The purpose of this comparative study was to investigate the effect of coaching, as a nursing intervention, on comfort levels and blood sugar levels of individuals with diabetes. The hypothesis of the study was that individuals with diabetes who received coaching at specified intervals of time would have higher levels of comfort, as measured by the Diabetes Mellitus Comfort Questionnaire (DMCQ), and lower blood sugar levels, as recorded on the individual’s personal glucometer, than individuals with diabetes who did not receive coaching. Prior to conducting the study, approval of the university review board and hospitals was obtained. Participants were solicited from two accredited hospital-based diabetic education programs in a Midwestern city. Participation in the study was voluntary. The participants solicited from one hospital-based diabetic education program received coaching as a nursing intervention throughout the study while the participants from the other hospital-based diabetic education program did not. The participants were enrolled in the study the last day of the diabetic education program and completed a demographic data form, the DMCQ, and the Self Care Inventory-
Revised (SCI-R) to measure compliance. They also documented the average of their daily blood sugar levels from the past seven days as recorded on their personal glucometer. Two and four weeks after enrolling in the study participants from each group repeated the process of completing the DMCQ, the SCI-R, and documenting the average daily blood sugar levels over the past seven days as recorded on their glucometers. One hospital-based diabetic education group received coaching from the researcher via a telephone call two and four weeks after completing the formal diabetic education program and prior to completing the DMCQ, the SCI-R, and documenting their average daily blood sugar from the next seven days. Confidentiality of data collected from the participants was maintained. There was no risk of harm. Of the participants enrolled in the study, there were 30 participants who completed the study for one group and 35 participants who completed the study for the other group. Analysis of variance was used to analyze the data. Results showed no significant difference in comfort levels, compliance scores, or blood sugar levels between the two groups. The hypothesis of the study was not supported. Nonetheless, the information obtained from this study is valuable to nursing by contributing to the growing body of knowledge for developing cost-effective education and supportive strategies for individuals with diabetes to manage their condition.