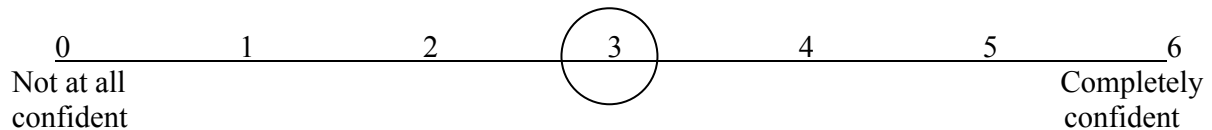


Nicholas (1989)

NAME: _____ DATE: _____

Please rate how **confident** you are that you can do the following things at present, despite the pain. To indicate your answer circle one of the numbers on the scale under each item, where 0 = not at all confident and 6 = completely confident.

For example:



Remember, this questionnaire is not asking whether or not you have been doing these things, but rather **how confident you are that you can do them at present, despite the pain.**

	Not at all confident					Completely confident	
1. I can enjoy things, despite the pain	0	1	2	3	4	5	6
2. I can do most of the household chores (e.g. tidying -up, washing dishes, etc.), despite the pain	0	1	2	3	4	5	6
3. I can socialise with my friends or family members as often as I used to do, despite the pain	0	1	2	3	4	5	6
4. I can cope with my pain in most situations	0	1	2	3	4	5	6
5. I can do some form of work, despite the pain. ("work" includes housework, paid and unpaid work)	0	1	2	3	4	5	6
6. I can still do many of the things I enjoy doing, such as hobbies or leisure activities, despite the pain	0	1	2	3	4	5	6
7. I can cope with my pain without medication	0	1	2	3	4	5	6
8. I can still accomplish most of my goals in life, despite the pain	0	1	2	3	4	5	6
9. I can live a normal lifestyle, despite the pain	0	1	2	3	4	5	6
10. I can gradually become more active, despite the pain	0	1	2	3	4	5	6