

# **Summary of the results from the performed Case Studies within the project “A common language in school”**

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## 1. General about the project

“A common language in school” is an Erasmus+ project from the Key Action 2, dealing with the use of the World Health Organization’s International Classification of Functioning, Disability and Health – ICF (WHO 2001) in educational settings and with providing concrete tools for professionals who work with children and pupils with developmental difficulties. The project introduces ICF as common language to describe the individual learning situation of a child and to enable ability-based holistic transdisciplinary assessments and planning processes in school settings. The project is jointly implemented by 10 partner institutions coming from 4 different countries (Austria, Germany, North Macedonia and Turkey). The objectives of the project are:

- To bridge ICF and inclusion: to bridge inclusive schools with other sectors i.e. to build inclusive bridges between different professionals and parents, by providing them the possibility to use one common language,
- To facilitate synergies and higher efficiency by supporting the children and the pupils with developmental difficulties in their full participation in life,
- To exploit train-the-trainer certification processes for participating professionals.

The project implementation runs from September 1, 2018 until August 31, 2021. Following the project strategy to provide concrete tools for professionals who work with children and pupils with developmental difficulties in school settings, the joint implementation of the foreseen project activities by the partners has resulted with the following four intellectual outcomes:

- Briefing Packs "ICF in School": curriculum and adapted training materials (4 modules) for professionals in educational settings, which enables the use of ICF as a common language for description and assessment of the situation of pupils with developmental difficulties in association with their environment,
- Adapted ICF code descriptors for parents "Let's use the same language": online helping tool for parents to use ICF in their (parental) context and to enable professionals in school to refer to same codes and same observation. This outcome also comprises a family friendly i.e. an easy reading version of ICF for the parents,
- Self-evaluation tool for pupils "Let me be part of the team": this outcome comprises an online evaluation tool for pupils with developmental difficulties to assess their own learning situation,
- IT-supported "Test Translator" Tool for school psychologists: Test-Translator to link common psychological tests with the ICF.

## 2. Theoretical background of the project

The International Classification of Functioning, Disability and Health – short ICF (WHO, 2001) can be seen as an instrument for describing the living situation of a child with a health problem in his interaction with his environment – which is in line with the strategies of the UN Convention on the rights of persons with disabilities (short CRPD, United Nations, 2007). The ICF together with ICD-10 (World Health Organization, 2004) is part of the family of classification systems of WHO. While the ICD-10 is focusing on classification of health conditions as for example diseases and disorders, the ICF (as a complementary tool to ICD) focuses on what a person with a health problem is able to do or which help/support/therapy he or she needs to fully participate (Pretis et al., 2020). As Schuntermann (2009) described, the ICF is about the phenomenon of functional health and its impairment. Thus, the ICF represents a classification that is ability-oriented and it is able to offer a common language in the cooperation of the different professionals and the parents, so that everyone in the “team around the child” can describe in understandable way the situation of the child, evaluate the possible developmental problems and plan support and treatment goals (Pretis et al., 2019).

The ICF is not a diagnostic tool, as the classification does not classify persons or diagnosis, but rather health components. Therefore “any ICF-assessment process opens a perspective towards a functional understanding of health and disease” (Pretis et al. 2020, p.1).

The German Federal Law on Participation (BMAS, 2016) defines disability according to the philosophy of ICF, as an interaction between a person and his/her environment and foresees that for the assessment of the individual needs an instrument based on ICF should be used. Despite that the implementation of the ICF in the different sectors is still weak, as shown by Simon et al. (2019) the implementation of the ICF in existing practice seems to be connected with barriers. As barriers for the implementation of ICF in the areas of support of children are seen the scope and the complexity of the original version (Amorosa and Keller, 2012, Pretis, 2018), as the ICF is classification system with more than 1400 items, which at a first glance is challenging for the parents as well as for the professionals (Pretis et al., 2019).

Based on those findings and previous research as well as defined needs the project “A common language in school” was initiated to address some of the barriers and to contribute toward usage of ICF as a common language between the different professionals as well as the parents. Thus, the aim of the project is to increase the awareness, provide practical tools, and enable the different professionals and the parents to use ICF as common language in

the description of the individual situation and planning the support for the children. Therefore, briefing packs about ICF, an easy reading version of ICF, as well as online tools for parents, pupils themselves and school psychologist were produced within the project, and piloted with the different target groups of the project.

