

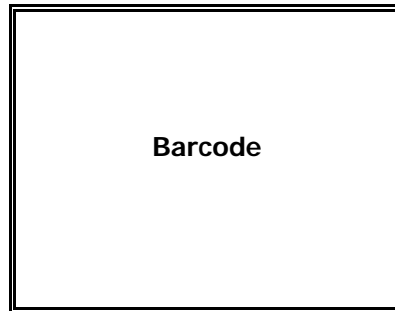


ADDITION Plus Participant ID number:

--	--	--	--	--	--	--	--

DATE:

		/			/				
--	--	---	--	--	---	--	--	--	--



ADDITION *Plus*: Follow-Up Study

ISRCTN99175498

Your views on diabetes and behaviour change

Version 1.4 04-09-08

**Please try to answer all
the questions**

**Your answers will be
treated as confidential
and will only be used for
the study**

This study is supported by the National Institute for Health Research School for Primary Care Research, the Medical Research Council and the University of Cambridge

SECTION A: HABIT

Please indicate how much you agree or disagree with the following statements by circling the appropriate number.

BEING PHYSICALLY ACTIVE IS SOMETHING:		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
A1	I do frequently.	1	2	3	4	5
A2	I do automatically.	1	2	3	4	5
A3	I have been doing for a long time.	1	2	3	4	5
A4	I would find hard not to do.	1	2	3	4	5
A5	That belongs to my (daily, weekly or monthly) routine.	1	2	3	4	5
A6	That would require effort not to do.	1	2	3	4	5
A7	That's typically 'me'.	1	2	3	4	5

EATING A LOW-FAT DIET IS SOMETHING:		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
A8	I do frequently.	1	2	3	4	5
A9	I do automatically.	1	2	3	4	5
A10	I have been doing for a long time.	1	2	3	4	5
A11	I would find hard not to do.	1	2	3	4	5
A12	That belongs to my (daily, weekly or monthly) routine.	1	2	3	4	5
A13	That would require effort not to do.	1	2	3	4	5
A14	That's typically 'me'.	1	2	3	4	5

SECTION A: HABIT Continued

TAKING MY MEDICATION AS PRESCRIBED IS SOMETHING:		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
A15	I do frequently.	1	2	3	4	5
A16	I do automatically.	1	2	3	4	5
A17	I have been doing for a long time.	1	2	3	4	5
A18	I would find hard not to do.	1	2	3	4	5
A19	That belongs to my (daily, weekly or monthly) routine.	1	2	3	4	5
A20	That would require effort not to do.	1	2	3	4	5
A21	That's typically 'me'.	1	2	3	4	5

SECTION B: DIABETES AND YOUR CURRENT HEALTH

We are interested in your own personal views about diabetes.

Please circle a number to indicate how much you agree or disagree with each of the following statements. Please only circle one number per statement.

VIEWS ABOUT YOUR DIABETES		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
B1	My diabetes is a serious condition	1	2	3	4	5
B2	My diabetes has major consequences on my life	1	2	3	4	5
B3	My diabetes does not have much effect on my life	1	2	3	4	5
B4	My diabetes strongly affects the way others see me	1	2	3	4	5
B5	My diabetes has serious financial consequences	1	2	3	4	5
B6	My diabetes causes difficulties for those who are close to me	1	2	3	4	5
B7	There is very little that can be done to improve my diabetes	1	2	3	4	5
B8	My treatment will be effective in curing my diabetes	1	2	3	4	5
B9	The negative effects of my diabetes can be prevented (avoided) by my treatment	1	2	3	4	5
B10	My treatment can control my diabetes	1	2	3	4	5
B11	There is nothing which can help my condition	1	2	3	4	5

SECTION C: BEHAVIOUR CHANGE

We are interested in your views about making changes to your lifestyle (physical activity, healthy eating, stopping smoking if appropriate) and taking medicines **in the next 12 months**.

Please circle a number to indicate how much you agree or disagree with each of the following statements. Please only circle ONE number per statement.

PHYSICAL ACTIVITY		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
C1	I am confident that I could be more physically active in the next 12 months, if I wanted to	1	2	3	4	5
C2	It would be difficult for me to be more physically active in the next 12 months even if I wanted to	1	2	3	4	5
C3	If I was more physically active in the next 12 months, it is likely that my health would improve	1	2	3	4	5
C4	If I was more physically active in the next 12 months, it is likely that I would lose weight	1	2	3	4	5
C5	I intend to be more physically active in the next 12 months	1	2	3	4	5
C6	It is likely that I will be more physically active in the next 12 months	1	2	3	4	5
C7	For me, being more physically active in the next 12 months would be boring	1	2	3	4	5
C8	For me, being more physically active in the next 12 months would be enjoyable	1	2	3	4	5

SECTION C: BEHAVIOUR CHANGE Continued

Please circle a number to indicate how much you agree or disagree with each of the following statements. Please only circle ONE number per statement

