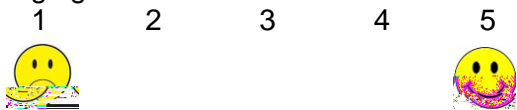
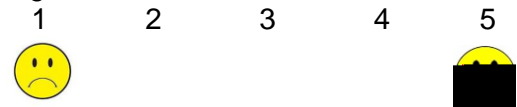


1. How confident have you felt with:  
 (1= not confident at all 5= very confident)

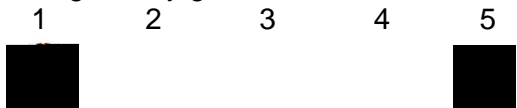
Managing Blood Glucose levels



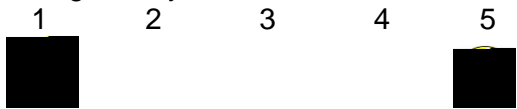
Taking Medication



Achieving dietary goals

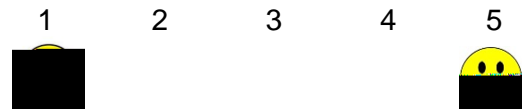


Achieving activity Goals

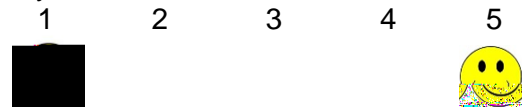


2. How are you coping with your diabetes and:  
 (1=very badly, 5 = really well);

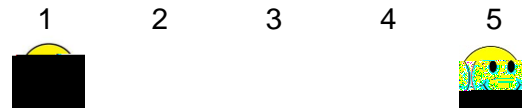
School / Education / Work



Family Life:



Friends and Social Life



Activities and Hobbies

