Wheelchair Handball Classification

An introduction for players, coaches and team staff

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Your questions

01 *Why classify, and who can play?*
SLIDES 03–06

02 *How am I classified?*
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03 *What is my sport class?*
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SLIDES 16–19



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Why classify players?

→ *So that the best team wins – not the least impaired one*

"Classification is the central nervous system of the Paralympic Movement."

Every player's impairment affects how they move and handle the ball. ***Classification groups players whose impairment has a similar impact on the game***, so that skill, training and tactics decide the result.

Function, not diagnosis

Two players with different medical conditions can be in the same sport class.

Fair for every team

Each player counts for the points of their team. The maximum on court is set in the Rules of the Game.





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Who sets the rules?

→ *IPC principles, IHF rules – applied by IHF classifiers*



IPC ***International Paralympic Committee***
Athlete Classification Code and International Standards – the principles shared by all Para sports
More on paralympic.org › Classification ›

IHF ***International Handball Federation***
Wheelchair Handball Classification Rules & Regulations – written specifically for wheelchair handball, in line with the IPC Code
Read them on ihf.info › Regulations Documents ›

YOU ***National federations, players, team staff***
Register players, send the documents, attend the evaluation session, play at full effort

Who you will meet

- ***UHC Assessor***
  Reviews your medical documents before the competition (stage 1)
- ***Classification panel***
  At least two IHF classifiers who assess you in person (stages 2–4)
- ***Chief Classifier***
  Leads classification at the competition
- ***Your team representative***
  Accompanies you and signs the session form

What does the game demand?

→ *Fast actions that rely on trunk and arm control*

Wheelchair Handball



Shooting



Catching & passing



Dribbling in motion



Wheeling, pivoting, braking

Ball handling: shooting, catching, passing, dribbling

Wheelchair handling: wheeling, braking, pivoting, tilting, taking contact

The link with classification: the panel assesses how your impairment affects these actions – trunk movement, stability and, if relevant, arm function.

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Can I play in IHF competition?

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→ *Yes – if you meet the eligibility criteria*

You need a medically diagnosed health condition causing at least one of these permanent impairments of the lower limbs:

1 Impaired muscle power
e.g. spinal cord injury, spina bifida, polio

2 Impaired passive range of movement
joint movement limited, e.g. stiffness or contracture

3 Limb deficiency / leg length difference
amputation or congenital absence; leg length difference of 6 cm or more

4 Coordination impairments
muscle stiffness (hypertonia), loss of coordination (ataxia) or involuntary movements (dyskinesia)

Eligibility is assessed on the lower limbs. An upper limb impairment (ULI) can then be taken into account for the sport class.

How am I classified?

→ *Four steps, from registration to your final sport class*

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1

BEFORE THE COMPETITION

Registration

Your National Federation sends your Classification Registration Form (CRF) and medical documents – as early as possible.

STAGE 1 · on documents

2

BEFORE YOUR FIRST MATCH

Evaluation session

About 45 minutes with a classification panel, at a scheduled time: eligibility checks, then a functional assessment – static and in handball actions.

STAGES 2–4b · in person

3

YOUR FIRST MATCHES

Observation Assessment

You play with a provisional sport class. The panel watches you on court.

STAGE 4c · on court

4

AFTER OBSERVATION

Final decision

Your final sport class and its status are given.

CLASS + STATUS

Already classified?

. With a Confirmed (C) status you do not need a new evaluation.
. With a review status (Review Next Available Opportunity – R-NAO, or Review Fixed Review Date – R-FRD), you will be reviewed again.

Am I eligible?

→ *Three checks, before any sport class is given*

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STAGE 1

Is there an Underlying Health Condition?

The UHC Assessor reviews the medical information sent with your CRF – before the competition.

If NO: ***NE-UHC***

STAGE 2

Does it cause an Eligible Impairment?

The panel checks in person that you have one of the eligible impairments, consistent with your medical documents.

If NO: ***NE-EI***

STAGE 3

Does it meet the Minimum Impairment Criteria?

Physical tests of your legs – muscle strength, joint mobility, leg length or coordination – compared with minimum criteria.

If NO: ***NE-MIC***

Not Eligible (NE)?
The decision is reviewed by a second UHC Assessor (stage 1) or a second classification panel (stages 2–3). If it is confirmed, you are not eligible. If all three answers are YES, you continue directly to stage 4.

How is my class allocated?

→ *Trunk tests, handball actions, then observation in matches*

STAGE 4a

Static trunk tests

In your sports wheelchair, strapped as in a match, holding a ball:
- bend forward and come back up
- turn to the left and to the right
- lean to each side, ball above your head
- pick up a ball from the floor on each side

STAGE 4b

Handball actions in motion

- push, brake and pivot – slowly, then at full speed
- throw the ball hard at a wall (about 6 m), with each hand
- catch one-handed passes far to each side
- dribble while pushing, alternating hands
- and other handball actions if needed

STAGE 4c

Observation in matches

The panel watches you in competition:
- your wheelchair set-up (Machine)
- your body (Man)
- your movements at full effort (Match)

After 4a + 4b:
Provisional sport class, ***tracking code OA*** (Observation Assessment) – you start to play with it.

