

The following excerpts pertaining to boccia are reprinted from the

[CPISRA Classification and Rules Manual - 9th Edition](#)

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SECTION FOUR CLASSIFICATION PROFILES

4.1 FUNCTIONAL PROFILE - Class 1

Quadriplegic (Tetraplegic)-Severe involvement. Spasticity Grade 4 to 3+, with or without athetosis or with poor functional range of movement and poor functional strength in all extremities and trunk OR the severe athetoid with or without spasticity with poor functional strength and control. Dependent on a power wheelchair or assistance for mobility. Unable to functionally propel a wheelchair. Lower Extremities-Considered non-functional in relation to any sport due to limitation in range of movement strength and/or control. Minimal or involuntary movement would not change this person's class.

Trunk Control-Static and dynamic trunk control very poor or non-existent. Severe difficulty adjusting back to mid-line or upright position when performing sports movements. Upper Extremities-Severe limitation in functional range of movement or severe athetosis are the major factors in all sports, and reduced throwing motion with poor follow through is evident. Opposition of thumb and one finger may be possible allowing athlete to grip.

BOCCIA BC1 throwers-players who fit within this category can throw the ball past the V line or CP2 Lower who chooses to push the ball with the foot.

4.2 FUNCTIONAL PROFILE-Class 2

Quadriplegic (Tetraplegic)-Severe to moderate involvement. Spasticity Grade 3+ to 3 with or without athetosis. Severe athetoid or tetraplegic with more function in less affected side. Poor functional strength in all extremities and trunk but able to propel a wheelchair.

Lower Extremities-A demonstrable degree of function in one or both lower limbs allowing propulsion of the wheelchair automatically qualifies individual as a Class 2 lower. If the classification team determines that the upper limb function is more appropriate for a higher

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class then the athlete does not qualify as Class 2. Class 2 athletes (upper or lower) can sometimes ambulate but never run functionally.

Trunk Control-Static control is fair. Dynamic trunk control is poor as demonstrated by the obligatory use of upper extremities and/or head to assist in returning to the mid-line (upright position).

Upper Extremities-Hand-Severe to moderate involvement. Spasticity Grade 3. If hand and arm function is as described in Class 1 then lower extremity will determine whether Class 2 is more appropriate.

A Class 2 upper athlete often has a cylindrical or spherical grasp, and can demonstrate sufficient dexterity to manipulate and throw a ball, but will exhibit poor grasp and release. Throwing motions must be tested for effects on hand function. Wheelchair propulsion with upper extremities is also demonstrable. Active range of movement is moderately to severely impaired, thus hand function is the key.

BOCCIA This athlete is classed as a BC2

Boccia Classes BC3 and BC4 are described on the next page

4.9 BOCCIA PROFILES

BC1 - CP-ISRA class 1 plus class 2 lower who chooses to push the ball with his/her foot.

BC2 - CP-ISRA class 2 upper players.

BC3 - CP-ISRA class 1 players who do not have the ability to pick up and/or throw a ball consistently past the court v line and conform to other listed criteria for ramp players. This is the class for all ramps players. Ref. Section Six 4.4 This classification includes wheelchair athletes with severe locomotor dysfunction in all four limbs of NON-Cerebral origin

4.9.1 BC4 Throwing Athlete;

Wheelchair athletes with severe locomotor dysfunction in all four limbs of NON cerebral palsy origin.

The athlete has a comparable sport function profile as a Boccia Class 1 or 2 player.

Active range of movement is poor either due to lack of strength or lack of flexibility.

The athlete demonstrates poor strength or severe lack of coordination combined with poor dynamic trunk control. Fatigue is a factor.

Poor strength or control of grasp and release will be evident.

This can often be seen by frequent use of gravity assisted actions to propel the ball.

The athlete is able to lift arms up but;
UNABLE TO PROPEL A BALL FROM ABOVE SHOULDER LEVEL.

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Therefore the ball is often propelled by use of
a pendulum swing action
from a bilateral grasp and push action from the chest
another gravity assisted release action

The use of arms or head thrust is often needed to return to an upright sitting position after a balance disturbance, for instance the throwing action.

However the athlete is able to demonstrate sufficient dexterity to independently manipulate and propel a Boccia ball consistently past the v-line onto the court.

The athlete may be able to propel a wheelchair. However rapid movements are not possible.

Athletes with the following diagnosis and the above profile may be eligible.

Myopathies with proximal strength of less than 3/5 spinal cord lesion, complete or incomplete tetraplegic with the above functional profile, e.g. unable to propel ball from above shoulder level and/or poor hand grasp

Spina bifida combined with upper extremity involvement.

Other similar conditions which results in poor strength and/or coordination.

Excerpts from the 9th Edition CP-ISRA Classification and sports rule Manual
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