DIET		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
C9	I am confident that I could eat a lower fat diet in the next 12 months, if I wanted to	1	2	3	4	5
C10	It would be difficult for me to eat a lower fat diet in the next 12 months even if I wanted to	1	2	3	4	5
C11	If I did eat a lower fat diet in the next 12 months, it is likely that my health would improve	1	2	3	4	5
C12	If I did eat a lower fat diet in the next 12 months, it is likely that I would lose weight	1	2	3	4	5
C13	I intend to eat a lower fat diet in the next 12 months	1	2	3	4	5
C14	It is likely that I will eat a lower fat diet in the next 12 months	1	2	3	4	5
C15	For me, eating a lower fat diet in the next 12 months would be boring	1	2	3	4	5
C16	For me, eating a lower fat diet in the next 12 months would be enjoyable	1	2	3	4	5

SECTION C: BEHAVIOUR CHANGE Continued

TAKING MEDICINES

C17. Are you taking any medicines (tablets) prescribed by your doctor?

Yes → Please answer questions 18 to 22 below.

No → Please go straight to question 23 over the page.

Please circle a number to indicate how much you agree or disagree with each of the following statements. Please only circle one number per statement

MEDICINES		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
C18	I am confident that I could take all my medicines regularly as prescribed in the next 12 months, if I wanted to	1	2	3	4	5
C19	It would be difficult for me to take all my medicines regularly as prescribed in the next 12 months even if I wanted to	1	2	3	4	5
C20	If I were to take all my medicines regularly as prescribed in the next 12 months, it is likely that my health would improve	1	2	3	4	5
C21	I intend to take all my medicines regularly as prescribed in the next 12 months	1	2	3	4	5
C22	It is likely that I will take all my medicines regularly as prescribed in the next 12 months	1	2	3	4	5

SECTION C: BEHAVIOUR CHANGE Continued

SMOKING

C23. Do you smoke?

Yes → Please answer **all** questions below.

No → Please go straight to **question 29** below.

Please circle a number to indicate how much you agree or disagree with each of the following statements. Please only circle one number per statement

SMOKING		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
C24	I am confident that I could stop smoking completely in the next 12 months, if I wanted to	1	2	3	4	5
C25	It would be difficult for me to stop smoking completely in the next 12 months even if I wanted to	1	2	3	4	5
C26	If I stopped smoking completely in the next 12 months, it is likely that my health would improve	1	2	3	4	5
C27	I intend to stop smoking completely in the next 12 months	1	2	3	4	5
C28	It is likely that I will stop smoking completely in the next 12 months	1	2	3	4	5

		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
C29	If I was able to follow a healthy lifestyle for at least 12 months, it is likely that my health would improve in the short term	1	2	3	4	5
C30	If I was able to follow a healthy lifestyle for at least 12 months, it is likely that my health would improve in the long term	1	2	3	4	5

SECTION D: SATISFACTION WITH BEHAVIOUR CHANGE

We would like to know how satisfied you are about any changes you may have made to adopt a healthier lifestyle (e.g., increasing your activity levels, healthy eating, taking medication, and stopping smoking if appropriate) since you were diagnosed with diabetes.

For question 1 below please indicate how much you agree or disagree with the statement by circling a number. Please only circle ONE number per question.

		Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
D1	I have put a lot of effort into adopting a healthier lifestyle since my diabetes was diagnosed	1	2	3	4	5

For each of the questions below please indicate how satisfied or dissatisfied you are by circling a number. Please only circle ONE number per question.

		Very Dis-satisfied	Dis-satisfied	Neither satisfied nor dis-satisfied	Satisfied	Very satisfied
D2	Given the effort that you have put into adopting a healthier lifestyle, how satisfied are you with your progress?	1	2	3	4	5
D3	How satisfied are you with what you have experienced as a result of adopting a healthier lifestyle?	1	2	3	4	5
D4	How satisfied are you about how healthy your lifestyle is now?	1	2	3	4	5

SECTION E: YOUR MEDICATION

- Many people find a way of using their medicines or pills which suits them.
- This may differ from the instructions on the label or what their doctor has said.
- We would like to ask you a few questions about how you use your medicines or pills.
- Here are some ways in which other people have said they use their medicines.

If you indicated in question 17 (Section C, pg 7) that you currently take any medicines, please answer the questions below.

If you indicated in question 17 that you do not take any medicines, you do not need to answer the questions below. Thank you for completing this questionnaire.

For each of the statements, please circle the number that best describes how you have used your medicines or pills in the **last month**.

There are no right or wrong answers. We are interested in your personal views.

QUESTIONS ABOUT USING MEDICINES PRESCRIBED FOR YOU

Please circle ONE number per statement.

In relation to the last month:		Always	Often	Some-times	Rarely	Never
E1	I forgot to take my medicines	1	2	3	4	5
E2	I altered the dose of my medicines	1	2	3	4	5
E3	I stopped taking my medicines for a while	1	2	3	4	5
E4	I decided to miss out a dose	1	2	3	4	5
E5	I took less than instructed	1	2	3	4	5

Thank you for completing this questionnaire