After 4c:
Final sport class and sport class status.

What does the panel look at?

→ *How far you can move your trunk – and how stable you are*

1 Volume of Action (VoA)

How far you can move your trunk on your own and ***come back upright with control*** – without holding the wheelchair or using your arms.



Forward
lean forward and come back up



Rotation
turn the trunk to each side



Sideways
lean to the side and come back

2 Stability

A stable pelvis is the base for every trunk movement. Some players stabilise it ***actively*** with their hips and legs; others rely on their ***wheelchair set-up*** (passive stability).

3 Pressing Leg Ability (PLA)

The ability to press the feet down on the footrest and the thighs against the sides of the wheelchair to ***stabilise the pelvis***.
Tested in stages 2–3: straighten the knee, push the thigh outwards, raise the heels.

Volume of Action + Stability = your motoric profile → your sport class (after any ULI deduction)

How do profiles become classes?

→ *8 motoric profiles, grouped into 4 sport classes*

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8 Motoric profiles

1.0	1.5	2.0	2.5	3.0	3.5	4.0	4.5

4 Sport classes

CLASS 1	CLASS 2	CLASS 3	CLASS 4

More impact of the impairment → Less impact

Why half points go to the higher class (1.5 → 2, 2.5 → 3, 3.5 → 4)

Passing and shooting are one-handed: what makes the difference is the ability to rotate all or part of the trunk – so a half point counts as the class above (except 4.5, which stays in class 4).

After a ULI deduction, the classifiers may round down instead (e.g. 4.0 – 0.5 = 3.5 can become class 3).



On court

each player's class is shown on the back of the wheelchair: a sign in the class colour with the class number.

What does each class look like?

→ *Typical trunk function, from class 1 to class 4*

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	CLASS 1 profile 1.0	CLASS 2 profiles 1.5 – 2.0	CLASS 3 profiles 2.5 – 3.0	CLASS 4 profiles 3.5 – 4.5
Forward	Little or no controlled movement	Partial – up to about 45°	More than 45°, up to 90°	Full, up to 90°
Rotation	None	Upper trunk only	Full, trunk as a unit	Full
Sideways	None	None	None or very limited	Partial to full, to one or both sides
Ball & balance	Needs the head or trunk as counterbalance; relies on wheelchair and arms	Holds the ball in front without counterbalance; arms needed to recover from the side	Holds the ball overhead with a stable trunk	Stable in contact; active pelvic stability from hips and legs

These descriptions are a guide only. Only the classification panel allocates a sport class, based on what the player can do in session and on court.

How does each class play?

→ *What coaches typically see on court*

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	CLASS 1 profile 1.0	***CLASS 2*** profiles 1.5 – 2.0	***CLASS 3*** profiles 2.5 – 3.0	***CLASS 4*** profiles 3.5 – 4.5
Pushing	Upright, short strokes; head and shoulders move to keep balance	Uses the upper trunk (up to about 45°); longer strokes	Leans forward to gain power – up to 90° in profile 3.0	Uses the whole trunk; returns quickly upright, helped by leg power
Shooting	Trunk supported by the backrest; cannot rotate towards the goal	Upper trunk leans or rotates, often staying on the backrest	Leans strongly forward and rotates the whole trunk; cannot lean sideways	Rotates and leans – to one side (4.0) or both sides (4.5) – to escape a defender
Contact	Loses balance with minimal contact	Stable in mild contact; loses balance in forceful contact	Stable in front contact; not in side contact	Stable in contact; 4.0 may lose balance on the weak side
Wheelchair set-up	Knees higher than hips; high backrest (mid-ribs); legs and pelvis strapped	Knees higher than hips; backrest at waist level	Knees higher than (2.5) or level with (3.0) hips; backrest at waist or pelvic level	Knees level with or even lower than hips; backrest at pelvic level; pelvis and thighs strapped

Typical observations, not rules: each player is assessed individually. Source: IHF Wheelchair Handball motoric profiles – sport-specific activities.

Do my arms count?

→ *Yes – arm and/or coordination impairments can lead to a deduction*

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UPPER – dominant arm
Catching, holding, passing, shooting
up to –1.0

UPPER – non-dominant arm
Catching and holding the ball
up to –0.5

LOWER – left
Grasping/pulling and/or pushing the wheel
up to –0.5

LOWER – right
Grasping/pulling and/or pushing the wheel
up to –0.5

When?
Only if an upper limb impairment is declared on the Classification Registration Form and confirmed by the panel (stages 1–2).

How?
The panel assesses each quadrant – the upper quadrants for ball handling, the lower quadrants for pushing and braking.

Why the dominant arm matters
You pass and shoot with one hand: an impairment of the dominant arm has more impact on the game.

Result
The quadrant deductions are added up and applied to the class based on trunk function. The panel then decides the final sport class, rounding up or down.

What does my class status mean?

→ *Whether – and when – you will be reviewed*

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Sport class status – after the final decision

C — ***Confirmed***
No further evaluation needed.

