

Hip displacement is among the most common deformities in children with cerebral palsy, and occurs in one-third of children with cerebral palsy. The risk of hip displacement is directly related to a child's motor function ability.

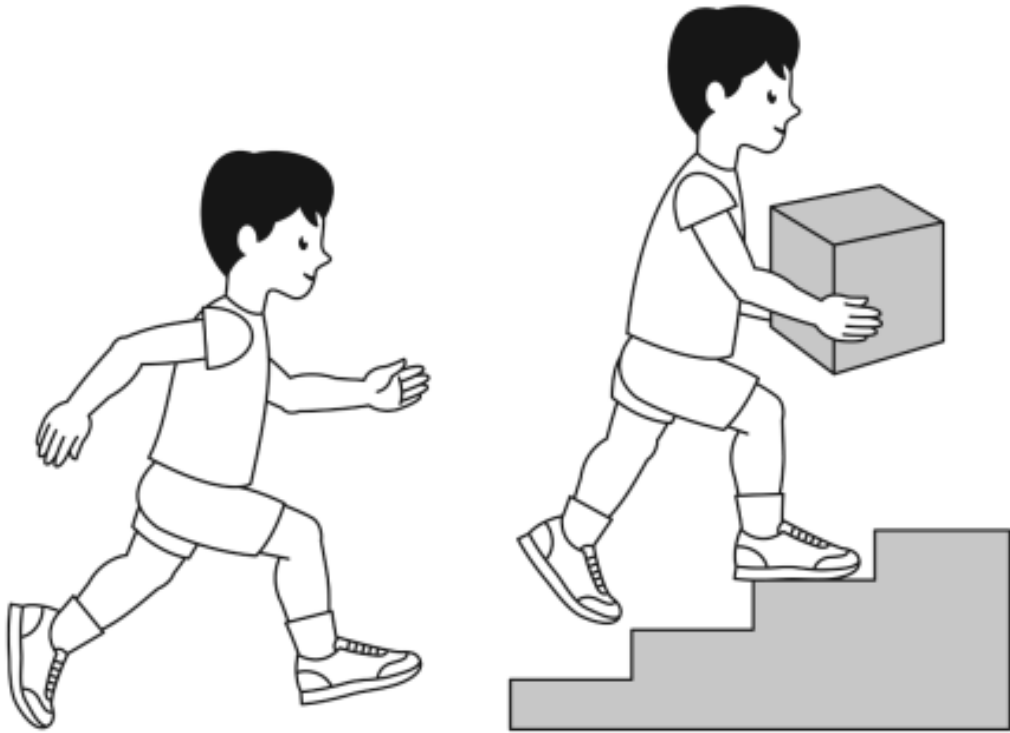
The five level Gross Motor Function Classification System (GMFCS) is an easy to understand classification of a child's ability to initiate movement.

It is a five-level classification system, ranging from levels I (most function) to V (least function).

Children with less severe cerebral palsy develop their motor milestones, such as sitting independently and walking, at similar ages to their peers without cerebral palsy. Children with more severe cerebral palsy will take longer to achieve the same milestones. The GMFCS system takes into account the developmental growth of children over time, and so it gives different descriptions for each GMFCS level at different age groups. This allows the GMFCS level to stay constant over time, even though the child is continuing to develop. You can find the **full GMFCS Classification** under the **Additional Resources tab**.

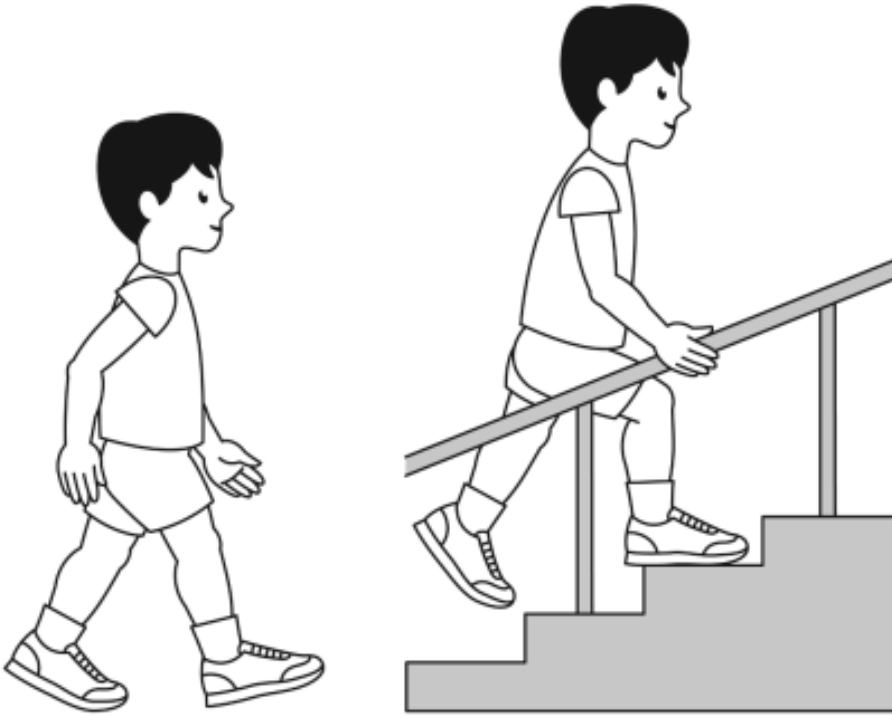
The GMFCS descriptions for the 6-12 age group are as follows:

Gross Motor Classification System (GMFCS) Level I



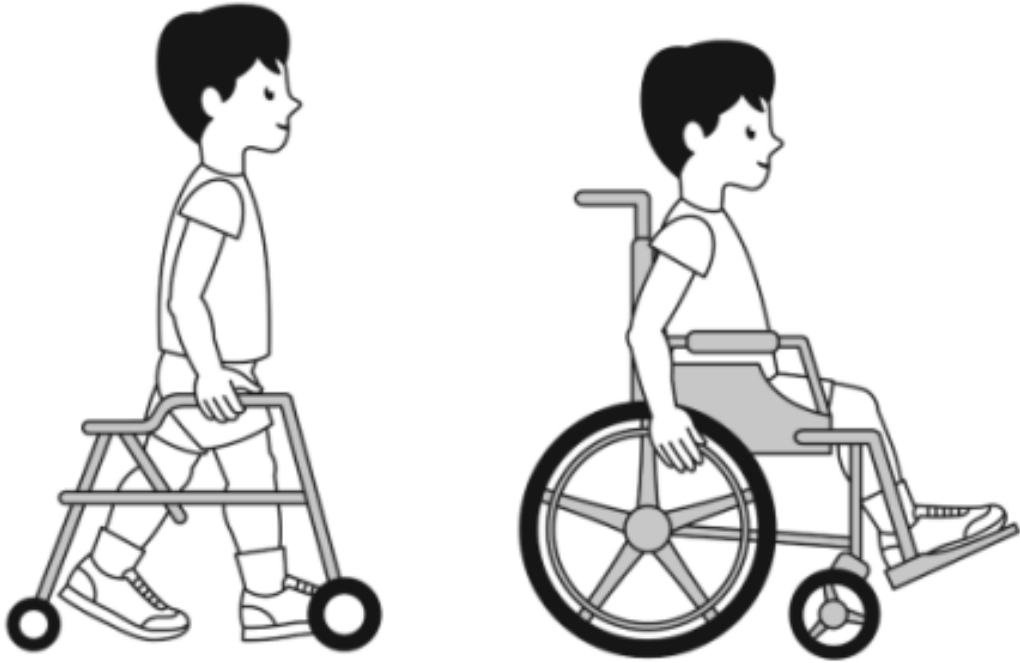
Children walk at home, school, outdoors, and in the community. They can climb stairs without the use of a railing. Children perform gross motor skills such as running and jumping, but speed, balance, and coordination are limited.

GMFCS Level II



Children walk in most settings and climb stairs holding on to a railing. They may experience difficulty walking long distances and balancing on uneven terrain, inclines, in crowded areas, or confined spaces. Children may walk with physical assistance, a hand-held mobility device, or use wheeled mobility over long distances. Children have only minimal ability to perform skills such as running or jumping.