### **3. Goal of the Case Studies**

Within the project application indicators were set in order to measure and to evaluate to which extend the project reached its results and objectives and to measure the quality of the project results. One of the planned success indicators was supposed to address the evaluation of the results and the consistency, considering that diverse participants (teachers, school psychologists, parents, pupils) were involved in processes where they have used one common language, and the assessment of the consistency of the usage (do we reflect the same complex reality and is this process helpful). In this aspect it was planned that the partners will perform case studies based on SWOT-Methodology and based on interviewing different participants in terms of knowledge and usage of ICF as well as mainstreaming processes. The case studies were performed after the planned intellectual outcomes of the project were produced and piloted and disseminated with all target groups of the project i.e. different school professionals, teachers, school psychologists, parents and also the pupils themselves. The goal of the case studies was to investigate in how far are the participants familiar with the ICF, and use the ICF in their working environment, which strengths, weaknesses, possibilities and threats they associated with the usage of ICF and the arisen project results as well as what aspects are important in terms of mainstreaming the ICF in the different sectors. Beside the case studies performed by the partners a student at the University College of Teacher Education Styria, Christina Grüner performed SWOT-Analysis with stakeholders in Austria (Grüner, 2020) for the goals of her Master Thesis on the topic "ICF als gemeinsame Sprache" in order to see which strengths, weaknesses, possibilities and threats they associated with the produced project results. The results of the SWOT-Analysis by Grüner (2020) are also considered in this summary report.

## **1. Methodology**

### 4.1. Sample

Involved within the performed case studies were different professionals as for example teachers, school leaders, school psychologists, special educators, parents and students enrolled in teacher training education and early childhood intervention, as well heads of the inclusion unit of the local school boards from the four countries in which the project was

implemented: Austria, Germany, North Macedonia and Turkey. No data about the age, and the gender of the participants were collected.

#### 4.2 Used instruments

The performed case studies were based on two instruments:

I. The first used instrument referred to the extend to which the participants know and use ICF as well as to the mainstreaming of ICF and contained the following questions:

- I know the International Classification of Functioning, Disability and Health – Children & Youth (ICF-CY) very well.
- I know how I can apply and use the ICF in my work.
- ICF is currently applied in my working environment.
- Using ICF on a daily basis in my work would be associated with extra effort from my side.
- ICF can be used as a common language in the “team around the child”.
- Which effects do you associate with the usage of ICF?
- In which areas/sectors should the ICF be used?
- What is needed for the implementation and application of the ICF in the different areas?
- What is needed for the sustainable integration of the ICF into the different areas?
- Which stakeholders should be involved into the implementation of the ICF?

12 case studies were performed by the partners using these questions.

II. The second used instrument was based on the SWOT Methodology and contained the following questions:

- Which strengths do you see using ICF in school?
- Which weaknesses might be associated?
- Which opportunities do you consider?
- Which threats might be associated?

44 case studies were performed using this methodology where 4 case studies were performed by the partners and 40 were performed by Grüner (2020).

#### 4.3. Concreate procedure

The case studies were performed using the prepared two instruments i.e. methodologies in the period between January 2020 and Mai 2021. The case studies were performed as face-to-face interviews, as part of some organized events by the partners, as E-Mail interviews and as online-surveys due to the different possibilities of the different partners. The concrete procedure and the goal behind these questions were explained to the participants either personally or within a sent short description text. Prior to performing the case studies the majority of the involved participants took part within different piloting and dissemination activities or trainings which were organized within the project.

