

## INTRODUCTION

All clinical measures have two inherent properties which, when determined, demonstrate the accuracy, repeatability and hence the overall value of the measures as a clinical reference tool. These properties are generally described as measurement validity and reliability and are fundamental to all methods of measurement, be they clinical or technical.

The clinical measures of foot posture used by podiatrists have been called into question many times over the last fifteen years, with most focus directed at the reliability of the measures (both repeated measures by individual clinicians and also repeated measures compared between colleagues). Generally the reliability of foot measures, as used by clinicians to rate the foot type, has been poor and leaves podiatrists in a quandary as to how to approach the examination of the foot and establish an intervention baseline. Whilst this has been important work, the validity of clinical foot measures has been scantily explored, yet is arguably more important. Whilst reliability is an important property of clinical measures, it does not assure that the measure is also valid. A measure may demonstrate good reliability and yet be invalid, rendering it useless. Conversely a demonstrably valid measure will more usually be reliable. This paper begins with a brief overview of the concept of validity and discusses the findings of investigations into the validity of two clinical measures – navicular height and the Foot Posture Index.