STEPS Mapped Instrument
& Dataset Structure
for DRC (Ville-Province de Kinshasa), 2005

Prepared by (including date and contact information):

Respondent Identification, Location and Date

| Location and Date | | | Response | | Code (variable name) | | Data Type | |
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
--	--	Respondent Identification	1-999999		ID	repondant	Numeric	Numeric
1	--	District code (Strate code)	1-999		I1	I2	Numeric	Numeric
2	--	Centre/Village name	Text		I2	--	Text	--
3	--	Centre/Village code (Quartier code)	1-999		I3	I3	Numeric	Numeric
4	--	Interviewer Identification	1-999		I4	I4a	Numeric	
5	--	Date of completion of the instrument	Value entered as date dd/mm/yyyy		I5	datesurv	Date/Time	
Country-Specific Questions								
--	--	Nom et code du pays		243	X1	I1		Numeric
--	--	Nom et code de la province		1	X2	I1a		Numeric
--	--	Numéro de la ménage dans la grappe/quartier			X3	I3b		Numeric
--	--	Nom et code du superviseur		1-12	X4	I4		Numeric
--	--	Nom et code agent de saisie		2-6	X5	I4b		Numeric
--	--	(used datesurv for I5 as more complete)			OLDi5	I5		Numeric

Consent, Interview Language and Name

Consent, Interview Language and Name			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
6	--	Consent has been read out to participant	1 Yes 2 No 77 Don't Know 88 Not applicable 99 Missing		I6	--	Numeric	--
7	--	Consent has been obtained (verbal or written)	1 Yes 2 No		I7	I7	Numeric	Numeric
8	--	Interview Language [Insert Language]	1 English 2 [Add others] 3 [Add others] 4 [Add others]	1 Lingala 2 Kikongo 3 Swahili 4 Tshiluba 5 Français 6 Autres à spécidier	I8	I8	Numeric	Numeric
9	--	Time of interview (24 hour clock)	Numeric, entered as date hh:mm		I9	I9h I9m	Numeric	
10	--	Family Name	Text		I10	I10	Not entered	
11	--	First Name	Text		I11	I11	Not entered	
12	--	Contact phone number where possible	Text		I12	I12	Not entered	

Consent, Interview Language and Name, Continued

Consent, Interview Language and Name			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
13	--	Specify whose phone	1 Work 2 Home 3 Neighbour 4 Other (specify) Text- Other		I13 I13other	I13	Not entered	

Step 1: Demographic Information

STEP 1: Demographic Information			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
14	--	Sex (*Record Male / Female as observed*)	1 Male 2 Female		C1	C1	Numeric	Numeric
15	--	What is your date of birth? *Don't Know 77 777 7777*	Value entered as date dd/mm/yyyy		C2	C2	Date/Time	Date/Time
16	--	How old are you?	25-64	15+	C3	C3	Numeric	Numeric
17	--	In total, how many years have you spent at school or in full-time study (excluding pre-school)?	0-22 77 Don't know 88 Refused 99 Missing		C4	C4	Numeric	Numeric
18	--	What is your [*insert relevant ethnic group / racial group / cultural subgroup / others*] <u>background</u>?	1 [*Locally defined*] 2 [*Locally defined*] 3 [*Locally defined*] 88 Refused 99 Missing	List not printed on questionnaire, available separately 1-6, 8, 12	C5	C5	Numeric	Numeric
19	--	What is the highest level of education you have completed?	1 No formal schooling 2 Less than primary school 3 Primary school completed 4 Secondary school completed 5 High school completed 6 College/University completed 7 Post graduate degree 77 Don't know 88 Refused 99 Missing	1 Aucune instruction officielle 2 Moins que l'école primaire 3 Fin de l'école primaire 4 Fin de l'école secondaire 6 Ecole supérieure, Université 7 Diplôme post-universitaire obtenu 8 Pas terminé l'école secondaire	C6	C6	Numeric	Numeric

Step 1: Demographic Information, Continued

STEP 1: Demographic Information			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
20	--	Which of the following best describes your <u>main</u> work status over the last 12 months?	1 Government employee 2 Non-government employee 3 Self-employed 4 Non-paid 5 Student 6 Homemaker 7 Retired 8 Unemployed (able to work) 9 Unemployed (unable to work) 77 Don't know 88 Refused 99 Missing		C7	C7	Numeric	Numeric
21	--	How many people older than 18 years, including yourself, live in your household?	0-25 77 Don't Know 88 Refused 99 Missing		C8	--	Numeric	--
22	--	Taking the past year, can you tell me what the average earnings of the household have been?	Per week: 1-9999999 / 7777777 DK Per month: 1-9999999 / 7777777 DK Per year: 1-9999999 / 7777777 DK 88 Refused		C9a C9b C9c C9d	--	Numeric	--

