| **The following statements describe self-care activities related to your diabetes. Thinking about your self-care over the last 8 weeks, please specify the extent to which each statement applies to you.** | | **Applies to me very much** | **Applies to me to a consider-able degree** | **Applies to me to some degree** | **Does not apply to me** |
| --- | --- | --- | --- | --- | --- |
| 1. | I check my blood sugar levels with care and attention.  ☐ *Blood sugar measurement is not required as a part of my treatment.* | ☐3 | ☐2 | ☐1 | ☐0 |
| 2. | The food I choose to eat makes it easy to achieve optimal blood sugar levels. | ☐3 | ☐2 | ☐1 | ☐0 |
| 3. | I keep all doctors’ appointments recommended for my diabetes treatment. | ☐3 | ☐2 | ☐1 | ☐0 |
| 4. | I take my diabetes medication (e. g. insulin, tablets) as prescribed.  ☐ *Diabetes medication / insulin is not required as a part of my treatment.* | ☐3 | ☐2 | ☐1 | ☐0 |
| 5. | Occasionally I eat lots of sweets or other foods rich in carbohydrates. | ☐3 | ☐2 | ☐1 | ☐0 |
| 6. | I record my blood sugar levels regularly (or analyse the value chart with my blood glucose meter).  ☐ *Blood sugar measurement is not required as a part of my treatment.* | ☐3 | ☐2 | ☐1 | ☐0 |
| 7. | I tend to avoid diabetes-related doctors’ appointments. | ☐3 | ☐2 | ☐1 | ☐0 |
| 8. | I do regular physical activity to achieve optimal blood sugar levels. | ☐3 | ☐2 | ☐1 | ☐0 |
| 9. | I strictly follow the dietary recommendations given by my doctor or diabetes specialist. | ☐3 | ☐2 | ☐1 | ☐0 |
| 10. | I do not check my blood sugar levels frequently enough as would be required for achieving good blood glucose control.  ☐ *Blood sugar measurement is not required as a part of my treatment.* | ☐3 | ☐2 | ☐1 | ☐0 |
| 11. | I avoid physical activity, although it would improve my diabetes. | ☐3 | ☐2 | ☐1 | ☐0 |
| 12. | I tend to forget to take or skip my diabetes medication (e. g. insulin, tablets).  ☐ *Diabetes medication / insulin is not required as a part of my treatment.* | ☐3 | ☐2 | ☐1 | ☐0 |
| 13. | Sometimes I have real ‘food binges’ (not triggered by hypoglycaemia). | ☐3 | ☐2 | ☐1 | ☐0 |
| 14. | Regarding my diabetes care, I should see my medical practitioner(s) more often. | ☐3 | ☐2 | ☐1 | ☐0 |
| 15. | I tend to skip planned physical activity. | ☐3 | ☐2 | ☐1 | ☐0 |
| 16. | My diabetes self-care is poor. | ☐3 | ☐2 | ☐1 | ☐0 |

Scoring of the questionnaire involved reversing negatively worded items such that higher values are indicative of more effective self-care. Scale scores were calculated as sums of item scores and then transformed to a scale ranging from 0 to 10 (raw score / theoretical maximum score \* 10; for example, for the subscale ‘Glucose Management’ a raw score of 12 leads to a transformed score of 12 / 15 \* 10 = 8). A transformed score of ten thus represented the highest self-rating of the assessed behaviour. If ‘not required as a part of my treatment’ had been marked in an item, it was not used, and the scale score computation was adapted accordingly (by reducing the theoretical maximum score by three points). However, in case of more than half of the items of a scale missing, a scale score should not be computed.

From: “The Diabetes Self-Management Questionnaire (DSMQ): development and evaluation of an instrument to assess diabetes self-care activities associated with glycaemic control.”

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