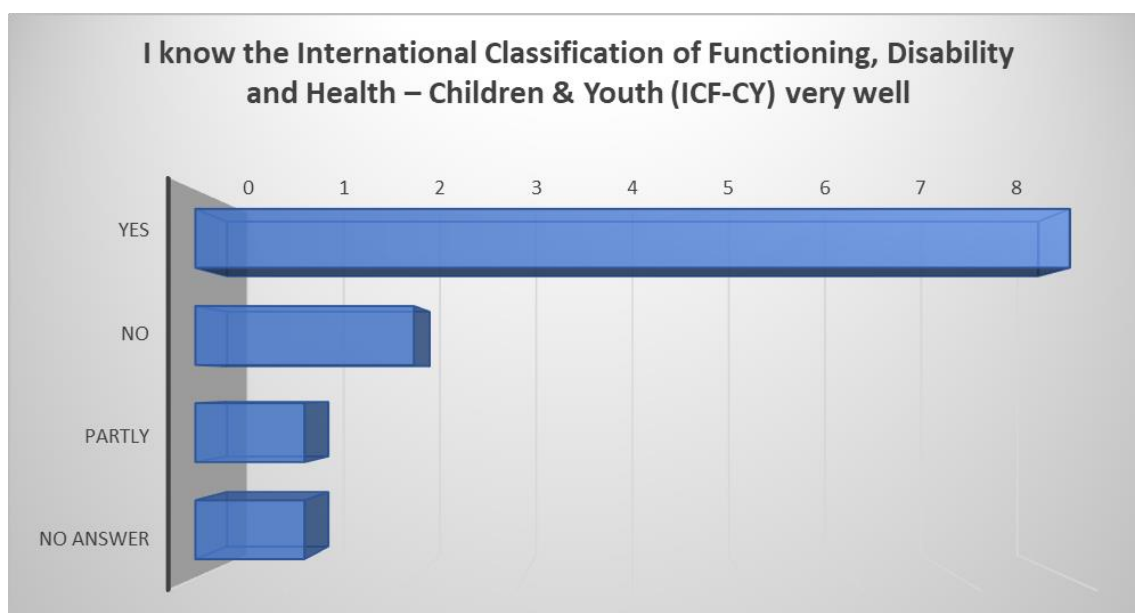
## 2. Summary of the results

### 5.1. Summary of the results from the used first instrument

The answers within the first five questions were analyzed by means of counting frequencies of the given answers for each of the questions. The answers of the second five questions were summarized and presented separately for each question. The results regarding each question are showed and discussed within the following section.

#### *5.1.1. I know the International Classification of Functioning, Disability and Health – Children & Youth (ICF-CY) very well*

Figure 1. Graphical overview of the participant's knowledge regarding ICF in general



The international Classification of Functioning, Disability and Health (ICF) is well known for eight of the participants, as they have agreed with this statement. Two of them stated that they do not know the ICF very well, and one of them agreed partly with this statement and added a comment that she/he don't know the ICF very well, but only knows the basic theoretic background like for example the advantages of ICF in comparison with the ICD-10, which can lead to the conclusion that this participant has been informed about ICF but this information was not sufficient for him/her in order to be able to state that he/she know the classification very well. And one of the participants stayed neutral regarding this statement and did not answered.

### *5.1.2. I know how I can apply and use the ICF in my work*

The answers regarding the second question are following the logic of the answers regarding the first question, as also here eight of the participants have stated that they know how they can use and apply the ICF into their daily work and two of them have answered negative to this question, which can be interpreted that they do not know how they can apply the ICF in their work. One of them agreed partly with this question, and additionally added a comment that she/he has a general idea on how to apply the ICF at work but still don't know how her/his daily work could benefit from applying the ICF. And one participant stayed neutral and did not gave his/her answer to this question.

Figure 2. Graphical overview of the participant's knowledge how to use ICF in their work

