

NOVEMBER 2005 NACC CLEARINGHOUSE ON ICF MESSAGE

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1. “LIVING IN OUR ENVIRONMENT” IS THEME FOR NACC 2006 CONFERENCE

Living in Our Environment: The Promise of ICF
12th North American Collaborating Center Conference on ICF
June 5 to 7, 2006—Vancouver, British Columbia (Canada)

Reach new heights this summer

On June 5 to 7, 2006, the Canadian Institute for Health Information and the National Center for Health Statistics, CDC, welcome you on behalf of the World Health Organization Family of International Classifications to the 12th Annual North American Collaborating Center (NACC) Conference on the International Classification of Functioning, Disability and Health (ICF).

Through interaction with peers from Canada, the United States and around the world, we will look at how ICF touches all aspects of the environment we live in.

We invite you to join us on Canada’s stunning west coast in the cosmopolitan city of Vancouver—winner of three Rick Hansen Accessibility Awards in 2004—to take part in discussions on the issues, initiatives and opportunities surrounding ICF.

For more information, please contact:

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Check www.icfconference.com frequently for updates. An executive summary of highlights from the 2005 meeting at Mayo soon will be on this website.

2. INTERNATIONAL AND DOMESTIC ICF USES REPORTED BY TRAVIS THREATS

Dr. Travis T. Threats was in the Clearinghouse “Spotlight” in the second NACC Clearinghouse on ICF message (November 2002), and he has actively continued his ICF work since then. In 2002, he was Professor of the Department of Communication Sciences and Disorders at Saint Louis University, but he has since been elevated to Chair. Threats reports that he has been working with a doctoral student in communication disorders at the University of Pretoria in South Africa on her incorporation of the ICF into her doctoral dissertation on the sales clerk’s verbal interactions with persons with traumatic brain injury. Also at the University of Pretoria’s Centre for Augmentative and Alternative Communication, Juan Borman is publishing on the ICF and in the journal *Disability and Rehabilitation*. Borman is also working on the ICF with Australian and Swedish researchers. Travis has been in correspondence with a university/hospital-based speech-language pathology group in Denmark about ICF use. Travis also reports that he is aware of interest of using the ICF in Saudi Arabian circles at the Jeddah Speech and Hearing Center. He states that there is an ICF-based 2005 ICF Master of Philosophy thesis by I. Law of the University of Hong Kong on “Functional communication following laryngectomy”. Threats also reports that there is an ICF-based 2003 University of Hong Kong PhD thesis by E. Ma on “Impairment, activity limitation and participation restriction issues in assessing dysphonia”. Threats reports on a 2004 publication by Chuokoki Shuppan of the League of Community-based Speech-Language Therapists entitled “Conversation partners for people with aphasia: Let’s talk with people with aphasia” (in Japanese). Three other ICF publications in Japanese include a book now in press (Rehabilitation of People with Aphasia by Sasanuma et. al.) and two articles (one in 2004 by Ueda on “ICF and higher brain function” in the journal *Higher Brain Function Research*, and the other in press by Watamori on “Perspectives in neuropsychological rehabilitation” in the *Japanese Journal of Neuropsychology*). Threats reports that Papathanasiou et. al. presented a paper in 2004 entitled “Using the ICF framework to evaluate a rehabilitation programme for people with laryngectomy” at the 5th European Congress of Oto-Rhino-Laryngology Head and Neck Surgery (EUFOS) in Rhodes, Greece. Moreover, a 2003 Finnish SLP magazine had an ICF article which translates to “ICF – a useful tool to describe speech therapy”.

Travis Threats is perhaps most noted for his influential ICF work with the American Speech-Hearing Association (ASHA), which now explicitly uses the ICF as the framework for both assessment and intervention in the 2005 publication of Preferred Practice Patterns for the Profession of Speech-Language Pathology. ASHA's 2004 publication on Quality of Communication Life Scale uses the ICF, and Threats served as a reviewer. Threats serves on ASHA's Evidence Based Practice Committee, where the ICF is cited as a guiding agent for evidence based practice research. Travis Threats has also done an extensive literature search of all SLP publications which use the ICF, and these will be highlighted in a future Clearinghouse message. Contact Dr. Threats at >threatst@slu.edu> and 314-977-3175.

Recent Threats publications/presentations with ICF focus in SLP journals

Threats, T. (2005) Culturally sensitive care in the health care setting. *Perspectives on communication disorders and sciences in culturally and linguistically diverse populations*, 12 (3), p. 3-6.

