Using the

Diabetes Distress Scale

Why Bother?

Diabetes distress focuses on the emotional distress linked directly to diabetes. It is much more common than symptoms of depression and much more directly related to diabetes management. Diabetes distress tends to cluster around diabetes itself (emotional burden and regimen distress) and people impacted by diabetes (providers as well as family and friends).

Your Role

Screening for diabetes distress does not mean that it becomes your job to reduce the distress. The person with diabetes will benefit if you establish a collaborative relationship, use reflections and empathy, and encourage self-management and empowerment.

Administer 2-Item Screener from the Diabetes Distress Scale



No further action this visit



Administer full DDS

Use these 4 easy steps:



The items of the scale can be seen as a template to an interview, or a form of guided discovery.



1. ASK Ask permission to explore sources of Diabetes Distress.

"Do you mind if we talk about (insert source of diabetes distress)?"



2. INTRODUCE Introduce each scale by name.

"I have a scale that I'd like to use to help me understand what you're experiencing. The first one is called *Feeling Overwhelmed by the Demands of Living with Diabetes.*"



3. APPLY Use a digital or printed copy of the scale to show to your client. Ask if any of the items are a source of distress for him or her. This will help you understand his or her experience.

"Using this scale (show scale), pick a number that best reflects how much of a problem the following have been (read distress statement)."



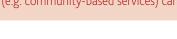
4. INTERPRET Determine if the stress is diabetes-specific, due to a mental health disorder, or related to problems of living.

Diabetes-specific distress Distress management should occur through diabetes care, support, and management.

Mental health disorder distress Referral to a mental health professional is appropriate if distress is due to a mental health disorder or not related to diabetes.

Refer to CDA's "Steps to Stress Management" handout for more information on what to do next

Problems of living distress General stress management or other support (e.g. community-based services) can be used.





Diabetes Distress Scale (DDS)

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 problem areas that people with diabetes may experience. Consider the degree to which each of the 17 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".

| | Not a Problem | A Slight Problem | A Moderate Problem | Somewhat Serious Problem | A Serious Problem | A Very Serious Problem |
|---|------------------|---------------------|--------------------------|--------------------------------|----------------------|------------------------------|
| 1. Feeling that my doctor doesn't know enough about diabetes and diabetes care. | 1 | 2 | 3 | 4 | 5 | 6 |
| 2. Feeling that diabetes is taking up too much of my mental and physical energy every day. | 1 | 2 | 3 | 4 | 5 | 6 |
| 3. Not feeling confident in my day-to-day ability to manage diabetes. | 1 | 2 | 3 | 4 | 5 | 6 |
| 4. Feeling angry, scared and/or depressed when I think about living with diabetes. | 1 | 2 | 3 | 4 | 5 | 6 |
| 5. Feeling that my doctor doesn't give me clear enough directions on how to manage my diabetes. | 1 | 2 | 3 | 4 | 5 | 6 |
| 6. Feeling that I am not testing my blood sugars frequently enough. | 1 | 2 | 3 | 4 | 5 | 6 |
| 7. Feeling that I will end up with serious long-term complications, no matter what I do. | 1 | 2 | 3 | 4 | 5 | 6 |
| 8. Feeling that I am often failing with my diabetes routine. | 1 | 2 | 3 | 4 | 5 | 6 |

| | Not a Problem | A Slight Problem | A Moderate Problem | Somewhat Serious Problem | A Serious Problem | A Very Serious Problem |
|--|------------------|---------------------|--------------------------|--------------------------------|----------------------|------------------------------|
| 9. Feeling that friends or family are not supportive enough of 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 |
| 10. Feeling that diabetes controls my life. | 1 | 2 | 3 | 4 | 5 | 6 |
| 11. Feeling that my doctor doesn't take my concerns seriously enough. | 1 | 2 | 3 | 4 | 5 | 6 |
| 12. Feeling that I am not sticking closely enough to a good meal plan. | 1 | 2 | 3 | 4 | 5 | 6 |
| 13. Feeling that friends or family don't appreciate how difficult living with diabetes can be. | 1 | 2 | 3 | 4 | 5 | 6 |
| 14. Feeling overwhelmed by the demands of living with diabetes. | 1 | 2 | 3 | 4 | 5 | 6 |
| 15. Feeling that I don't have a doctor who I can see regularly enough about my diabetes. | 1 | 2 | 3 | 4 | 5 | 6 |
| 16. Not feeling motivated to keep up my diabetes self management. | 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 |

DDS17 SCORING SHEET

INSTRUCTIONS FOR SCORING:

The DDS17 yields a total diabetes distress score plus 4 subscale scores, each addressing a different kind of distress.¹ To score, simply sum the patient's responses to the appropriate items and divide by the number of items in that scale.

Current research² suggests that a mean item score 2.0 - 2.9 should be considered 'moderate distress,' and a mean item score ≥ 3.0 should be considered 'high distress.' Current research also indicates that associations between DDS scores and behavioral management and biological variables (e.g., A1C) occur with DDS scores of ≥ 2.0 . Clinicians may consider moderate or high distress worthy of clinical attention, depending on the clinical context.

We also suggest reviewing the patient's responses across all items, regardless of mean item scores. It may be helpful to inquire further or to begin a conversation about any single item scored ≥ 3 .

| Total DDS Score: | a. Sum of 17 item scores. | | | |
|----------------------------|--|------|-----|----|
| | b. Divide by: | 17 | | |
| | c. Mean item score: | | | |
| | Moderate distress or greater? (mean item score | > 2) | yes | no |
| A. Emotional Burden: | a. Sum of 5 items (2, 4, 7, 10, 14) | | | |
| | b. Divide by: | 5 | | |
| | c. Mean item score: | | | |
| | Moderate distress or greater? (mean item score | > 2) | yes | no |
| B. Physician Distress: | a. Sum of 4 items (1, 5, 11, 15) | | | |
| | b. Divide by: | 4 | | |
| | c. Mean item score: | | | |
| | Moderate distress or greater? (mean item score | > 2) | yes | no |
| C. Regimen Distress: | a. Sum of 5 items (6, 8, 3, 12, 16) | | | |
| | b. Divide by: | 5 | | |
| | c. Mean item score: | | | |
| | Moderate distress or greater? (mean item score | > 2) | yes | no |
| D. Interpersonal Distress: | a. Sum of 3 items (9, 13, 17) | | | |
| | b. Divide by: | 3 | | |
| | c. Mean item score: | | | |
| | Moderate distress or greater? (mean item score | > 2) | Ves | no |

^{1.} Polonsky, W.H., Fisher, L., Esarles, J., Dudl, R.J., Lees, J., Mullan, J.T., Jackson, R. (2005). Assessing psychosocial distress in diabetes: Development of the Diabetes Distress Scale. <u>Diabetes Care</u>, 28, 626-631.

^{2.} Fisher, L., Hessler, D.M., Polonsky, W.H., Mullan, J. (2012). When is diabetes distress clinically meaningful? Establishing cut-points for the Diabetes Distress Scale. Diabetes Care, 35, 259-264.