STEP 1: Demographic Information			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
23	--	If you don't know the amount, can you give an **estimate** of the annual household income if I read some options to you? Is it	1 ≤ Quintile (Q) 1 2 More than Q 1, ≤ Q 2 3 More than Q 2, ≤ Q 3 4 More than Q 3, ≤ Q 4 5 More than Q 4 77 Don't Know 88 Refused 99 Missing		C10	--	Numeric	--
Country-Specific Questions								
--	--	Situation matrimoniale		1 Célibataire 2 Marié polygame 3 Marié monogame 4 Divorcé / Séparé 5 Veuf / Veuve 6 Union libre	X6	C11	--	Numeric

Step 1: Tobacco Use

STEP 1: Tobacco Use			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
24	--	Do you currently smoke any **tobacco products**, such as cigarettes, cigars or pipes?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		T1	T1	Numeric	Numeric
25	--	**If Yes,** Do you currently smoke tobacco products **daily**?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		T2	T2	Numeric	Numeric
26	--	How old were you when you **first started** smoking daily?	8-64 77 Don't Know 88 No Applicable 99 Missing		T3	T3	Numeric	Numeric
27		Do you remember how long ago it was?	1-55 (years) 77 Don't Know 88 No Applicable 99 Missing		T4a	T4a	Numeric	Numeric
	--		1-24 (months) 77 Don't Know 88 No Applicable 99 Missing		T4b	T4b	Numeric	Numeric
			1-48 (weeks) 77 Don't Know 88 No Applicable 99 Missing		T4c	T4c	Numeric	Numeric

Step 1: Tobacco Use, Continued

STEP 1: Tobacco Use			Response			Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic		Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
28	--	On average, **how many** of the following do you smoke each day?	Manufactured cigarettes	1-50		T5a	T5a	Numeric	Numeric
				77 Don't know					
				88 Refused					
				99 Missing					
			Hand-rolled cigarettes	1-50		T5b	T5b	Numeric	Numeric
				77 Don't know					
				88 Refused					
				99 Missing					
			Pipes full of tobacco	1-50		T5c	T5c	Numeric	Numeric
				77 Don't know					
				88 Refused					
				99 Missing					
			Cigars, cheroots, cigarillos	1-50		T5d	T5d	Numeric	Numeric
				77 Don't know					
				88 Refused					
				99 Missing					
			Other	1-50		T5e	T5e	Numeric	Numeric
				77 Don't know					
				88 Refused					
				99 Missing					
			Other (please specify):	Text		T5other	--	Text	--

Step 1: Tobacco Use, Continued

STEP 1: Tobacco Use			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
29	--	In the past, did you **ever** smoke **daily**?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		T6	T6	Numeric	Numeric
30	--	**If Yes,** How old were you when you **stopped** smoking **daily**?	10-64 77 Don't Know 88 Refused 99 Missing		T7	T7	Numeric	Numeric
31	--	How **long ago** did you stop smoking daily?	1-54 (years) 77 Don't Know 88 No Applicable 99 Missing		T8a	T8a	Numeric	Numeric
			1-24 (months) 77 Don't Know 88 No Applicable 99 Missing		T8b	T8b	Numeric	Numeric
			1-48 (weeks) 77 Don't Know 88 No Applicable 99 Missing		T8c	T8c	Numeric	Numeric
32	--	Do you **currently use** any **smokeless tobacco** such as [*snuff, chewing tobacco, betel*]?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		T9	T9	Numeric	Numeric

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Step 1: Tobacco Use, Continued

STEP 1: Tobacco Use			Response			Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic		Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
33	--	<u>If Yes,</u> **Do you** currently use smokeless tobacco **products** daily?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing			T10	T10	Numeric	Numeric
34	--	On average, how many **times a day** do you use ….	Snuff, by mouth	1-50 77 Don't know 88 Refused 99 Missing		T11a	T11a	Numeric	Numeric
			Snuff, by nose	1-50 77 Don't know 88 Refused 99 Missing		T11b	T11b	Numeric	Numeric
			Chewing tobacco	1-50 77 Don't know 88 Refused 99 Missing		T11c	T11c	Numeric	Numeric
			Betel, quid	1-50 77 Don't know 88 Refused 99 Missing		T11d	--	Numeric	--
			Other	1-50 77 Don't know 88 Refused 99 Missing		T11e	T11e	Numeric	Numeric
			Other (please specify):	Text		T11other	--	Text	--

