

Evaluative Belief Scale

Patient information					
Name:			Date of birth:		
Gender:			Date of assessment:		
Evaluative belief scale					
<i>Instructions: The answer should be a single choice.</i>					
Item	Strongly agree	Slightly agree	Unsure	Slightly disagree	Strongly disagree
1. Other people are worthless.					
2. I am a total failure.					
3. People think I am a bad person.					
4. Other people are inferior to me.					
5. People see me as worthless.					
6. I am worthless.					
7. Other people are total failures.					
8. Other people are totally weak and helpless.					
9. People see me as a total failure.					
10. Other people are bad.					
11. I am totally weak and helpless.					
12. People see me as unlovable.					
13. I am a bad person.					
14. People see me as totally weak and helpless.					
15. Other people are unlovable.					
16. I am an inferior person.					
17. I am unlovable.					
18. People look down on me.					
Findings/results					

Additional notes

Healthcare professional information

Name:

License ID number:

Signature:

Date of assessment:

Chadwick, P., Trower, P., & Dagnan, D. (1999). Measuring negative beliefs about the self: A comparison of two measures. *Cognitive Therapy and Research*, 23(5), 549–559.
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