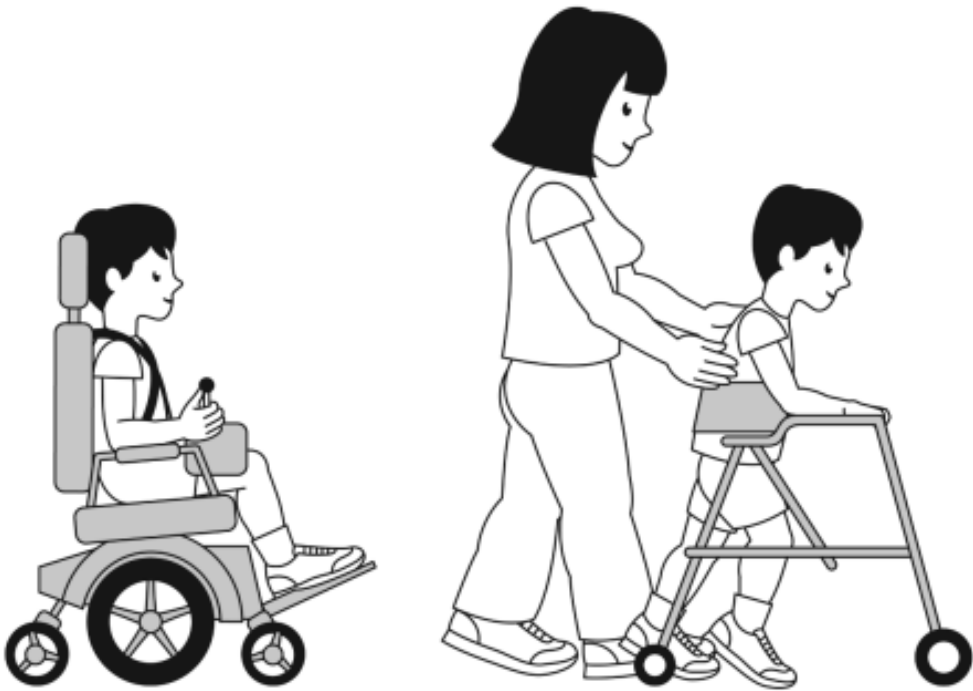
GMFCS Level III



Children use a hand-held mobility device in most indoor settings. They may climb stairs holding onto a railing with supervision or assistance.

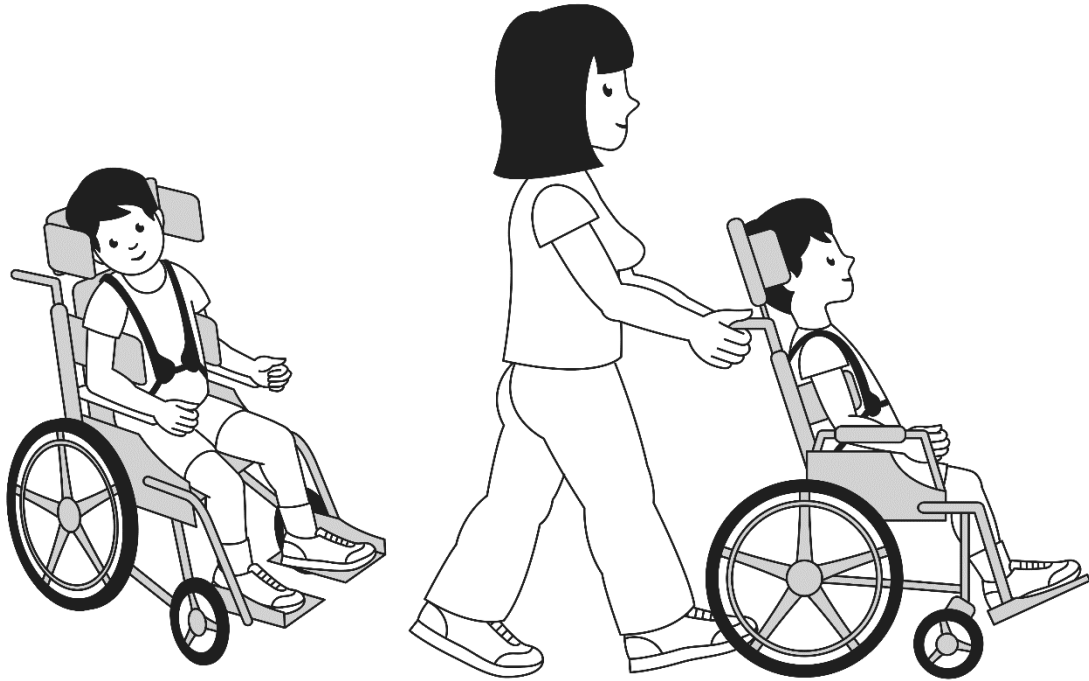
Children use wheeled mobility when traveling long distances or may self-propel for shorter distances.

GMFCS Level IV



Children use methods of mobility that require physical assistance or powered mobility in most settings. They may walk for short distances at home with physical assistance or a body support walker. At school, outdoors, and in the community, children are transported in a manual wheelchair or use powered mobility.

GMFCS Level V



Children are transported in a manual wheelchair in all settings. Children are limited in their ability to maintain anti-gravity head and trunk postures and control arm and leg movement.