Step 1: Tobacco Use, Continued

STEP 1: Tobacco Use			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
35	--	In the past, did you **ever use** smokeless tobacco such as [*snuff, chewing tobacco, or betel*] **daily**?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		T12	T12	Numeric	Numeric

Step 1: Alcohol Use

STEP 1: Alcohol Use			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
36	--	Have you consumed alcohol (such as beer, wine, spirits, fermented cider or *[add other local examples]* within the **past 12 months**?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		A1	A1b	Numeric	Numeric
37	--	In the past 12 months, **how frequently** have you had at least one drink?	1 (Daily) 2 (5-6 days per week) 3 (1-4 days per week) 4 (1-3 days per month) 5 (Less than once a month) 77 Don't Know 88 Refused 99 Missing	1 5 jours ou plus/semaine 2 1 à 4 jours / semaine 3 1 à 3 jours / mois 4 Moins d'1 fois / mois	A2	A2	Numeric	Numeric
38	--	When you drink alcohol, **on average**, how many drinks do you have during one day?	Number 1-50 77 Don't Know 88 Refused / NA 99 Missing		A3	A3	Numeric	Numeric
39	--	Have you consumed alcohol (such as beer, wine, spirits, fermented cider or *[add other local examples]* within the **past 30 days**?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		A4	--	Numeric	--

STEP 1: Alcohol Use			Response			Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic		Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
40	--	During each of the **past 7 days**, how many standard drinks of any alcoholic drink did you have each day?	Monday	1-50 77 Don't know 88 Refused 99 Missing		A5a	A5a	Numeric	Numeric
			Tuesday	1-50 77 Don't know 88 Refused 99 Missing		A5b	A5b	Numeric	Numeric
			Wednesday	1-50 77 Don't know 88 Refused 99 Missing		A5c	A5c	Numeric	Numeric
			Thursday	1-50 77 Don't know 88 Refused 99 Missing		A5d	A5d	Numeric	Numeric
			Friday	1-50 77 Don't know 88 Refused 99 Missing		A5e	A5e	Numeric	Numeric
			Saturday	1-50 77 Don't know 88 Refused 99 Missing		A5f	A5f	Numeric	Numeric
			Sunday	1-50 77 Don't know 88 Refused 99 Missing		A5g	A5g	Numeric	Numeric

STEP 1: Alcohol Use			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
41		In the past 12 months, what was the **largest number** of drinks you had on a single occasion, counting all types of standard drinks together?	1-50 77 Don't Know 88 Refused / NA 99 Missing		A6	--	Numeric	--
42		**For men only:** In the past 12 months, on how many days did you have **five or more** standard drinks in a single day?	1-365 777 Don't Know 888 Refused / NA 999 Missing		A7	--	Numeric	--
43		**For women only**: In the past 12 months, on how many days did you have **four or more** standard drinks in a single day?	1-365 777 Don't Know 888 Refused / NA 999 Missing		A8	--	Numeric	--
Country-Specific Questions								
		Avez-vous **déjà consommé** une boisson alcoolisée comme de la bière, du vin, de la liqueur, du vin de palme, lotoko, lunguila?		1 Oui 2 Non	X7	A1a	Numeric	Numeric

Step 1: Diet

STEP 1: Diet			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
44		In a typical week, on how many days do you **eat fruit**?	Days 0-7 9 Missing		D1	D1a	Numeric	Numeric
45		How many **servings** of fruit do you eat on **one** of those days?	Number 1-15 77 Don't Know 88 Refused / NA 99 Missing		D2	D1b	Numeric	Numeric
46		In a typical week, on how many days do you **eat vegetables**?	Days 0-7 99 Missing		D3	D2a	Numeric	Numeric
47		How many **servings** of vegetables do you eat on one of those days?	Number 1-15 77 Don't Know 88 Refused / NA 99 Missing		D4	D2b	Numeric	Numeric
48		What type of **oil or fat is most often** used for meal preparation in your household?	1 Vegetable oil 2 Lard or suet 3 Butter or ghee 4 Margarine 5 Other 6 None in particular 7 None used 77 Don't know 99 Missing		D5	D3	Numeric	Numeric
			Other (please specify): Text		D5other	--	Text	--