Simmons-Mackie, N, Threats, T., & Kagan, A. (2005). Outcome assessment in aphasia: A survey. *Journal of Communication Disorders*, 38, 1-27

Threats, T. (2005) Clinical ethics in the ICF: Influences of competency and advocacy. *Perspectives in Gerontology*, 10 (1), 8-10.

Threats, T. (2005, July 12). Active and proactive-boomers and the health care system. *The ASHA Leader*, 6-7, 18.

Threats, T., Witte, K, & Horner, J. (2004, November). Doing the right thing: Making sound treatment decisions in eldercare. Short course presented at ASHA convention, Philadelphia, PA.

3. CDC SEEKS COMMENT ON NEW "CDC HEALTH PROTECTION RESEARCH GUIDE, 2006-2015"

CDC's Division of Private and Public Partnerships invites you to comment on CDC's new Health Protection Research Guide from November 18, 2005 through January 15, 2006. There are nine chapters, most with relevance to ICF, including Chapter 5 ("Promote Health to Reduce the Burden of Chronic Diseases and Disability"). Access the guide at: http://www.rsvpBOOK.com/custom_pages/50942/index.php. The final guide will serve to identify knowledge gaps, describe needed research, and plan research over the next decade. The Research Guide will provide a comprehensive, long-range vision of national and global public health needs that CDC and its partners can address through research. The Research Guide will help identify critical knowledge needed to achieve CDC's new Health Protection Goals which are designed to maximize the health impact of programs, services, and emergency responses. CDC highly values the insights and suggestions from its partners and asks that this information be widely circulated and that

written comments be sent in. If you have questions, please call Jamila Rashid, PhD, MPH at (404) 639-4621 or send an email to researchguide@cdc.gov.

4. PORTER SPEAKS ON ICF AT NEW JERSEY HOSPITAL ASSOCIATION CONFERENCE

Heather R. Porter, CTRS, MS presented on the ICF on November 7, 2005 at the New Jersey/Eastern Pennsylvania Therapeutic Recreation Association's Fall Conference at the New Jersey Hospital Association Conference Center in Princeton, New Jersey. She spoke on the application of the ICF to Recreational Therapy Practice. Heather is working on an ICF-based book with over 30 ICF “diagnoses”, each discussing a common recreation therapy. When the book is published, we will report on it. For more information about the conference go to www.njepa-tra.com. Heather can be contacted at: Heather R. Porter, 2121 Griffith St., Phila PA 19152, 215-722-6292, hrporter4@yahoo.com.

5. SURGEON GENERAL’S CALL TO ACTION TO IMPROVE THE HEALTH AND WELLNESS OF PERSONS WITH DISABILITIES 2005

The new publication “The Surgeon General’s Call to Action to Improve the Health and Wellness of Persons with Disabilities 2005” is available at <http://www.surgeongeneral.gov>. On page v the report states: “the perception of disability – a condition of the body, mind, or senses of a person of any age that may affect the ability to work, learn or participate in community life – also is in transition. With the recognition that disability is not an illness, the emphasis increasingly is on continuity of care and the relationship between a person with a disability and the environment at the physical, emotional and environmental levels.” --Richard Carmona, M.D, Surgeon General. On page 37, the report defines “Functioning” as “An umbrella term referring to an individual’s capacity related to body functions, activities, and participation in aspects of individual, family, and community life. It includes the positive aspects of the interaction between an individual and that individual’s environment.” Hmm...sounds like the ICF definition, which is not cited in the 44-page report.

6. GREENBERG GIVES ICF REPORT FROM WHO-FIC MEETING TO ICF SUBCOMMITTEE

On November 9, 2005, the New Freedom Initiative ICF Subcommittee had a presentation by Marjorie Greenberg, Head, WHO Collaborating Center for the Family of International Classifications (WHO-FIC) for North America on the annual WHO-FIC Network meeting. The meeting was held in Tokyo on October 16-22. The WHO-FIC Network was established by the World Health Organization in 2001 with ICD and ICF as its reference classifications. The Collaborating Centre Network previously had focused almost exclusively on ICD. WHO has recently enhanced the ICF portion of its website, which can be found at www.who.int/classifications/en/. During this year’s meeting, a “Functioning and Disability Reference Group” was established, terms of reference are under development and members from all WHO-FIC Collaborating Centres and WHO

regions will be sought. ICF priority areas for health and disability statistics, health outcome measurement, health records, and social policy were agreed upon. It was reported that ICF-CY field-testing was completed, and publication in final by WHO is anticipated in 2006. The annual WHO disability photo contest in 2006 will focus on children. The next annual WHO-FIC meeting will be held in Tunisia at the end of October; dates are being finalized.

