



Guidelines for Inclusion of Athletes in the Non-Paralympic IPC Impairment categories for ICF & ECA competitions

This guideline informs Federations which Impairment categories are being included in the exhibition races, and how an athlete qualifies to race in those categories.

National Federations are required to send a written and signed medical diagnosis of the athlete's impairment and *Underlying Health Condition*.

- 1. Upper Limb Impairment** – this is a category for athletes with an Upper Limb Deficiency, for example an amputation or congenital loss, Loss of strength and/or Loss of Range. Athletes in this category will undergo testing using the *ICF Provisional Upper Limb Classification* system. <https://www.canoeicf.com/disciplines/paracanoe>
- 2. Short Stature** – athletes in the category will need to comply with IPC Standards. Male athletes must have a standing height of 145cm/4'9" or less, and Female athletes 137cm/4'6" or less. (Taken from Minimum Impairment Criteria in Para Athletics, for throwing events)
- 3. Intellectual Impairment (II)**– Athletes must comply with the IPC Standard. Athletes should be registered on the **VIRTUS International Eligibility Master List**, as this enables them to compete in World II sport competitions. They should meet the *Virtus Eligibility Criteria* for class II2 (Intellectual Disability)
The impairment must have been diagnosed before the age of 18
- 4. Leg length difference** – athletes must have a minimum leg length difference of 7cms (Taken from MIC in Para Athletics) measured from ASIS to medial malleolus.
- 5. Visual Impairment** – Athletes must comply with standards for IPC classes B1 or B2. Athletes must provide written evidence from their eye consultant.
B1 – Athlete has no light perception in either eye, cannot recognize the shape of a hand at any distance or in any direction.
B2 – Athlete has a visual acuity of 20/600 and/or a visual field of 5 degrees or less in their best eye with the best eye correction.
- 6. Hypertonia**- athletes must provide written evidence of their diagnosis, provided by their consultant or physician, which states they have increased muscle tension and reduced ability for muscles to stretch (spasticity), caused by damage to the central nervous system.
- 7. Ataxia** – athletes must provide written evidence of their diagnosis, provided by their consultant or physician, which states they have uncoordinated movement caused by damage to the central nervous system.
- 8. Athetosis**- athletes must provide written evidence of their diagnosis, provided by their consultant or physician, which states that they have continual slow involuntary movements caused by damage to the central nervous system.
(Examples of *Underlying Health Conditions* for 6,7and 8 are Cerebral Palsy, Stroke and Traumatic Brain Injury)

NOTE: for further reading on IPC Impairment categories including information on non-Eligible Impairments: <https://www.paralympic.org/ipc-handbook> Go to the *Int'l. Standard on Eligible Impairments*.