Chronic Disease Self-Efficacy Scales

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 | | | | | | | | | | totally confident
   not at all | | | | | | | | | | totally confident
   not at all | | | | | | | | | | 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 | | | | | | | | | | totally confident
   not at all | | | | | | | | | | totally confident
   not at all | | | | | | | | | | totally confident

3. How confident are you that you can exercise without making symptoms worse?  
   not at all | | | | | | | | | | totally confident
   not at all | | | | | | | | | | totally confident
   not at all | | | | | | | | | | 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 | | | | | | | | | | totally confident
   not at all | | | | | | | | | | totally confident
   not at all | | | | | | | | | | 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 | | | | | | | | | | totally confident
   not at all | | | | | | | | | | totally confident
   not at all | | | | | | | | | | 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 | | | | | | | | | | totally confident
   not at all | | | | | | | | | | totally confident
   not at all | | | | | | | | | | totally confident
3. How confident are you that you can get emotional support from resources other than friends or family, if needed?

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?

Communicate With Physician Scale
1. How confident are you that you can ask your doctor things about your illness that concerns you?

2. How confident are you that you can discuss openly with your doctor any personal problems that may be related to your illness?

3. How confident are you that you can get work out differences with your doctor when they arise?

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?

2. How confident are you that you can judge when the changes in your illness mean you should visit a doctor?

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?

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?
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?

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?

2. How confident are you that you can get your errands done despite your health problems?

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

Social/Recreational Activities Scale
1. How confident are you that you can continue to do your hobbies and recreation?

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)?

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

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

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?

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?
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?

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?

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?
2. How confident are you that you can keep from feeling sad or down in the dumps?
3. How confident are you that you can keep yourself from feeling lonely?
4. How confident are you that you can do something to make yourself feel better when you are feeling lonely?
5. How confident are you that you can do something to make yourself feel better when you are feeling discouraged?
6. How confident are you that you can do something to make yourself feel better when you feel sad or down in the dumps?

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

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


### 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. There are 2 ways to format these items. We use the format above, because it takes up less room on the questionnaire. The other is shown on the web page.

### References


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