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## **The Diabetes Obstacles Questionnaire**

The Diabetes Obstacles Questionnaire has been validated for use by people living with Type 2 diabetes.

The questionnaire is freely available for use.

The authors would be grateful for acknowledgement of them as the source of the questionnaire, and citation of the reference below :

Hilary Hearnshaw, Kay Wright, Jeremy Dale, Jackie Sturt, Etienne Vermeire and Paul van Royen, Development and Validation of the Diabetes Obstacles Questionnaire (DOQ) to Assess Obstacles in Living with Type 2 Diabetes, *Diabetic Medicine*, 2007; 24:878-882.

## The Diabetes Obstacles Questionnaire

The Diabetes Obstacles Questionnaire (DOQ) is designed for completion by people who have Type 2 diabetes.

There are 8 SCALES, with several ITEMS in each scale. Each scale deals with one topic and comprises a number of items. Each item deals with one obstacle in that topic. Each item should be answered by ticking one box.

For an individual who has Type 2 diabetes, not all scales may be relevant, so a selection of which scales to use can be made either by the person, or by his or her clinician. Having selected the scales to be used, all items on a scale should be answered.

The items are deliberately all related to obstacles and so may seem to have a negative tone to them. The items are designed to identify the obstacles for an individual person. The obstacles are those items for which the respondent has ticked the box for Agree or Strongly Agree.

In a clinical setting this could then lead to the obstacles being addressed. In a research setting, the scales may be used to demonstrate change in obstacles, perhaps due to an intervention intended to reduce obstacles.

# The Diabetes Obstacles Questionnaire

## Scale 1 - Obstacles in Medication Scale

Please place one tick against each comment to indicate how much you agree or disagree with the statement in relation to your diabetes medicine (tablets or insulin) **not** other medication that you may be taking.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. I do not feel I am being prescribed the medication that is right for me					
2. I do not feel I am being prescribed the medication dose that is right for me					
3. I don't know what to do about taking my medication when I am feeling unwell					
4. Taking insulin makes life too complicated					
5. Taking insulin means my diabetes is getting worse					
6. People treat insulin users differently					
7. I am not in a convenient place when it is time to take my medication					
8. I forget to take my medication					
9. My medication causes unwanted side effects					
10. I feel resentful that I have to take my medication					

# The Diabetes Obstacles Questionnaire

## Scale 2 - Obstacles in Self-Monitoring Scale

Please place one tick against each comment to indicate how much you agree or disagree with the statement in relation to self-monitoring your blood glucose levels.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. I find it especially hard to test when I'm busy					
2. Self-monitoring makes me feel frustrated					
3 Self-monitoring makes me fearful of a high reading					
4. I don't feel that self-monitoring is helping me to control my diabetes					
5. I find it too uncomfortable to self-monitor					

# The Diabetes Obstacles Questionnaire

## Scale 3 - Obstacles of Knowledge and Beliefs Scale

Please place one tick against each comment to indicate how much you agree or disagree with the statement in relation to your experiences of accessing knowledge about diabetes.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. I do not know as much as I need to know to manage my diabetes					
2. I have difficulty accessing information that is relevant to me personally					
3. I have difficulty understanding the information from literature					
4. I have difficulty understanding the information from health care professionals					
5. I think that the information on diabetes is not consistent					
6. I do not know as much as I need to know about the consequences of having diabetes					
7. I do not know enough about the treatment for diabetes					
8. I believe type 2 diabetes is mild compared with type 1					
9. I do not know enough about the benefits of diabetes treatment for me personally					
10. I don't believe the consequences of type 2 diabetes are serious					

# The Diabetes Obstacles Questionnaire

## Scale 4 – Obstacles at Diagnosis Scale

Please place one tick against each comment to indicate how much you agree or disagree with the statement in relation to when you were first diagnosed with diabetes.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The way that I was told that I had diabetes made me feel confused					
2. The way that I was told that I had diabetes made me feel afraid					
3. The way that I was told that I had diabetes made me feel that it was not a serious condition					
4. The way that I was told that I had diabetes did not motivate me to manage my diabetes well					
5. I was not given as much information as I needed about the consequences of having diabetes					
6. The way that I was told that I had diabetes made me feel guilty					

# The Diabetes Obstacles Questionnaire

## Scale 5 - Obstacles in Relationships with Health Care Professionals Scale

Please place one tick against each comment to indicate how much you agree or disagree with the statement in relation to when you were first diagnosed with diabetes.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. I feel my questions about diabetes are not answered					
2. I feel I am not listened to					
3. I feel my judgment is not trusted in managing my diabetes					
4. I am not advised at all on what to do about my diabetes					
5. I am not assisted in setting realistic targets for changing my lifestyle					
6. Treatment alternatives are not explained to me					
7. I have not been told what to expect from my diabetes					
8. I have not been told what to expect from my treatment					
9. I do not feel I am part of the diabetes team					
10. The good and bad aspects of each choice have not been discussed with me					
11. I am not asked at all which choice I would prefer					
12. Talking about my diabetes with members of the diabetes team does not make me feel better					
13. Adjustments to my diabetes plan cannot be discussed					
14. I feel threatened when I go for a checkup					
15. I feel a sense of powerlessness when consulting with nurses					
16. I feel a sense of powerlessness when consulting with doctors					
17. Clinic times are inconvenient for me					
18. I have to spend too much time waiting in clinics					



# The Diabetes Obstacles Questionnaire

## Scale 6 - Obstacles to Lifestyle Changes Scale

Please place one tick against each comment to indicate how much you agree or disagree with the statement in relation to changes in your lifestyle.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. My diabetic diet spoils my social life					
2. I generally still feel hungry after finishing a meal					
3. My diabetes has placed a strain on my personal relationships					
4. There is little hope of leading a normal life when you have diabetes					
5. Changes in my diet have put a strain on my family					
6. I have difficulty sticking to my diet when I am away from home					
7. I feel resentful that I am obliged to change my eating habits					
8. I am unable to fit exercise into my lifestyle					
9. I am unable to afford the cost of exercising on a regular basis					
10. I haven't found an exercise I enjoy					
11. I lack the motivation to exercise					
12. Weight control is real problem for me					
13. I am not able to change my lifestyle to fit with advice from health care professional(s)					

# The Diabetes Obstacles Questionnaire

## Scale 7 - Obstacles to Coping with Diabetes Scale

Please place one tick against each comment to indicate how much you agree or disagree with the statement in relation to problems with sticking to your diabetes treatment plan.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. Self management of diabetes is difficult to maintain because diabetes complications are not immediate					
2. Good control of diabetes involves a lot of sacrifice					
3. I find it difficult to get into a suitable routine to cope with my treatment plan					
4. I am not convinced that the treatment I receive for my diabetes is effective					
5. I feel overwhelmed by the responsibility of having to take my medication					
6. I feel that I would like to take a holiday from my diabetes					
7. I eat something I should not rather than say I have diabetes					
8. I feel that my family would like to take a holiday from my diabetes					

# The Diabetes Obstacles Questionnaire

## Scale 8 - Obstacles around Advice and Support Scale

Please place one tick against each comment to indicate how much you agree or disagree with the statement in relation to receiving advice and support about your diabetes.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. I am not convinced health care professionals believe the treatment I receive for my diabetes will work					
2. I am told too often what I should and should not be doing to manage my diabetes					
3. Constantly repeating what I should be doing to manage my diabetes makes me do it less					
4. I am criticized too often about the way I manage my diabetes					
5. I would manage my diabetes much better if I had more encouragement socially					
6. I feel very alone with my diabetes					
7. I feel I get little support from my family					
8. I feel I get little support from my friends					