspects

- Highly supportive material environment
- Highly motivated mother, however tendency to provide help very quick (this might increase conditioned helpness from the side of Mehmet – taking into account motivational aspects in children with Down Syndrom)

Participation

moderate to significant restrictions in participation concerning age typical **tasks (d2)** and **LEARNING (d1)**

Body functions

Keep observing issues of neuromusculo-skeletal functions (b7) (muscle tonus) and functions of speech (b3).

Body structures: no info

Intervenția timpurie în copilărie face diferența!

From assessments towards goals and services

Health domain	Reference to (age) typical participation	Participation goal	Service
General tasks (d2)	typical participation of 3 year old children shows self guided activities (able to construct a tower of cubes with 5 briggs).	d210: Within self guided games at home Mehmet starts and finishes single tasks.	Early intervention Home visiting program (1x/week) (as the environment generally can be considered as a facilitator)
Learning (d1)	3 year old children typically show interest in colours, construction etc.	d137: Mehmet knows names basic colours of objects when asked by his parents at home.	
Environm ent (e)	Parents of 3 years old children provide prompts, follow the activities of their children	e4104: When playing with her son, the mother (internally) counts till 10 before giving her son a prompt.	Psychological counseling to increase self-efficacy of the child

Intervenția timpurie în copilărie face diferența!

2) What is this good for?

Increasing **common understanding** between diverse involved sectors within the „team around the family“ by using comparable (description) categories

Increasing common understanding and higher involvement of parents as a member of the team around the family (Pretis/Brandt 2017?): Parents feel respected as they can use a comparable language as professionals (see parent-friendly ICF (www.icf-school.eu) in TR, MK, AL, DE and EN.

Focus on **meaningful participation** (and its evaluation) represented by observable **PARTICIPATION GOALS**.

Approx. 40% **time saving** due to avoidance of double assessments (parents report less „intrusion“)

Higher coordination of services by means of common participation goals

Logic algorithm towards services and acknowledgement of environmental facilitators

Focus on **INCLUSION** as the use of ICF highlights the importance of the environment (Inclusion understood as a systems quality to provide learning opportunities FOR ALL CHILDREN). ICF thinking and acting primarily means to think in categories of **NURTURING ENVIRONMENTS** (How can I increase environmental facilitators)

Intervenția timpurie în copilărie face diferența!

3) What does it cost?

- Top down strategy and willingness of the management or stakeholders to implement ICF in an institution (in line with UN Convention)
- Inclusion of relevant beneficiaries (e.g parents representatives,) administrative bodies and/or referring professionals (MDs...)
- Approx. 3 years project implementation process (including training processes of the team and necessary financial resources)
- Analysis of existing documents (planning, documentation and evaluation tools) and their transferability towards ICF.
- Training of staff towards a general understanding of the philosophy and use of ICF
- Support during the concrete implementation (e.g. concerning participation goals) in terms of intervention or accompanying support)
- Openness, motivation and trust between team members.

Intervenția timpurie în copilărie face diferența!

4) Helpful tools

Use existing training and implementation resources

- www.icf-school.eu (family friendly ICF-CY versions and electronic tool to create support plans towards additional educational support in ECI/kindergarten/school)
- www.icf-inclusion.net („Participation Goal Incubator: electronic tool to learn about best practice participation goals for diverse diagnosis and settings)
- www.icf-plan.eu System of ICF-based documentation and support planning
- www.icf-implement.net steps towards implementation of ICF in diverse sectors

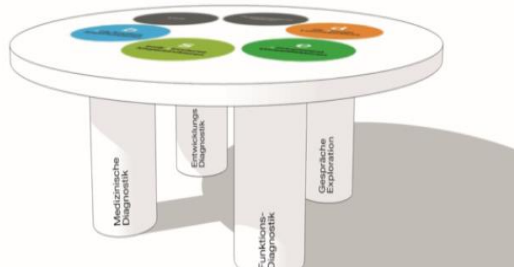
Intervenția timpurie în copilărie face diferența!

Intervenția timpurie în copilărie face diferența!

Helpful tools

Use practical tools to enable exchange with parents on eye level.

ICF als integratives Werkzeug



[qualitaetssicherung-icf-cy-kommunikationsdoppelpyramide.png](https://www.qualitaetssicherung-icf-cy-kommunikationsdoppelpyramide.png)

5) TAKE Home message(s)

In line with the CRPD ICF creates a paradigm shift from a medical (person centered view) of (social) developmental difficulties towards an interactive environmental perspective (disability as an interaction between an environment and the functioning of a person)

ICF provides a common and meta-language for intersectoral cooperation, including the parents as team-partner. ICF enables parents to **communicate on a par** with professional (as the same terminology is used)

ICF contributes (by means of its focus on participation) to meaningful goals (from the perspective of the beneficiary and facilitates transparency and evaluation of goals.

Intervenția timpurie în copilărie face diferența!

6) References

Rosenberg, R., Gorter, J.W. (2011). The F-words in childhood disability: I swear this is how we should think. Child, Care, Health and Development, 1-7.

Pretis, M. (2014). ICF-basiertes Arbeiten in der Frühförderung. München: Reinhardt

Pretis, M.; Sixt-Kopp, S., Mechtel, R. (2019) ICF in der Schule. München: Reinhardt

Pretis, M. (2020). Teilhabeziele planen, formulieren und überprüfen. München: Reinhardt

Pretis, M., Kopp-Sixt, S. (2019). ICF in familienfreundlicher Sprache. Auf Augenhöhe mit Fachkräften sprechen. Graz: Eigenverlag

Pretis, M. (2022). ICF-basierte Gutachten erstellen. München: Reinhardt

Vygotskij, Lev S. (1932-34/2005). Das Problem der Altersstufen. In: Ausgewählte Schriften (S. 53-90). Band 2. Herausgegeben von Joachim Lompscher. Berlin: Lehmanns Media

WHO (2005). Die Internationale Klassifikation der Funktionsfähigkeit, Behinderung und Gesundheit. Abrufbar unter www.dimdi.de

Internetseite: www.icf-school.eu

www.naturalisticteaching.com

www.icf-inclusion.net

www.icf-plan.eu



Interventia timpurie în copilărie face diferența!