Step 1: Physical Activity

STEP 1: Physical Activity			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
Activity at work								
49		Does your work involve vigorous-intensity activity that causes large increases in breathing or heart rate like *[carrying or lifting heavy loads, digging or construction work]* for at least 10 minutes continuously?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		P1	P2	Numeric	Numeric
50		In a typical week, on how many days do you do vigorous-intensity activities as part of your work?	Days 1-7 99 Missing		P2	P3a	Numeric	Numeric
51		How much time do you spend doing vigorous-intensity activities at work on a typical day?	Hours 1-24 77 Don't Know 99 Missing		P3A	P3b	Numeric	Numeric
			Minutes 1-60 77 Don't Know 99 Missing		P3B	P3b	Numeric	Numeric
52		Does your work involve moderate-intensity activity, that causes small increases in breathing or heart rate such as brisk walking *[or carrying light loads]* for at least 10 minutes continuously?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		P4	P4	Numeric	Numeric
53		In a typical week, on how many days do you do moderate-intensity activities as part of your work?	Days 1-7 99 Missing		P5	P5a	Numeric	Numeric
54		How much time do you spend doing moderate-intensity activities at work on a typical day?	Hours 1-24 77 Don't Know 99 Missing		P6A	P5b	Numeric	Numeric
			Minutes 1-60 77 Don't Know 99 Missing		P6B	P5b	Numeric	Numeric

Step 1: Physical Activity, Continued

STEP 1: Physical Activity			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
Travel to and from places								
55		Do you walk or use a bicycle (*pedal cycle*) for at least 10 minutes continuously to get to and from places?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		P7	P7	Numeric	Numeric
56		In a typical week, on how many days do you walk or bicycle for at least 10 minutes continuously to get to and from places?	Days 1-7 99 Missing		P8	P8a	Numeric	Numeric
57		How much time do you spend walking or bicycling for travel on a typical day?	Hours 1-24 77 Don't Know 99 Missing		P9a	P8b	Numeric	Numeric
			Minutes 1-60 77 Don't Know 99 Missing		P9b	P8b	Numeric	Numeric
Recreational activities								
58		Do you do any vigorous-intensity sports, fitness or recreational (*leisure*) activities that cause large increases in breathing or heart rate like [*running or football,*] for at least 10 minutes continuously?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		P10	P10	Numeric	Numeric
59		In a typical week, on how many days do you do vigorous-intensity sports, fitness or recreational (*leisure*) activities?	Days 1-7 99 Missing		P11	P11a	Numeric	Numeric
60		How much time do you spend doing vigorous-intensity sports, fitness or recreational activities on a typical day?	Hours 1-24 77 Don't Know 99 Missing		P12a	P11b	Numeric	Numeric
			Minutes 1-60 77 Don't Know 99 Missing		P12b	P11b	Numeric	Numeric

Step 1: Physical Activity, Continued

STEP 1: Physical Activity			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
Recreational activities								
61		Do you do any moderate-intensity sports, fitness or recreational *(leisure)* activities that causes a small increase in breathing or heart rate such as brisk walking,*(cycling, swimming, volleyball)*for at least 10 minutes continuously?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		P13	P12	Numeric	Numeric
62		In a typical week, on how many days do you do moderate-intensity sports, fitness or recreational *(leisure)* activities?	Days 1-7 99 Missing		P14	P13a	Numeric	Numeric
63		How much time do you spend doing moderate-intensity sports, fitness or recreational *(leisure)* activities on a typical day?	Hours 1-24 77 Don't Know 99 Missing		P15a	P13b	Numeric	Numeric
			Minutes 1-60 77 Don't Know 99 Missing		P15b	P13b	Numeric	Numeric
Sedentary behaviour								
64		How much time do you usually spend sitting or reclining on a typical day?	Hours 1-24 77 Don't Know 99 Missing		P16a	P14	Numeric	Numeric
			Minutes 1-60 77 Don't Know 99 Missing		P16b	P14	Numeric	Numeric

Step 1: Physical Activity, Continued

STEP 1: Physical Activity			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
Country-Specific Questions								
--	--	Est-ce que votre travail s'effectue la plupart du temps en position assise oudebout, sans marcher plus de 10 minutes d'affilée?		1 Oui 2 Non	GPAQ1P1	P1a	Numeric	Numeric
--	--	P3 a and b in minutes only		Time in minutes	X8	P3 min only	Numeric	Numeric
--	--	P6 a and b in minutes only		Time in minutes	X9	P6 in min only	Numeric	Numeric
--	--	Combien de temps dure habituellement une de vos journées de travail?		Time in hrs	GPAQ1P6	P6	Numeric	Numeric
--	--	P9 a and b in minutes only		Time in minutes	X10	P9 in min only	Numeric	Numeric
--	--	Durant votre temps libre, êtes-vous la plupart du temps n position assise, couchée, ou deoubt, sans activité Durant au moins 10 minutes d'affilée?		1 Oui 2 Non	GPAQ1P9	P9	Numeric	Numeric
--	--	P12 a and b in minutes only		Time in minutes	X11	P12 min only	Numeric	Numeric
--	--	P15 a and b in minutes only		Time in minutes	X12	P15 in min only	Numeric	Numeric
--	--	P16 a and b in minutes only		Time in minutes	X13	P16 in min only	Numeric	Numeric