7. AHIMA STAFFERS PUBLISH ON ICF IN HOUSE JOURNAL

The article is entitled “ICF: Representing the Patient beyond a Medical Classification of Diagnoses”, by Kathy Giannangelo, Sue Bowman, Michelle Dougherty, and Susan Fenton. It appeared in *Perspectives in Health Information Management* (2; 7; Fall 2005). Three case studies are presented with ICF codes, relevance to electronic health records is discussed, and stakeholders who need training are listed. All four authors are employed by the American Health Information Management Association. Contact the lead author at Kathy.giannangelo@ahima.org or tel 312-233-1520.

8. CONTINUE TO SHARE YOUR ICF NEWS WITH PJPLACEK@VERIZON.NET

Over 800 persons interested in the ICF receive these monthly announcements about ICF activities. Share *your* ICF activities with the group by contacting Dr. Paul Placek at PJPLACEK@verizon.net, or by calling him at 410-643-2817. Join the NACC Clearinghouse Listserv by contacting him or Linda Washington at LRWashington@cdc.gov. Previous messages since October 2002 can be viewed at <http://www.cdc.gov/nchs/about/otheract/icd9/icfhome.htm>.

9. SPOTLIGHT ON ELIZABETH BADLEY

Each month we "spotlight" someone who has made a difference with the ICF, and this month we focus on Dr. Elizabeth Badley. Called “Liz” or “Liza” by her friends, Liz started her career in health research in Britain where she worked with Philip Wood, the prime author of the ICIDH, at the ARC (Arthritis and Rheumatism Council) Epidemiology Research Unit in Manchester UK. She now lives and works in Toronto where she is the Director of the Arthritis Community Research and Evaluation Unit. Liz and her family emigrated to Canada in 1989. She and her husband have three children who are now grown (one is married, another engaged to be married) and at various stages of university education in three countries, Canada, the UK and the USA, and she wonders when any of them are ever going to leave school. However, they are a good excuse for traveling, which she likes to do. It is also good to come back to Toronto, which she regards as one of the most livable cities in North America.

One of the questions she is sometimes asked by her arthritis researcher colleagues is why

she is so heavily involved in the WHO disability classifications. The answer is partly science and partly history. She was privileged, along with a sociologist colleague, Michael Bury, to work with Philip Wood on what became the ICIDH. Why Philip Wood became the prime author of the ICIDH is a good story. One driving force was that arthritis and related conditions are the most frequent causes of physical disability in the population. Working in epidemiology and public health, Philip was aware that it was important to be able to measure the population impact of these diseases. Back in the 70s there was no systematic way to do this. However, around that time he was working in Geneva on the 9th revision of the International Classification of Diseases, and was shown a draft version of a classification of impairments. He opted in, the scope was broadened, and the rest is history. Philip Wood is called the “Father of the ICIDH”, and some call Liz the “Great Auntie of the ICIDH”.

Liz continues to work on the population impact of arthritis and promote the development of interventions to reduce arthritis associated disability. All of the older citations which follow used the ICIDH, and the newer ones use the ICF as a guiding principle. Liz also played a part in the development of the latter classification, spending some time at WHO in Geneva working with the WHO revision team on the ICIDH/ICF. Her current research spans public health aspects of arthritis to application of models of disablement, in particular to the impact of arthritis on participation.

She can be contacted as follows: Elizabeth Badley, Director, University of Toronto – Main Campus, c/o Toronto Western Hospital, Main Pavilion, 399 Bathurst St, 10th Floor Rm. 316, Toronto, Ontario, Canada M5T 2S8, tel 1-416-603-6268, fax 1-416-603-6288, e.badley@utoronto.ca or badley@uhnres.utoronto.ca.

BADLEY’S PUBLICATIONS WHICH USE ICIDH OR ICF

BADLEY EM, Thompson RP, Wood PHN. The prevalence and severity of major disabling conditions - A reappraisal of the government social survey of the handicapped and impaired in Great Britain. *Int J Epidemiol* 1978;**7**:145-151.

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Editor's note: One of the citations NOT listed above is one of the most fascinating. It is "An integrated model of disablement for research and clinical and rehabilitation practice", presented at the NACC ICF meeting at Mayo this year. It builds on the ICF, ICIDH, Quebec model, and Nagi model and is a five-component model of disability (the ICF has three components), and includes criteria for each component. The five components are: body function and structure, actions, tasks, societal participation, and social involvement. A brief abstract is at www.icfconference.com. She is remaining mum on distributing much more until it is published. We also note that Dr. Badley is an invited speaker at the upcoming Australian ICF Forum in February 2006.

