

Diabetes Empowerment Scale-Short Form (DES-SF)

In general, I believe that I:

- | | | | | | |
|---|--|--|--|---|---|
| 1. ...know what part(s) of taking care of my diabetes that I am dissatisfied with. | <input type="checkbox"/> ₁
Strongly Disagree | <input type="checkbox"/> ₂
Somewhat Disagree | <input type="checkbox"/> ₃
Neutral | <input type="checkbox"/> ₄
Somewhat Agree | <input type="checkbox"/> ₅
Strongly Agree |
| 2. ...am able to turn my diabetes goals into a workable plan. | <input type="checkbox"/> ₁
Strongly Disagree | <input type="checkbox"/> ₂
Somewhat Disagree | <input type="checkbox"/> ₃
Neutral | <input type="checkbox"/> ₄
Somewhat Agree | <input type="checkbox"/> ₅
Strongly Agree |
| 3. ...can try out different ways of overcoming barriers to my diabetes goals. | <input type="checkbox"/> ₁
Strongly Disagree | <input type="checkbox"/> ₂
Somewhat Disagree | <input type="checkbox"/> ₃
Neutral | <input type="checkbox"/> ₄
Somewhat Agree | <input type="checkbox"/> ₅
Strongly Agree |
| 4. ...can find ways to feel better about having diabetes. | <input type="checkbox"/> ₁
Strongly Disagree | <input type="checkbox"/> ₂
Somewhat Disagree | <input type="checkbox"/> ₃
Neutral | <input type="checkbox"/> ₄
Somewhat Agree | <input type="checkbox"/> ₅
Strongly Agree |
| 5. ...know the positive ways I cope with diabetes-related stress. | <input type="checkbox"/> ₁
Strongly Disagree | <input type="checkbox"/> ₂
Somewhat Disagree | <input type="checkbox"/> ₃
Neutral | <input type="checkbox"/> ₄
Somewhat Agree | <input type="checkbox"/> ₅
Strongly Agree |
| 6. ...can ask for support for having and caring for my diabetes when I need it. | <input type="checkbox"/> ₁
Strongly Disagree | <input type="checkbox"/> ₂
Somewhat Disagree | <input type="checkbox"/> ₃
Neutral | <input type="checkbox"/> ₄
Somewhat Agree | <input type="checkbox"/> ₅
Strongly Agree |
| 7. ...know what helps me stay motivated to care for my diabetes. | <input type="checkbox"/> ₁
Strongly Disagree | <input type="checkbox"/> ₂
Somewhat Disagree | <input type="checkbox"/> ₃
Neutral | <input type="checkbox"/> ₄
Somewhat Agree | <input type="checkbox"/> ₅
Strongly Agree |
| 8. ...know enough about myself as a person to make diabetes care choices that are right for me. | <input type="checkbox"/> ₁
Strongly Disagree | <input type="checkbox"/> ₂
Somewhat Disagree | <input type="checkbox"/> ₃
Neutral | <input type="checkbox"/> ₄
Somewhat Agree | <input type="checkbox"/> ₅
Strongly Agree |