

## Brown Assessment of Beliefs Scale - (Adult Version)

ID#: \_\_\_\_\_

Date: \_\_\_\_\_

Belief (describe principal belief(s) during the past week): \_\_\_\_\_

For each item circle the number identifying the response which best characterizes the patient **over the past week**. The patient's specific belief can be incorporated into the question--for example, "How convinced are you of this belief--that you are really ugly and deformed?" Optional questions are indicated in parentheses; instructions to the interviewer are italicized.

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### 1. Conviction

How convinced are you of these ideas/beliefs?  
Are you certain your ideas/beliefs are accurate?  
(What do you base your certainty on?)

- 0- Completely convinced beliefs are false (0% certainty).
- 1- Beliefs are probably not true, or substantial doubt exists.
- 2- Beliefs may or may not be true, or unable to decide whether beliefs are true or not.
- 3- Fairly convinced that beliefs are true but an element of doubt exists.
- 4- Completely convinced about the reality of held beliefs (100% certainty).

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### 2. Perception of others' views of beliefs

What do you think other people (would) think of your beliefs? How certain are you that most people think your beliefs make sense?

*(Interviewer should clarify if necessary that the patient answers this question assuming that others are giving their honest opinion.)*

- 0- Completely certain that most people think these beliefs are unrealistic.
- 1- Fairly certain that most people think these beliefs are unrealistic.
- 2- Others may or may not think beliefs are unrealistic, or uncertain about others' views concerning these beliefs.
- 3- Fairly certain that most people think these beliefs are realistic.
- 4- Completely certain that most people think these beliefs are realistic.

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*(Interviewer should not ask this item if responses on item 1 and 2 are the same. In that case, give the same score as items 1 and 2.)*

### 3. Explanation of differing views

You said that (*fill in response to item 1*), but that (*fill in response to item 2*). How do you explain the difference between what you think and what others think about the accuracy of your beliefs?  
(Who's more likely to be right?)

- 0- Completely certain that beliefs are unrealistic or absurd (e.g., "my mind is playing tricks on me.")
- 1- Fairly certain that beliefs are unrealistic.
- 2- Uncertain about why others don't agree-- beliefs may be unrealistic or others may be wrong.
- 3- Fairly certain that beliefs are true; view of others is less accurate.
- 4- Completely certain that beliefs are true; view of others is not accurate.

#### 4. Fixity of ideas

If I were to question (or challenge) the accuracy of your beliefs, what would your reaction be? Could I convince you that you're wrong? (Would you consider the possibility?)

*(If necessary, supply a non-confrontational example.)*

*(Rate on the basis of whether the patient could be convinced, not whether s/he wishes s/he could be convinced.)*

- 0- Eager to consider the possibility that beliefs may be false; demonstrates no reluctance to entertain this possibility.
- 1- Easily willing to consider the possibility that beliefs may be false; reluctance to do so is minimal.
- 2- Somewhat willing to consider the possibility that beliefs may be false, but moderate resistance is present.
- 3- Clearly reluctant to consider the possibility that beliefs may be false; reluctance is significant.
- 4- Absolutely refuses to consider the possibility that beliefs may be false--i.e., beliefs are fixed.

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#### 5. Attempt to disprove ideas

How actively do you try to disprove or reject your ideas/beliefs? How much of an effort do you make to convince yourself that your beliefs are inaccurate?

*(Interviewer should rate attempts patient makes to talk himself/herself out of the belief, not attempts to push the thoughts/ideas out of his/her mind or think about something else.)*

- 0- Always involved in trying to disprove beliefs, or not necessary to disprove because beliefs are not true.
- 1- Usually tries to disprove beliefs.
- 2- Sometimes tries to disprove beliefs.
- 3- Occasionally attempts to disprove beliefs.
- 4- Makes no attempt to disprove beliefs.

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#### 6. Insight

What do you think has caused you to have these beliefs? Do they have a psychiatric or psychological cause, or are they actually true?

*(Interviewer should determine what the patient actually believes, not what s/he has been told or hopes is true.)*

*(Recognition that the thoughts are excessive (i.e., take up too much time) or cause problems for the patient should not be considered equivalent to psychiatric/psychological etiology. Instead rate patient's awareness that the source/cause of the beliefs is psychiatric/psychological.)*

- 0- Beliefs definitely have a psychiatric/psychological cause.
- 1- Beliefs probably have a psychiatric/psychological cause.
- 2- Beliefs possibly have a psychiatric/psychological cause.
- 3- Beliefs probably do not have a psychiatric/psychological cause.
- 4- Beliefs definitely do not have a psychiatric/psychological cause.

<b>7. TOTAL BABS SCORE: _____ = SUM OF QUESTIONS 1 THROUGH 6</b>
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**ADDITIONAL ITEM:** *(Do not include in total score)*

#### 8. Ideas/delusions of reference

Does it ever seem that people are talking about you or taking special notice of you because of *(fill in belief)?*

OPTIONAL: What about receiving special messages from your environment because of *(fill in belief)?*

(How certain are you of this?)

*(This question pertains only to the belief(s) being assessed by the BABS interviewer--not if patient thinks s/he is noticed for a reason unrelated to the beliefs being assessed. Interviewer should NOT base answer on observable actions or compulsions; instead, rate core belief.)*

- 0- No; others definitely do not take special notice of me.
- 1- Others probably do not take special notice of me.
- 2- Others may or may not take special notice of me.
- 3- Others probably do take special notice of me.
- 4- Others definitely do take special notice of me.