Cerebral Palsy Football Classification Guideline

Class 5
Athletes have a noticeable hip and shoulder rotation when walking, inwardly rotated hips, knees and feet in standing/walking.

There is only minimal difficulty with upper limbs

During football, exertion will increase tone and decrease function. The athletes will have difficulty in turning, pivoting and stopping, running only short distances due to involvement in both lower limbs. Stride length is reduced/decreased with exertion.

Class 6
Athletes have involvement in all four limbs and have particular problems in trying to control their movements. Walking can be laboured and uncoordinated, noticeable rolling head movement during running.

During football, the player will have trouble stopping and changing direction quickly with and without the ball. Coordination and timing problems will be seen when tackling, trapping and kicking the ball.

The player will have difficulty dribbling or controlling the ball when running, explosive movements are difficult to perform.

Class 7
Athletes are hemiplegic and noticeable limp is often noticed. The dominant upper limb should have normal strength and movement. The affected upper limb is usually more apparent during activity, flat footed on affected side when running, often tilts head to one side during exertion.

During football the player will have difficulty when pivoting and balancing on the impaired side and therefore often pivots on the unaffected side and may kick with the affected foot. The players affected arm muscles will have an increased tone when running and appear bent when walking.

Class 8
Athletes are minimally affected diplegic, hemiplegic, and monoplegic or have minimal movement control patterns.

They will run without noticeable limp but disability will be more evident on exertion, however the athlete must demonstrate evidence of a functional disability during testing.

Players with minimal involvement may appear to have near normal function when running but the player must demonstrate a limitation in function to classifiers based on evidence of spasticity (increased tone), ataxic, athetoid or dystonic movements while performing on the field of play. Some players with an acquired brain injury, the dominant side may be the impaired side.

CP Sport England & Wales

Terminology

Diplegia: More involvement in Lower limbs than upper limbs, may be asymmetric.

Hemiplegia: Involvement in upper and lower limb and trunk on same side.

Monoplegia: Involvement in only one limb.

Player	Class