R-NAO — ***Review – Next Available Opportunity***
Re-assessed at the next competition with classification.

R-FRD — ***Review – Fixed Review Date***
Re-assessed on or after a date set by the panel.

E — ***Expired***
Player retired – the sport class is no longer valid. A new evaluation is required to return to competition.

Codes used during the process

N — ***New***
Not yet classified – goes through the full process.

OA — ***Observation Assessment***
Provisional class – to be observed in competition.

NE — ***Not Eligible***
Does not meet stage 1, 2 or 3 (NE-UHC, NE-EI, NE-MIC).

CNC — ***Classification Not Completed***
Session stopped, e.g. inconsistent medical documents or intentional misrepresentation (failure to cooperate fully).

IHF Master List:
All classified players with their sport class and status – updated after each competition and available on the IHF website.

Which documents are needed?

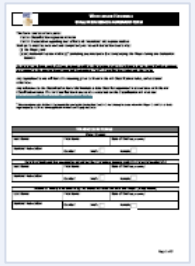
→ *One before the competition, one on the day, one kept by the panel*



BEFORE THE COMPETITION

Classification Registration Form (CRF)

- Part 1 – diagnostic information (healthcare professional)
- Part 2 – proposed class (IHF classifier, or National Federation if none)
- Signed by the player – and a parent or guardian if under 18
- Completed in ***English***, with ***adequate supporting medical documents***
- Sent by the National Federation to classification@ihf-online.info – ***as early as possible***
- Archived by the IHF



BEFORE THE SESSION

Evaluation Session Agreement Form (ESAF)

- Paper form, 3 pages
- ***Completed and signed before the session starts***
- Signed by the player, the team representative and the translator (if any)
- Archived by the IHF



DURING CLASSIFICATION

Player Classification Dossier (PCD)

- Completed by the classification panel – nothing for you to fill in
- Records every stage, from 1 to 4c
- Contains the final sport class and sport class status
- Archived by the IHF

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How do I prepare for classification?

→ *Your checklist for the evaluation session*

- ☑ ***Be on time*** – the evaluation session lasts about 45 minutes
- ☑ ***Bring your own sports wheelchair*** – with straps, cushion and any equipment set as in a match
- ☑ ***Wear sportswear***
- ☑ ***Bring your passport or ID*** – name, date of birth, jersey number and dominant arm are checked
- ☑ ***Come with your team representative*** – and your own English translator if needed
- ☑ ***Tell the panel about any other limitation***
- ☑ ***Always give your maximum effort*** – failure to cooperate fully leads to Classification Not Completed (CNC) and possible sanctions

Evaluation sessions are confidential. No recordings (audio, video or photos) are permitted.





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Questions new players ask

→ *Short answers to the most common questions*

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Q ***Which class will I get?***
Only the classification panel decides. The class proposed by your National Federation on the CRF is only a proposal.

Q ***Why must I use my own sports wheelchair?***
The panel assesses you as you really play.

Q ***Can my sport class change?***
Yes, if your status is R-NAO or R-FRD you will be reviewed.
A Confirmed (C) class needs no new evaluation.

Q ***What if I do not give full effort?***
The panel stops the session: your Classification is Not Completed (CNC). Additional sanctions may be imposed on you and the team.

Q ***Can I play before my final class is known?***
Yes. After stage 4b you receive a provisional class (OA) and play with it while the panel observes you.

Q ***Why am I watched in matches after the tests?***
Only full effort in a real game shows your true capacity. Observation confirms or adjusts your provisional class.

Q ***What if we disagree with a decision?***
Protest: against the sport class only.
Appeal: against the process – see the IHF Classification Rules.

Q ***Who sees my medical information?***
Only the classification panel, including the UHC Assessor.
All documents are archived by the IHF.

What do all these terms mean?

→ *The classification vocabulary, in plain words*

Sport class	1, 2, 3 or 4 – the class you play in
Motoric profile	1.0 to 4.5 – the detailed profile behind the class
Classification panel	At least two IHF classifiers who assess you
Evaluation session	Your in-person assessment (stages 2–4b)
CRF	Classification Registration Form, sent before the competition
ESAF	Evaluation Session Agreement Form
PCD	Player Classification Dossier, completed and kept by the panel

UHC	Underlying Health Condition – your diagnosed condition
EI	Eligible Impairment – one of the 4 accepted impairment types of the lower limbs
MIC	Minimum Impairment Criteria – the minimum level to be eligible
VoA	Volume of Action – how far you can move your trunk with control
PLA	Pressing Leg Ability – leg power used to stabilise the pelvis
ULI	Upper Limb Impairment – an impairment of the arm(s)
OA	Observation Assessment (stage 4c) – provisional class, to be observed in matches

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Enjoy your classification journey!

Resources

IHF Regulations Documents – Wheelchair Handball Classification Rules ›

Rules of the Game – Wheelchair Handball 4-a-side
IHF Master List of classified players – ihf.info
Classification Registration Form (CRF): ask your National Federation
Questions: classification@ihf-online.info