The Activities-Specific Balance Confidence (ABC) Scale

Patient Name: _______________________________ DOB: __________ Date: __________

For each of the following activities, please indicate your level of self-confidence by choosing a corresponding number from the following rating scale:

<table>
<thead>
<tr>
<th>0%</th>
<th>10%</th>
<th>20%</th>
<th>30%</th>
<th>40%</th>
<th>50%</th>
<th>60%</th>
<th>70%</th>
<th>80%</th>
<th>90%</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No confidence</td>
<td>-----------------------------------------------</td>
<td>Completely confident</td>
<td></td>
<td></td>
<td></td>
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</tbody>
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“How confident are you that you will not lose your balance or become unsteady when you…

1. Walk around the house? ______%  
2. Walk up or down stairs? ______%  
3. Bend over and pick up a slipper (or item) from the front of a closet floor _____%  
4. Reach for a small can off a shelf at eye level? _____%  
5. Stand on your tiptoes and reach for something above your head? _____%  
6. Stand on a chair and reach for something? _____%  
7. Sweep the floor? _____%  
8. Walk outside the house to a car parked in the driveway? _____%  
9. Get into or out of a car? _____%  
10. Walk across a parking lot to the mall (store)? _____%  
11. Walk up or down a ramp? _____%  
12. Walk in a crowded mall where people rapidly walk past you? _____%  
13. Are bumped into by people as you walk through the mall? _____%  
14. Step onto or off an escalator while you are holding onto a railing? _____%  
15. Step onto or off an escalator while holding onto parcels such that you cannot hold onto the railing? _____%  
16. Walk outside on icy sidewalks? _____%  

Instructions for Scoring:
The ABC is an 11-point scale and ratings should consist of whole numbers (0-100) for each item. Total the ratings (possible range = 0 – 1600) and divide by 16 to get each subject’s ABC score.

Total Score: __________________________