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Original Research

# Validity of the Foot and Ankle Ability Measure in Athletes With Chronic Ankle Instability

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## Abstract

**Context:** The Foot and Ankle Ability Measure (FAAM) is a region-specific, non–disease-specific outcome instrument that possesses many of the clinimetric qualities recommended for an outcome instrument. Evidence of validity to support the use of the FAAM is available in individuals with a wide array of ankle and foot disorders. However, additional evidence to support the use of the FAAM for those with chronic ankle instability (CAI) is needed.

**Objective:** To provide evidence of construct validity for the FAAM based on hypothesis testing in athletes with CAI.

**Design:** Between-groups comparison.

**Setting:** Athletic training room.

**Patients or Other Participants:** Thirty National Collegiate Athletic Association Division II athletes (16 men, 14 women) from one university.

**Main Outcome Measure(s):** The FAAM including activities of daily living (ADL) and sports subscales and the global and categorical ratings of function.

**Results:** For both the ADL and sports subscales, FAAM scores were greater in healthy participants (100 ± 0.0 and 99 ± 3.5, respectively) than in subjects with CAI (88 ± 7.7 and 76 ± 12.7, respectively; $P < .001$). Similarly, for both ADL and sports subscales, FAAM scores were greater in athletes who indicated that their ankles were *normal* (98 ± 6.3 and 96 ± 6.9, respectively) than in those who classified their ankles as either *nearly normal* or *abnormal* (87 ± 6.6 and 71 ± 11.1, respectively; $P < .001$). We found relationships between FAAM scores and self-reported global ratings of function for both ADL and sports subscales. Relationships were stronger when all athletes, rather than just those with CAI, were included in the analyses.

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**Conclusions:** The FAAM may be used to detect self-reported functional deficits related to CAI.

**Keywords:** outcomes, evaluative instrument, self-report, ankle sprains

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