

ICF: A Hands-on Approach for Clinicians and Families

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ICF: A Hands-on Approach for Clinicians and Families is a rare collection of chapters on one of the most important health classifications related to adapted physical activity (APA). The World Health Organization International Classification of Functioning, Disability, and Health (ICF) has been described as the common language for functioning and disabilities, and it fits into the family of international classifications. In short, the ICF is a biopsychosocial model and represents functional health, whereby disability is considered the interaction between a person and their contextual factors, such that it negatively impacts their participation in activities. Therefore, disabilities are not absolute, rather they are relative to the life areas around the individual.

This is the first book that focuses on the practical applications of the ICF framework. Eight authors contributed to 10 chapters in the book, and it is divided into three sections, appendices, a list of references, and an index. Although the ICF was published in 2001, with availability in multiple languages (supplied by national health organizations for local use), the explicit use of the ICF model remains low in APA. Readers of this book will find the text extremely accessible without unnecessary jargon and with practical presentations of the framework's applications. This, I believe, will provide an improved understanding of ICF and its use by practitioners and researchers in the field of APA. As such, I found this book a much welcome and refreshing approach to the ICF.

The publication of this book is timely, as the ICF was recently updated by merging the children and youth version of the model with the main version, as well as the recent addition of the core sets and checklists. The insights from the book are rich with practical examples and exercises in the seven appendices at the end of the book. Together these make this a great pedagogical tool to examine current practices of the ICF with some questions to test knowledge gained from each chapter. There are also handouts available to use, such as the F-words goal sheet, a resource that may be used to facilitate the communication of records between educators (e.g., individualized education plans), therapists (e.g., health records), and families to track functional progression on desired goals. In addition to the book, there are external links to websites that provide up-to-date information related to the ICF for readers seeking further information.

One useful and interesting aspect of the book was its novel presentations of the ICF framework. Whereas traditionally the ICF positions health at the top of the

model in Chapter 5, the authors present an inverted model that presents the contextual factors at the top with the health condition at the bottom, emphasizing the person-centered approach at the heart of the ICF. What I liked about this presentation is that it takes into consideration the natural way that we tend to read models, that is from top to bottom. This version of the model, I believe, will be most relevant for APA practitioners, as it encourages us to address the environmental and personal factors and attend less to specific diagnoses. Although this may seem controversial in certain applied APA areas, the ICF, as described in Section B (Chapters 6, 7, and 8), is a key tool that is used in services across disciplines to improve the lives of individuals with disabilities. The ICF acts as a common language that can be used in clinical settings, health and social care, training of health professionals, as well as for informing administration, policy, and advocacy. The case studies in Section B are targeted at pediatric populations, providing detailed insights on how the ICF can be used for the practitioner. These applications could easily be transferred to the field of APA. This information is key for APA practitioners to work with health professionals to provide person-centered care and support.

Even though there was no mention of APA, this book was thoroughly enjoyable to read and scientifically stimulating. For example, one of the main challenges in the use of the ICF has been the lack of coding of personal factors. It has been argued that personal factors should not be in the ICF (Simeonsson et al., 2014), while others provide a strong case for their inclusion (Leonardi et al., 2015). The authors explain the historical developments of the ICF and extend the debate by sharing what they believe are appropriate ways to use the personal factors in the ICF in Chapter 10. They present another iteration of the model as suggested by Heerkens et al. (2018), where the personal factors are at the top of the model and include some of the health conditions. This has also been highlighted by the van de Ploeg's conceptual model for physical activity for people with a disability (van der Ploeg, van der Beek, van der Woude, & van Mechelen, 2004) and may bring forth developments in how personal factors evolve in the ICF.

This is the book I was asking for when I was writing my doctoral dissertation (Ng, 2016)! It has great insights into the ontology, philosophy, theory, and utility of the ICF. Through this knowledge, practitioners and researchers in APA can share a common language when it comes to a systems approach to promoting physical activity.

References

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