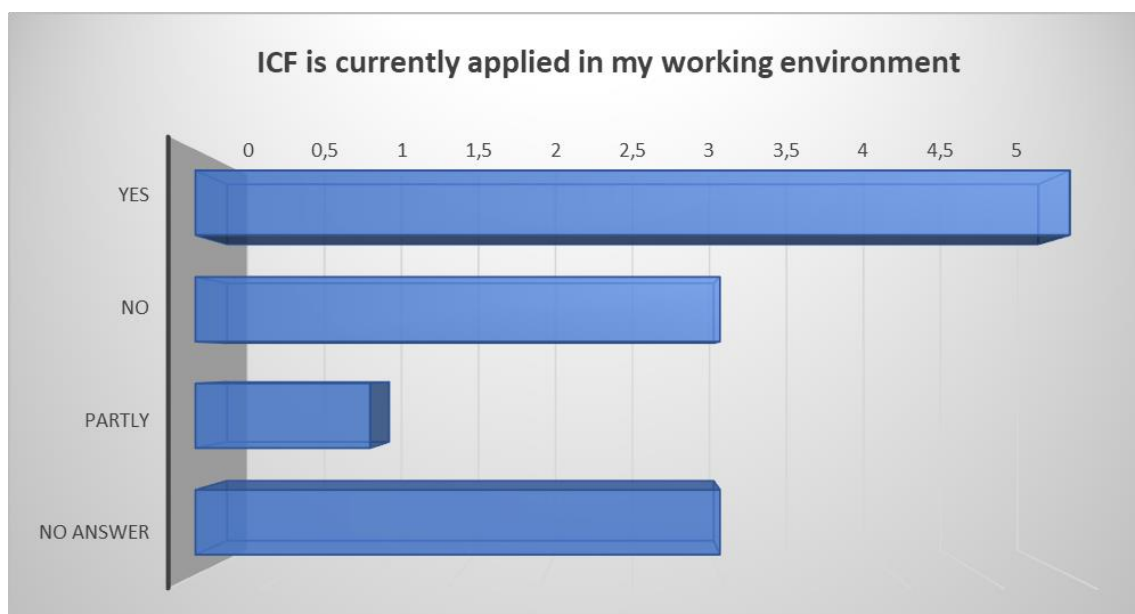


### *5.1.3. ICF is currently applied in my working environment*



From the answers of the participants regarding this statement it can be noticed, that the ICF is currently applied into the working environment of only five of the participants, as they have agreed with this statement. Three of them stated that ICF it not currently implemented in their working environment and one of them agreed partly with this question, which can lead to the conclusion that the implementation of the ICF in the working environment of this participant is in the starting phase. The rest three participants stayed neutral regarding this statement, which can mean that the ICF is known in their working environment but it is not really applied and used or that they are not sure to what extend is the ICF used within their working environment.

Figure 3: Graphical overview of the current ICF implementation into the work of the participants



#### 5.1.4. *Using ICF on a daily basis in my work would be associated with extra effort from my side*

Figure 4: Graphical overview of the extent to which the participants associate ICF with extra effort

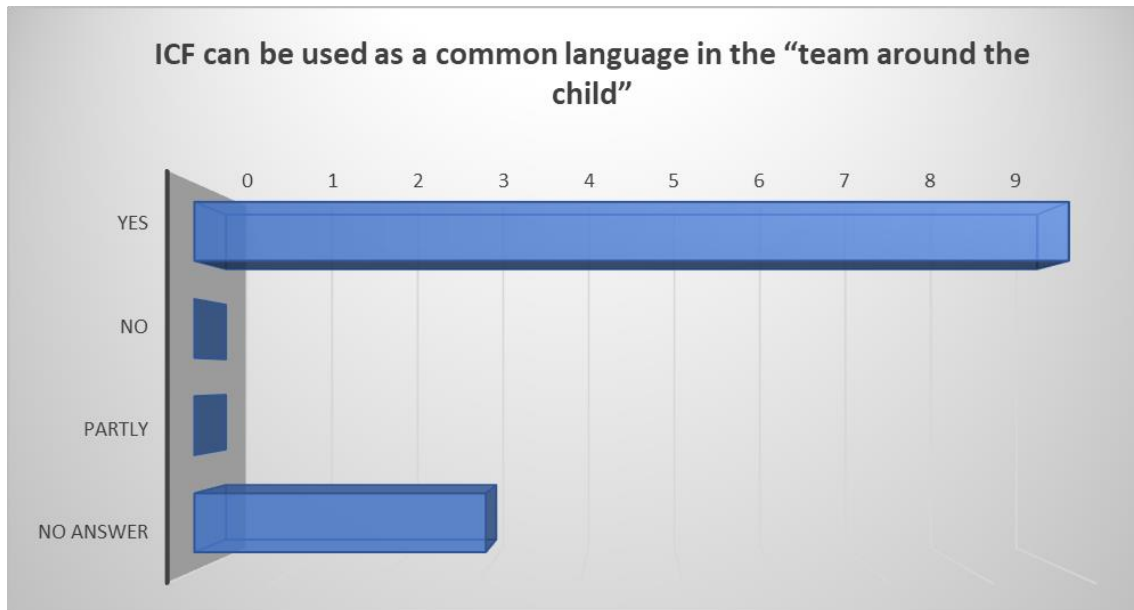


As show in the graphic above, only three of the participants agreed that the usage of ICF on a daily basis in their work will be associated with extra effort from their side and two of them do not believe that the usage of ICF requires extra effort, as they did not agreed with this statement. Further two of the participants agreed partly that the usage of ICF in their work will be associated with extra effort and one of them stated a comment that she/he may need to make an intense effort to collaborate in her/his current work. And the majority of the participants i.e. five of them stayed neutral regarding this statement, which may lead to the conclusion that they cannot assess at this point of time, how much effort from their side will the implementation of the ICF in their current work require.

