



Chronic Disease Self-Efficacy Scales (Original 33-Item)

We would like to know how confident you are in doing certain activities. For each of the following questions, please choose the number that corresponds to your confidence that you can do the tasks regularly at the present time.

Exercise Regularly Scale

1. How confident are you that you can do gentle exercises for muscle strength and flexibility three to four times per week (range of motion, using weights, etc.)?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
2. How confident are you that you can do aerobic exercise such as walking, swimming, or bicycling three to four times each week?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
3. How confident are you that you can exercise without making symptoms worse?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

Get Information About Disease Item

1. How confident are you that you can get information about your disease from community resources?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

Obtain Help from Community, Family, Friends Scale

1. How confident are you that you can get family and friends to help you with the things you need (such as household chores like shopping, cooking, or transport)?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
2. How confident are you that you can get emotional support from friends and family (such as listening or talking over your problems)?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
3. How confident are you that you can get emotional support from resources other than friends or family, if needed?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
4. How confident are you that you can get help with your daily tasks (such as housecleaning, yard work, meals, or personal hygiene) from resources other than friends or family, if needed?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

Communicate With Physician Scale

1. How confident are you that you can ask your doctor things about your illness that concerns you?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
2. How confident are you that you can discuss openly with your doctor any personal problems that may be related to your illness?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
3. How confident are you that you can get work out differences with your doctor when they arise?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

Manage Disease in General Scale

1. Having an illness often means doing different tasks and activities to manage your condition. How confident are you that you can do all the things necessary to manage your condition on a regular basis?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
2. How confident are you that you can judge when the changes in your illness mean you should visit a doctor?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
3. How confident are you that you can do the different tasks and activities needed to manage your health condition so as to reduce your need to see a doctor?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
4. How confident are you that you can reduce the emotional distress caused by your health condition so that it does not affect your everyday life?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
5. How confident are you that you can do things other than just taking medication to reduce how much your illness affects your everyday life?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

Do Chores Scale

1. How confident are you that you can complete your household chores, such as vacuuming and yard work, despite your health problems?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
2. How confident are you that you can get your errands done despite your health problems?
not at all confident | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

3. How confident are you that you can get your shopping done despite your health problems?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

Social/Recreational Activities Scale

1. How confident are you that you can continue to do your hobbies and recreation?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

2. How confident are you that you can continue to do the things you like to do with friends and family (such as social visits and recreation)?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

Manage Symptoms Scale

1. How confident are you that you can reduce your physical discomfort or pain?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

2. How confident are you that you can keep the fatigue caused by your disease from interfering with the things you want to do?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

3. How confident are you that you can keep the physical discomfort or pain of your disease from interfering with the things you want to do?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

4. How confident are you that you can keep any other symptoms or health problems you have from interfering with the things you want to do?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

5. How confident are you that you can control any symptoms or health problems you have so that they don't interfere with the things you want to do?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

Manage Shortness of Breath Item

1. How confident are you that you can keep your shortness of breath from interfering with what you want to do?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

Control/Manage Depression Scale

1. How confident are you that you can keep from getting discouraged when nothing you do seems to make any difference?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

2. How confident are you that you can keep from feeling sad or down in the dumps?

not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

3. How confident are you that you can keep yourself from feeling lonely? not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
4. How confident are you that you can do something to make yourself feel better when you are feeling lonely? not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
5. How confident are you that you can do something to make yourself feel better when you are feeling discouraged? not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident
6. How confident are you that you can do something to make yourself feel better when you feel sad or down in the dumps? not at all | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | totally confident

Scoring

The score for each item is the number circled. If two consecutive numbers are circled, code the lower number (less self-efficacy). If the numbers are not consecutive, do not score the item. The score for each scale is the mean of the items. For scales of 1-2 items, do not score the scale if any item is missing; for scales with 3-4 items, do not score the scale if more than 1 item is missing; for scales with 5-6 items, do not score the scale if more than 2 items are missing. Higher number indicates higher self-efficacy.

Characteristics

Scale	No. of Subjects	No. of items	Observed Range	Mean	Standard Deviation	Internal Consistency Reliability	Test-Retest Reliability
Exercise regularly	478	3	1-10	6.30	2.70	.83	.86
Get information on disease	478	1	1-10	7.37	2.65	—	.72
Obtain help from community, family, friends	478	4	1-10	6.18	2.42	.77	.85
Communication with physician	477	3	1-10	7.30	2.71	.90	.88
Manage disease in general	292	5	1-10	6.92	2.15	.87	—
Do chores	478	3	1-10	6.29	2.70	.91	.86
Do social/recreational activities	478	2	1-10	6.50	2.65	.82	.84
Manage symptoms	478	4	1-10	5.88	2.40	.91	.89
Manage shortness of breath <i>(only reported on those reporting shortness of breath)</i>	280	1	1-10	5.87	2.97	—	.82
Control/manage depression	478	6	1-10	6.51	2.23	.92	.82

Source of Psychometric Data

Stanford Chronic Disease Self-Management Study. Psychometrics reported in: Lorig K, Stewart A, Ritter P, González V, Laurent D, & Lynch J, Outcome Measures for Health Education and other Health Care Interventions. Thousand Oaks CA: Sage Publications, 1996, pp.24-25,41-45.

Comments

These scales were developed and tested for the Chronic Disease Self-Management study. We use the shorter, 6-item scale now (shown in another document), as it is much less burdensome for subjects.

References

Lorig K, Stewart A, Ritter P, González V, Laurent D, & Lynch J, Outcome Measures for Health Education and other Health Care Interventions. Thousand Oaks CA: Sage Publications, 1996, pp.24-25,41-45.

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