

ANNEX I: Information sheet and Informed consent

Information sheet

Hello. My name is _____ and I am a data collector of the study conducted by Mulugeta et al., Madda Walabu University academic staff, and researchers. Conducting this research entitled "*Diabetes-Related Distress and its Associated Factors Among Type 2 Diabetes Patients Attending Follow-up Care at Bale and East Bale Zone Hospitals, Southeast Ethiopia: a cross-sectional study*". We would very much appreciate your participation in this study. The interview takes between 10-20 minutes to complete. As part of the study, we would first like to ask you about socio-demographics then clinical factors, personal factors, and Diabetes-related distress (DRD). Whatever, information you provide will be kept strictly confidential, and will not be shared with anyone other than members of our research team. Participation in this survey is voluntary, and if we should come to any question you don't want to answer, just let me know and I will go on to the next question; or you can stop the interview at any time. However, we hope you will participate in the survey since your views are important.

At this time, do you want to ask me anything about the survey?

May I begin the interview now?

Signature of interviewer: ----- Date: -----/-----/-----

RESPONDENT AGREES TO BE INTERVIEWED - interview.

RESPONDENT DOES NOT AGREE TO BE INTERVIEWED - end.

For more information and questions here is the contact address of the principal investigator.

Mulugeta Adugnew (BSc, MSc)

Tel: +251931821570

E-mail: mulugetaadugnew@gmail.com

Consent form

I _____ am informed on the study to be conducted by Mulugeta et al., Mada Walabu University academic staff and researchers, “*Diabetes-Related Distress and its Associated Factors Among Type 2 Diabetes Patients Attending Follow-Up Care at Bale and East Bale Zone Hospitals, Southeast Ethiopia: a cross-sectional study*”. Participation in this study is voluntary, with no obligation to answer any questionnaire, there is not any harm by not answering the questions and no special benefit by answering the question and the interview will take 10- 20 minutes. I heard all the information mentioned above and am willing to participate in the interview.

Name of interviewer _____ **Signature** _____

(Signature of interviewer certifying that respondent has given informed consent verbally)

Annex II: English Version Questionnaire**General information**

For each question, make a circle around the spelling that corresponds to the answer; fill in the blanks with the answer of the respondent.

1. Participant's code number: _____

Part I: Socio-demographic characteristics

S.No	Question	Response	Remark
101	Age	_____	
102	Sex	1. Male 2. Female	
103	Marital status	1. Single 2. Married 3. Divorced 4. Widowed	
104	Residence	1. Urban 2. Rural	
105	Educational status	1. No formal education 2. Primary (1-8) 3. Secondary (9-12) 4. Diploma 5. Degree and above	
106	Patient occupation	1. Unemployed 2. Retired 3. Employed 4. Housewife 5. Merchant 6. Daily labor 7. Farmer 8. Student 9. Others	

Part II: Clinical-related history

SNO	Questions	Response	
201	Duration with diabetes	_____. Years	
202	Comorbidities	1. Yes 2.No 3. don't know	If NO go to Q 204
203	If you say yes for Q No 202 Which comorbidities, do you have	1. hypertension 2. nerve problem 3. kidney disease 4. heart problem 5. Other (specify) _____.	
204	Mode of current treatment	1. Insulin injection 2. Oral medication 3. both 4. lifestyle modification	
205	Hypoglycemia Event in the last 3 months	1. Yes 2. No	
206	Have you attended education related to diabetes	1. Yes 2. No	

Part III: Personal Factors

301	Routine physical activity	1. Yes 2. No	
302	How many people are so close to you that you can count on them if you have great personal problems?	1 'none' 2 '1-2' 3 '3-5' 4 '5+'	
303	How much interest and concern do people show in what you do?	1 'none' 2 'Little'	

		3 'uncertain' 4 'some' 5 'a lot'	
304	How easy is it to get practical help from neighbors if you should need it?	1 'very difficult' 2 'Difficult' 3 'possible' 4 'easy' 5 'very easy'	
305	Do you have drink alcohol in the past one year?	1. yes 2. No	If No go to Q307
306	How many times do you consume alcohol?	1. Up to 4 times per month 2. More than 4 times per week	
307	Have you smoked a cigarette—even one puff—during the past SEVEN DAYS?	1. Yes 2. No	

Part IV: Questions related to Diabetes-related distress (DRD)

Directions: Living with diabetes can sometimes be tough. There may be many problems and hassles concerning diabetes and they can vary greatly in severity. Problems may range from minor hassles to major life difficulties. Listed below are 17 potential problems that people with diabetes may experience. Consider the degree to which each of the items may have distressed or bothered you DURING THE PAST MONTH and circle the appropriate number. Please note that we are asking you to indicate the degree to which each item may be bothering you in your life, NOT whether the item is merely true for you. If you feel that a particular item is not a bother or a problem for you, you would circle "1." If it is very bothersome to you, you might circle "6."

Problems	Not a slight	a Moderate	Somewhat A Serious	A Serious	A Very Serious
----------	--------------	------------	--------------------	-----------	----------------

	Problem	Problem	problem	Problem	Problem	Problem
Emotional burden (ED)						
1. Feeling that diabetes is taking up too much of my mental and physical energy every day.	1	2	3	4	5	6
2. Feeling angry, scared, and/or depressed when I think about living with diabetes.	1	2	3	4	5	6
3. Feeling that diabetes controls my life.	1	2	3	4	5	6
4. Feeling that I will end up with serious long-term complications, no matter what I do.	1	2	3	4	5	6
5. Feeling overwhelmed by the demands of living with diabetes.	1	2	3	4	5	6
Physician-related distress (PD)						
6. Feeling that my doctor doesn't know enough about diabetes and diabetes care.	1	2	3	4	5	6
7. Feeling that my doctor doesn't give me clear enough directions on how to manage my diabetes.	1	2	3	4	5	6
8. Feeling that my doctor doesn't take my concerns seriously enough.	1	2	3	4	5	6
9. Feeling that I don't have a doctor who I can see regularly about my diabetes.	1	2	3	4	5	6
Regimen-related distress (RD)						
10. Feeling that I am not testing my blood sugars frequently enough.	1	2	3	4	5	6
11. Feeling that I am often failing with my diabetes regimen.	1	2	3	4	5	6
12. Not feeling confident in my day-to-day ability to manage diabetes.	1	2	3	4	5	6
13. Feeling that I am not sticking closely enough to a good meal plan.	1	2	3	4	5	6

14. Not feeling motivated to keep up my diabetes self-management.	1	2	3	4	5	6
Interpersonal Distress (ID)						
15. Feeling that friends or family are not supportive enough of my self-care efforts (e.g. planning activities that conflict with my schedule, encouraging me to eat the “wrong” foods).	1	2	3	4	5	6
16. Feeling that friends or family don’t appreciate how difficult living with diabetes can be.	1	2	3	4	5	6
17. Feeling that friends or family don’t give me the emotional support that I would like.	1	2	3	4	5	6

Part V: Clinical Parameters

401	Having diabetes complication	1. Yes 2.No	If yes 1. ----- 2.----- 3----- 4----- 5-----
402	Glycemic Control	1. Controlled 2. Uncontrolled	1. 2. 3.
403	Body Mass Index	1. Normal (18.5 -24.9) 2. Overweight (25-29.9) 3. Obese (>= 30)	

