Spinal Cord Injury Functional Ambulation Inventory (SCI-FAI)

Assessment Overview

Assessment Area

ICF Domain:

Activity

Subcategory:

Mobility

Areas measured:

Gait parameters Assistive device use Walking mobility

You Will Need

Length:

5 minutes, 10 items

Scoring:

Scores within each component are summed. Component scores range from 0 to 20 in the gait parameter component, 0 to 14 in the assistive device component, and 0 to 5 in the walking mobility component. It is not meaningful to combine component scores into an overall total score.

Summary

The Spinal Cord Injury Functional Ambulation Inventory (SCI-FAI) is a clinician-administered, self-report and performance-based SCI-specific ambulation measure focusing on gait abnormalities.

The areas measured by SCI-FAI consist of gait parameters, assistive device use, and walking mobility. This scale only applies to people with SCI who can ambulate independently.

Availability

Worksheet: Can be found here.

Languages: English

Assessment Interpretability

Minimal Clinically Important Difference

Not established in SCI

Statistical Error

Standard Error of Measurement:

Gait Parameter Subscale = 0.7

Minimal Detectable Change: Gait Parameter Subscale = 1.9

(Calculated by Lam et al. 2008, data from Field-Forte et al. 2001; n=22; 17 males, 5 females; incomplete SCI)

Typical Values

Mean (SD) Scores:

Gait parameter component = 18.5 (3.3); range: 7-20

Assistive devices component =

11.4 (2.7); range: 7-14

Walking mobility component =

3.7 (1.2); range: 2-5

(Lemay & Nadeau 2010; n=32, 25 males, 7 females; AIS D; level of injury: 17 cervical, 10 thoracic, and 5 lumbar; mean (SD) time since injury: 77.2 (44.3) days)

Measurement Properties

Validity - Low to Moderate

Low to **Moderate** correlation with Berg Balance Scale (BBS):

SCI-FAI Gait: r = 0.31

SCI-FAI Assistive Device: r = -0.10 SCI-FAI Walking Mobility: r = 0.44

(Datta et al. 2009; n=97; 71 males, 26 females; Incomplete SCI; AIS-C/D; mean time since injury: 11.9 months)

High correlation with instruments measuring the same construct as the SCI-FAI: Gait Score & Walking Speed:

VS1: r = -0.742 VS2: r = -0.700

Gait Score & Subject self report on walking mobility:

VS1: r = 0.697

(Field-Forte et al. 2001; n=22; 17 males, 5 females; incomplete SCI)

Low to High correlation with other walking scales:

SCI-FAI Parameter:

Berg Balance Scale: r = 0.747

2 Minute Walk Test (2MWT): r = 0.805 Walking Index for SCI II (WISCI II): r = 0.761 10 Meter Walk Test (10MWT): r = 0.777 Timed Up and Go (TUG): r = -0.761

SCI-FAI Assistive devices:

BBS: r = 0.714 2MWT: r = 0.740 WISCI II: r = 0.980 10MWT: r = 0.788 TUG: r = -0.802

SCI-FAI mobility:

BBS: r = 0.740 2MWT: r = 0.740 WISCI II: r = 0.980 10MWT: r = 0.788 TUG: r = -0.802

(Lemay & Nadeau 2010; n=32, 25 males, 7 females; AIS D; level of injury: 17 cervical, 10 thoracic, and 5 lumbar; mean (SD) time since injury: 77.2 (44.3) days)

Number of studies reporting validity data: 3

Reliability – Moderate to High

Moderate to High Inter-rater Reliability:

ICC = 0.703 - 0.840

High Intra-rater Reliability:

ICC = 0.850 - 0.956

(Field-Forte et al. 2001; n=22; 17 males, 5 females; incomplete SCI)

Number of studies reporting reliability data: 1

Responsiveness

Floor/Ceiling Effect:

Subscale Ceiling:

Gait Parameter: 68.8% at ceiling Assistive Devices: 34.4% at ceiling Walking Mobility: 34.4% at ceiling

(Lemay & Nadeau 2010; n=32, 25 males, 7 females; AIS D; level of injury: 17 cervical, 10 thoracic, and 5 lumbar; mean (SD) time since

injury: 77.2 (44.3) days)

Effect Size:

Not established in SCI

Number of studies reporting responsiveness data: 3