INTRODUCTION

Diabetes is a "group of diseases marked by high levels of blood glucose resulting from defects in insulin production, insulin action, or both" ***(CDC, 2011).*** Diabetes is a significant public health problem ***(Latachan et al., 2010)***. It has been termed an epidemic, as the prevalence has skyrocketed ***(Mainous et al., 2007)***.

Type 2 diabetes is among the most devastating of all chronic illnesses. It accounts for 90-95% of all diabetics and is increasing at an alarming rate ***(Narayan et al., 2006).*** By definition, type 2 diabetes is a metabolic disorder characterized by chronically high plasma glucose or hyperglycemia. The hyperglycemia occurs and persists due to problems with insulin; the amount available, the body's inability to use it correctly, or both. In addition there are problems with fat, carbohydrate and protein metabolism ***(Bennett & Knowler, 2005).***

The disorder develops gradually progressing through various stages of insulin resistance. There are often no symptoms present, and approximately 7 million out of the 25.8 million people in the U.S. with diabetes walk around unaware that they are affected. Left unchecked, type 2 diabetes will cause a domino-like effect of very serious and life altering complications throughout the body. Some of the more common complications include macro-vascular problems which include heart attack and stroke as well as the micro-vascular complications of kidney disease, retinal disease, and peripheral neuropathy which can lead to unhealed sores, serious infections, and amputations ***[National Institutes of Diabetes and Digestive and Kidney Diseases (NIDDK), 2011].***

In order to avoid the complications mentioned above, the type 2 diabetic must undertake a treatment regimen which requires pervasive

changes in lifestyle. These include strict adherence to a healthy diet, daily exercise and medication use as well as self monitoring of blood glucose levels (SMBG) and stringent medical follow up. Ultimately, most of the burden of management falls to the patient ***(ADA, 2011b).***

Self efficacy is one of the most critical aspects of successfully developing and applying problem-solving to diabetes-related barriers over a lifespan. Self-efficacy; a person's belief in his or her own ability to successfully perform the tasks involved in diabetes self-management ***(Bandura, 1997).*** Self efficacy has been noted to be an important influential factor related to successful diabetes self-management and has been found to be positively correlated with the performance of self-management behaviors ***(Sousa, et al., 2005).***

The aim of diabetes care is to return the patient to as close a non-diabetic state as is safe and practical for that particular person. There is a clear evidence that good diabetes care reduces diabetic tissue damage ***(Hillson, 2008).*** The "ABCs" of managing diabetes are HbA1c, blood pressure control, and cholesterol management ***(Deeg, 2005).***

The educational program for diabetic patients has several roles; the simplest one is to enable patients to perform the self management aspects of their treatment program. This involves education skills, teaching patients how to follow their diets, administer their medications, and monitor their glucose control ***(Lewis et al., 2007).*** Moreover, health educational programs provide guidance about managing type 2 diabetes for people with diabetes and the whole range of clinical staff who work in primary and secondary care; that is to maximize the potential for reducing complications and improving the quality of life of people with the disease ***(WHO, 2003).***