#### 5.1.5. ICF can be used as a common language in the “team around the child”

Nine of the participants have agreed that the ICF can be used as a common language in the “team around the child”. This evaluation clearly shows that although the ICF is not “very well” known for all the participants, and not used in the daily working environments of all the participants the majority of them have recognized that ICF can offer a common language as a communication basis in the “team around the child”. The rest three participants stayed neutral regarding this statement.

Figure 5: Graphical overview of the participants’ evaluation: to what extend ICF can be used as a common language.



#### 5.1.6. Which effects do you associate with the usage of ICF?

The participants are associating the following aspects as beneficial and effective with the usage of ICF into their practice and working environment:

- Offers a common language for the professionals and the whole team (4),
- Contributes toward inclusion,
- Improves cooperation between different professionals (2),
- Offers holistic approach (4),
- Focusses on participation,
- Provides better overview of the child's functionality,
- Provides new perspective and active involvement of the parents in the support of the child.

#### 5.1.7. In which areas/sectors should the ICF be used?

According to the participants, the ICF should be used in the following field and sectors:

- In all areas and institutions serving individuals and children with special needs (2),
- In education and health sector (5)
- In medical and therapeutically settings (3),
- In social work sector (3).

*5.1.8. What is needed for the implementation and application of the ICF in the different areas?*

The following aspects, measures and strategies are seen by the participants as necessary for the implementation and the application of the ICF in the different fields:

- Transdisciplinary studies should be conducted,
- Resources,
- Establishment of legal basis,
- Organization of ICF workshops and trainings (7),
- Holistic view,
- Systematical introduction of ICF and support of professionals to implement ICF.

*5.1.9. What is needed for the sustainable integration of the ICF into the different areas?*

The sustainable integration of ICF into the different areas according to the participants can be supported by:

- Legal basis and policy decisions (2),
- Appropriate conditions and resources,
- Sustainable joint studies regarding all areas that may be subject to ICF,
- External help from professionals,
- Further trainings and education (4),
- Step by step rules on using the ICF have to be implemented by the supervisors leading to a smooth transition,
- Involvement of more people and large institutions.

*5.1.10. Which stakeholders should be involved into the implementation of the ICF?*

The following stakeholders i.e. groups of professionals and key persons should be involved into the implementation of ICF:

- All groups working with individuals with special needs and disadvantaged individuals (6),
- The teachers, pre-school teachers and school teams, education sector (6),
- The family and the child (5),
- Service providers (providers for medical and therapeutic help, psychological help) (3),
- Family doctors (2),

- Social facilities,
- Health system.

