



Personal factors and their relevance for the assessment and allocation of benefits in social medicine and rehabilitation

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Abstract

A broad and common understanding of the nature of Personal Factors contributes and initiates a dialogue between professionals involved in health care to gain a comprehensive perspective regarding an individual's health condition and accurately allocate social benefits and medical interventions. Personal Factors play an essential role in the International Classification of Functioning, Disability and Health (ICF) and the underlying Bio-Psycho-Social Disease Model. To date, the World Health Organisation (WHO) has not classified Personal Factors for global use despite their impact on the functioning of individuals as facilitators or barriers. This editorial wants to outline the importance of Personal Factors, and stimulate a discussion about the need to fulfil this component by creating a commonly accepted list of items.

Keywords: ICF; Contextual Factors; Personal Factors; Social Benefits

Personal factors supporting physicians practicing social medicine

A structured, standardised and transparent list of Personal Factors that comprise all relevant Personal Factors of potential influence on an individual's functioning may support physicians who practice Social Medicine. Such a framework would facilitate consideration of the background information regarding an individual's social and medical history, and help identify the potential influences of inhibiting or facilitating Personal Factors. This may have an impact on the selection of appropriate and potentially successful medical interventions and social benefits, a process which may have substantial effects on the aspired outcome level of participation. Moreover, this list is only intended to be used as background information, not as a manual to follow slavishly from A to Z. We have compiled and published a draft for the classification of Personal Factors primarily for the German language area (1). Our Classification resulted in Personal Factors classified into 72 categories and arranged in six chapters as described in as follows (Table 1):

1) Personal Factors are important for many socio-medical issues

They may have an individual impact on functioning; thus, they must be considered as part of a comprehensive evaluation of an individual's disability of relevance for the particular issue. For all individual medical activities and interventions, Personal Factors must be considered to achieve the highest level of success for therapeutic and social interventions by respecting and individually adjusting the type, length, extent, initiation, performance and end of procedures.

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2) Attention towards Personal Factors promotes the idea of activating personal resources to overcome participation restrictions

For the accurate identification of promising, fitting, social, medical, rehabilitative and workplace-oriented benefits, procedures or interventions, Personal Factors must be identified by their probable effects, i.e., whether they are facilitating or inhibiting. The realisation of diagnoses, interventions or clinical and social pathways is considerably promoted if participation goals are delineated by considering all Bio-Psycho-Social components, which notably include Personal Factors as quoted in ICF (2).

3) An appropriate consideration of Personal Factors is necessary for a comprehensive needs assessment and its realisation.

A standardised reference system for Personal Factors facilitates the allocation of social and medical benefits and procedures in a way that is equitable, just and needs oriented. Its use would facilitate the identification of adequate interventions to effectively match the participation goals, document and report transparently, improve the interdisciplinary understanding, communicate across all collaborating institutions and sectors and allocate suitable services.

4) Individuals with disabilities should be involved in all aspects of the use of Personal Factors

When the evaluation of Personal Factors is necessary, the involved individuals must be included into the assessment process. It is presupposed that personal factors are explicitly and transparently reported and not in a hidden manner. This allows a claimant to understand a medical report, and formally object at the court if the claimant deems a statement or decision by the expert or deciding body to be unwarranted.

5) Listing Personal Factors accounts for ethical aspects

The ethical tenor of a system to classify Personal Factors is demonstrated by the broad selection of criteria: The categories and items should be comprehensive, universally applicable, unprejudiced, non-discriminatory and clear without ambiguity. It should be practically usable, limited to relevant categories and aligned to a final, (not causally) determined socio-medical view. Furthermore, the involved individual with his / her right for autonomy and participation must stand in the centre.

6) Classification of Personal Factors may be associated with risks

The listing of Personal Factors and drafting them into a classification is of cognitive interest and neutral value. However, to intend or actually use these factors involves risks and raises fears. Therefore, in each case, responsible handling of a systematic compilation of Personal Factors is crucial and unconditionally necessary. Personal Factors may only be used to answer a specific question for a specific decision at a specific time. Therefore, their attribution is of limited validity and is not transferable to other situations. The draft for the classification of Personal Factors does not contain or allow a quantitative approach of the person itself.

Table 1. Synopsis of Chapters that Describe Personal Factors (1)

Structure of Chapters for Classification of Personal Factors	
1	General Personal Characteristics: Age, Sex, Genetic Factors
2	Factors related to an Individual's Physique
3	Mental Factors, such as Personality Factors and Cognitive and Mnestic Factors
4	Attitudes, Basic Skills and Behaviour Patterns
5	Immediate Life Situation and Socioeconomic / Sociocultural Factors
6	Other Health Factors

Conclusion and Prospects

The influence of personal factors on the health and life stories of individuals has been confirmed, to a substantial extent, over the years by many authors. Nevertheless, reflecting on recent literature, questions remain to be solved and discussed. Moreover, it is clear that substantial work remains to be done. The definition of items listed as Personal Factors must be as clear, precise and demarcatable as possible. At the same time, it must be acknowledged that a unique accordance over different professional guilds regarding the definition and coverage of specific factors, e.g., mental factors or attitudes, basic skills and behaviour patterns, will not be reached within years, if at all. Personal Factors may exert a powerful influence as facilitators or barriers on the goal definition, goal achievement and type, complexity and length of necessary social, medical or rehabilitative benefits. Transparency, explicitness, fairness, standardisation and the possibility for well-founded claims comprise additional arguments for reporting Personal Factors, as well as key aspects that should be considered when applying a standard classification of Personal Factors in Social Insurance and Security. Thus, Personal Factors may be crucial to reach the goal of the highest degree of participation in social life considering individual resources. Therefore, a uniformly accepted classification is necessary. It is advised for use by all individuals involved in the processes of social integration and

eligible to reduce the risk of various non-consented approaches to Personal Factors. The use of Personal Factors in Practical Social Medicine is not innovative. However, their present use is often unstructured, unsystematic, inconsistent and, in some cases, incomprehensible as a result of non-standardised wording. In a comparison of the relevant pros and cons, it is undoubtable that a non-standardised use of Personal Factors is of high risk in the assessment of evaluations or decisions that are perceived of as unfair by the claimant. Therefore, having a list of generally accepted Personal Factors in mind and using their items is inevitable, feasible, practicable and not time consuming for its user to apply the Bio-Psycho-Social Disease Model accurately and adequately.

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