ICF obliged assessments in neurological rehabilitation of children and adolescents

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Abstract

Reliable assessments for quality assured and ICF (WHO International Classification of Functionality) obliged neurological rehabilitation in paediatrics are poorly developed or missing at all. This is in contrast to WHO required goals and activities also for paediatrics, after alike strategies have been introduced for adults since 1985. Existing assessment procedures for ICF relevant rehabilitation strategies were analyzed and related to WHO defined parameters.

It could be shown that established and widely acknowledged assessment procedures had severe shortcomings. Even in combination with WHO defined "qualifiers" they often could not sufficiently characterize the extent of impairment in children and adolescents but produced widely incorrect judgments.

In addition it could be shown that the WHO defined "qualifier" approach itself is often insufficient in paediatrics. This is due to the ample range of age dependent plasticity in children with the multifaceted nature of inborn or acquired defects of the nervous system. Consequently the WHO ICF strategy was complemented by differentiating between "impaired and unimpaired qualifiers". However, even then ICF classification suffers from severe shortcomings for a generally and globally assessment in paediatrics.

On the basis of carefully investigated case studies it is recommended ICF assessment practice must be complemented by additional tests and measures in paediatrics. Only this way a soundly appropriate, more individualized approach can be reached in daily practice for the steering and qualification of suitable rehabilitation measures and assessment outcomes.

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