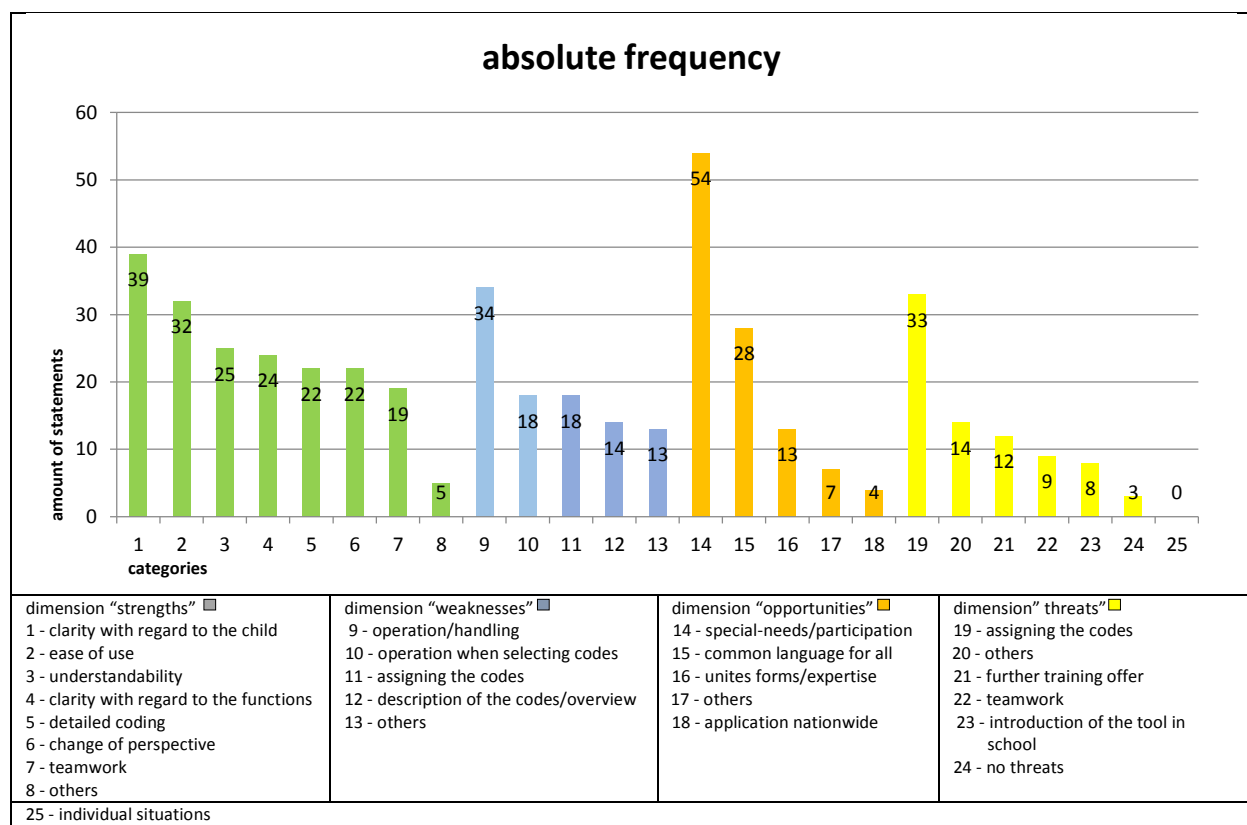
## 5.2. Summary of the results from the used second instrument

### 5.2.1. Results from the SWOT Analysis performed by Grüner (2020)

Grüner (2020) performed a qualitative content analysis where the written utterances were processed using a category system in three steps (Mayring, 2010, cited in Grüner, 2020): defining categories, identifying anchors, and applying coding rules. Semiotic similarities were grouped into a category. After this first grouping, the categorization was performed for a second time. New categories were added to the dimensions, and frequency analyses were carried out. This leads to 8 (sub)categories in the strengths dimension, 5 (sub)categories in the weaknesses dimension, 5 (sub)categories in the opportunities dimension, and 6 sub(categories) in the threats dimension (Grüner, 2020).

A total of 470 answers were provided by the users: 188 referred to strengths, 97 to weaknesses, 106 to opportunities, and 79 to threats (Grüner, 2020).

Figure 6: Distribution of categories within the SWOT analysis (Grüner, 2020)



## *5.2.2. Results from the case studies based on SWOT Methodology performed by the partners*

The following statements were given by the participants to each of the dimension regarding the ICF and the project tools:

- Dimension Strengths:
  - determination of pupil's strengths and his/her potential for active participation,
  - getting a clear and real picture of the child's functioning in every field,
  - improved cooperation and communication with expert groups,
  - could be used as a common language between different professions.
- Dimension Weaknesses:
  - not having appropriate conditions for individual adjustment to the environment,
  - not all are equally familiar with it, and at first it seems voluminous and difficult to implement,
  - it's a lot of effort.
- Dimension Opportunities:
  - socialization, feeling of equality and acceptance,
  - network of experts and services,
  - interdisciplinary communication tool and different way of thinking and acting,
  - Seeing the individual under all circumstances.
- Dimension Threats:
  - non-functioning and weak link between institutions,
  - familiarization with the logic of the ICF is considered additional work,
  - not all professions will work with ICF, which could make the effort meaningless.

### **3. Discussion**

The described case studies were performed in order to a) investigate in how far are the participants familiar with the ICF and use ICF in their working environment, as well as which aspects are important in terms of mainstreaming the ICF in the different sectors from their point of view, and b) to investigate which strengths, weaknesses, possibilities and threats they associated with the usage of ICF and with the produced project outcomes.

The respondents who have participated in the different case studies performed within the project are mostly professionals working in school settings or responsible for school settings. Their attitudes toward the usage of ICF and the project outcomes and tools are very positive

which can be noticed by their responses and statements related to the different surveyed aspects.

