

# Activities and Participation cluster

## Identifying and definitional attributes

**Metadata item type:** Data Set Specification

**METEOR identifier:** 320111

**Registration status:**

- [Community Services \(retired\)](#), Standard 16/10/2006
- [Disability](#), Standard 13/08/2015
- [Health](#), Standard 29/11/2006

**DSS type:** Data Element Cluster

**Scope:** This data cluster is one of four clusters that make up the Functioning and Disability DSS. To ensure a complete description of human functioning it is recommended that this cluster be collected along with the following three clusters over time and by a range of health and community care providers:

1. Body functions cluster
2. Body structures cluster
3. Environmental factors cluster

In the context of health, activity refers to the execution of a task or action by an individual, and participation refers to involvement in a life situation.

The Activities and Participation cluster collects information on a person's level of difficulty with activities, assistance needed to perform activities, extent of participation, and satisfaction with participation in the following life areas:

1. Learning and applying knowledge
2. General tasks and demands
3. Communication
4. Mobility
5. Self-care
6. Domestic life
7. Interpersonal interactions and relationships
8. Major life areas
9. Community, social and civic life

The use of this cluster to collect information on activity limitations and participation restrictions should enhance data quality for medical purposes as well as for a range of purposes related to understanding human functioning. This data cluster should be complementary to information on diseases.

The information collected in the Activities and Participation cluster may also indicate the sorts of interventions that could result in improved functioning. This could be in the form of rehabilitation, health-related interventions, equipment, or support for example.

## Collection and usage attributes

**Guide for use:**

The following four measures are used to describe activities and participation in life areas:

1. **Difficulty** with activities may include pain involved, time taken, effort, number of errors, clumsiness, and modification of the manner in which the activity is performed. Difficulty is the combination of the frequency with which the problem exists, the duration of the problem and the intensity of the problem.
2. **Need for assistance** with activities includes personal assistance and/or supervision.
3. **Extent of participation** indicates the level of participation restriction. This corresponds to an externally observable measure of participation.
4. **Satisfaction with participation** corresponds to the person's own perspective on their participation, and reflects their attitude to their participation in the various life areas. It is essentially a summary measure in which are embedded the concepts of choice, opportunity and importance.

For each life area code recorded there can be one response for each of the measures. The choice of measure will depend on the user and their information requirements.

There are numerous possible methods for collecting activity, activity limitation, participation and participation restriction. A decision could be made to collect information:

- about every domain;
- on domains of particular relevance; or
- on a number of domains which are prioritised according to specified criteria.

See also the *ICF Australian User Guide* for further guidelines.

**Collection methods:**

The Person—activities/participation life area, code (ICF 2001) AN[NNN] data element is supported by a value domain - Activities and participation code (ICF 2001) AN[NNN] - representing a single list of activity and participation domains that are grouped together.

The World Health Organization suggests the list be used in one of four operational ways.

a) To designate some domains as activities and others as participation, not allowing any overlap.

b) Same as (a) above, but allowing partial overlap.

c) To designate all detailed domains as activities and the broad category headings as participation.

d) To use all domains as both activities and participation.

The ICF Australian User Guide proposes the use of either option (b) or (d) with the use of additional qualifiers to delineate between activity and participation.

The Person—activities and participation life area, code (ICF 2001) AN[NNN] data element can be used on its own as a neutral list of tasks, actions and life situations, or together with the four additional data elements in this cluster to record positive or neutral performance as well as activity limitations and participation restrictions. (It is important to note that the Person—activities and participation life area, code (ICF 2001) AN[NNN] data element must always be used when recording any of the other four data elements.)

**Comments:**

This cluster is based on the International Classification of Functioning, Disability and Health (ICF). The ICF is a reference member of the WHO Family of International Classifications (endorsed by the World Health Assembly in 2001) and of the Australian Family of Health and Related Classifications (endorsed by the National Health Information Management Group in 2002).

The ICF provides a framework for the description of human functioning and disability. The components of ICF are defined in relation to a health condition. A health condition is an 'umbrella term for disease (acute or chronic), disorder, injury or trauma' (WHO 2001). A health condition may be recorded, for example, as:

- Episode of care principal diagnosis, code (ICD-10-AM 5th Ed) ANN{.N[N]}
- Episode of care additional diagnosis, code (ICD-10-AM 5th Ed) ANN{.N[N]}.

The ICF recognises two constructs that can be used with 'Activities and Participation': performance and capacity. 'Performance' is what the person does in their usual environment. 'Capacity' describes 'an individual's ability to execute a task or an action in a standardised environment, where a standardised environment may be:

- an actual environment commonly used for assessment in test settings; or
- in cases where this is not possible, an assumed environment which can be thought to have a uniform impact' (WHO 2001).

The standardised environment has not been generally operationalised. However, the recognition of these two constructs in the ICF underscores the importance of recording the environment in which activities are being performed.

## Source and reference attributes

**Submitting organisation:** Australian Institute of Health and Welfare (AIHW) which is the Australian Collaborating Centre for the World Health Organization Family of International Classifications.

## Relational attributes

### Implementation in Data Set Specifications:

[Disability and need for assistance clusterCommunity Services \(retired\)](#), Standard 10/04/2013

[Disability](#), Standard 13/08/2015

[Functioning and Disability DSS Community Services \(retired\)](#), Standard 16/10/2006

[Disability](#), Standard 13/08/2015

[Health](#), Standard 29/11/2006

## Metadata items in this Data Set Specification

Seq No.	Metadata item	Obligation	Max occurs
-	<a href="#">Person—activity and participation life area, code (ICF 2001) AN[NNN]</a>	Mandatory	1
-	<a href="#">Person—extent of participation in a life area, code (ICF 2001) N</a>	Optional	1
-	<a href="#">Person—level of difficulty with activities in life areas, code (ICF 2001) N</a>	Optional	1
-	<a href="#">Person—level of satisfaction with participation in a life area, code N</a>	Optional	1
-	<a href="#">Person—need for assistance with activities in a life area, code N</a>	Optional	1