The results regarding the question in how far the participants are familiar with ICF and to what extend is the classification used in their working environment, has shown that eight of the participants said that they know the International Classification of Functioning, Disability and Health (ICF) very well and that they (eight of them) know how they can apply and use it in their work. The results regarding the association of the implementation of ICF with extra effort on part of the participants shows that only small number of them or three of them think that using ICF in their daily work will be associated with extra effort from their side, and the majority of the participants did not agree or stayed neutral regarding this statement. These results are highlighting that the project and the project outcomes has contributed towards recognition and usage of the ICF as a common language in the school settings in terms of meta-language which can be used by all involved persons and ensure that the communication is on equal level, which is strongly confirmed with the participant's responses on the next question where nine of them agreed that the ICF can be used as a common language in the team around the child.

Nevertheless, the responses of the participants that the ICF is currently used in the working environment of only five of them, also shows that further support and further tools which can simplify the usage of the ICF in the different sectors may be necessary.

The positive attitude of the participants toward the usage of ICF can be noticed also in their responses on the next five questions. The most important effects and benefits which the participants are associating with ICF is that, the classification offers a common and uniform language which ensures transparency among the team members and ensures participation of all of them, and focuses on participation of the child. The holistic perspective as well as the involvement of the parents in the team around the child were also highlighted as important benefits associated with ICF by the participants.

Considering those benefits and effects from the usage of ICF, the participants stated that the ICF should be used in all areas and institutions serving individuals and children with special needs and in all educational, health, medical and social sectors. In order to further improve and facilitate the application and the implementation of the ICF in the different sectors, further education, trainings for the staff, legal basis and resources are necessary.

As most significant resources for the sustainable integration of the ICF into the different areas and sectors are seen the help and support from external professionals, further trainings of the staff, resources, facilitation of the transfer into the different disciplines.

In the process of fostering the implementation of ICF as well as its sustainable integration into the different fields and sectors a variety of different stakeholders should be involved such as: service providers, different professionals, different institutions, parents and when possible also the children themselves.

Similar results are confirmed regarding the question which strengths, weaknesses, possibilities and threats the participants associate with the usage of ICF and the produced project outcomes and tools. As shown by Gütner (2020) the three most frequent subcategories of the dimension strengths are that the ICF provides clarity with regard to the child, that the classification is easy to use and it is understandable. The three most frequent subcategories named under the dimension weaknesses are the operation and the handling with ICF, the operation with codes and the assignment of codes. Regarding the dimension opportunities the following aspects were most frequently stated: special-needs/participation, common language for all and unites forms/expertise, and most frequently stated threats were: assigning the codes, others and further training offer. This SWOT analysis has shown that the participants recognized the challenges of the ICF as well as the associated potentials i.e. that the ICF is perceived as a powerful descriptive tool with a focus on abilities and participation.

#### **4. Conclusion**

The professionals working with children with developmental difficulties in school settings see the ICF and its implementation in the practical work as tool, which can contribute towards enhancing the communication and coordination between the involved persons in the team around the child. The significance of the produced project results in terms of providing clear overview with regard to the child, easy usability and understandability as well as focus on participation were highlighted as especially important by the participants.

Although the ICF is well known and used in the working environment of some of the participants, the need for further trainings, tools, approaches and strategies is still highlighted as necessary both in the performed case studies by the partners as well as in the performed analysis by Gütner (2020).



The most important finding of this analysis is that the participants perceive ICF as a tool, which facilitates ability-oriented approach, holistic perspective and participation as well as communication on equal level.

The participants believe that different key stakeholders should be involved and work together in order to facilitate the implementation and the sustainable integration of the ICF in the different disciplines, and they recognize to a great extent that the ICF can be used as common language in the exchange processes in the “team around the child”.

Summarizing the responses and the evaluation of the participants, it can be concluded that the project results had received very favorable feedback, because the participants found them as relevant, useful, interesting and inspiring. The project and the project outcomes i.e. the different produced ICF-tools have contributed towards simplified implementation of the ICF in the different working environments.

The participants welcomed the project outcomes as added value tools which they can use in their work and which can contribute toward increased cooperation between the professionals as well as the parents as “team around the child” based on the usage of the ICF as a common language. This can also contribute toward increasement of the inclusion and participation of the parents and pupils in planning of the support processes in educational settings.

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