Step 1: History of Raised Blood Pressure

STEP 1: History of Raised Blood Pressure			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
65	--	When was your blood pressure last measured by a health professional?	1 Within past 12 months 2 (1-5 years ago) 3 Not within past 5 years 77 Don't Know 88 Refused 99 Missing		H1	H1	Numeric	Numeric
66	--	During the past 12 months have you been told by a doctor or other health worker that you have raised blood pressure or hypertension?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H2	H2	Numeric	Numeric
67	--	**Are you currently receiving any of the following treatments/advice for high blood pressure prescribed by a doctor or other health worker?**						
		Drugs (medication) that you have taken in the last 2 weeks	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H3a	H3a	Numeric	Numeric
		Special prescribed diet	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H3b	H3b	Numeric	Numeric
		Advice or treatment to lose weight	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H3c	H3c	Numeric	Numeric

Step 1: History of Raised Blood Pressure, Continued

STEP 1: History of Raised Blood Pressure			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
67cont.	--	Advice or treatment to stop smoking	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H3d	H3d	Numeric	Numeric
		Advice to start or do more exercise	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H3e	H3e	Numeric	Numeric
68	--	During the past 12 months have you seen a traditional healer for raised blood pressure or hypertension	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H4	H4	Numeric	Numeric
69	--	Are you currently taking any herbal or traditional remedy for your raised blood pressure?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H5	H5	Numeric	Numeric
Country-Specific Questions								
--	--	Suivez-vous actuellement les traitements suivants, prescrits par un professionnel de la santé, pour une tension artérielle élevée?		1 Oui 2 Non	X14	H3	Numeric	Numeric

Step 1: History of Diabetes

STEP 1: History of Diabetes			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
70	--	Have you had your blood sugar measured in the last 12 months?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H6	H6	Numeric	Numeric
71	--	~~During the past 12 months,~~ have you ever been told by a doctor or other health worker that you have diabetes?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H7	H7	Numeric	Numeric
72	--	Are you currently receiving any of the following treatments/advice for diabetes prescribed by a doctor or other health worker?						
		Insulin	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H8a	H8a	Numeric	Numeric
		Oral drug (medication) that you have taken in the last 2 weeks	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H8b	H8b	Numeric	Numeric
		Special prescribed diet	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H8c	H8c	Numeric	Numeric
		Advice or treatment to lose weight	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H8d	H8d	Numeric	Numeric

Continued on next page

Step 1: History of Diabetes, Continued

STEP 1: Diabetes			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
72 cont.	--	Advice or treatment to stop smoking	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H8e	H8e	Numeric	Numeric
		Advice to start or do more exercise	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H8f	H8f	Numeric	Numeric
73	--	During the past 12 months have you seen a traditional healer for diabetes?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H9	H9	Numeric	Numeric
74	--	Are you currently taking any herbal or traditional remedy for your diabetes?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		H10	H10	Numeric	Numeric
Country-Specific Questions								
--	--	Suivez-vous actuellement les traitements suivants, prescrits par un professionnel de la santé, pour le diabète?		1 Oui 2 Non	X15	H8	Numeric	Numeric

Step 2: Physical Measurements

STEP 2: Physical Measurements			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
Height and weight								
75	--	Interviewer ID	1-900 999 Missing		M1	--	Numeric	--
76	--	Device IDs for height and weight	Height: 1-90 / 99 Missing Weight: 1-90 / 99 Missing		M2a M2b	-- --	Numeric	--
77	--	Height	100.0-270.0 888.8 Refused 999.9 Missing		M3	M3	Numeric	Numeric
78	--	Weight	20.0-350.0 666.6 Too large for scale 888.8 Refused 999.9 Missing		M4	M4	Numeric	Numeric
79	--	*(For women)* Are you pregnant?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		M5	M5	Numeric	Numeric

Continued on next page

Step 2: Physical Measurements, Continued

STEP 2: Physical Measurements			Response		Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
Waist								
80	--	Device ID for waist	1-90 99 Missing		M6	--	Numeric	--
81	--	Waist circumference	30.0-200.0 888.8 Refused 999.9 Missing		M7	M8	Numeric	Numeric
Blood pressure								
82	--	Interviewer ID	1-900 999 Missing		M8	--	Numeric	--
83	--	Device ID for blood pressure	1-90 99 Missing		M9	---	Numeric	--
84	--	Cuff size used	1 Small 2 Medium 3 Large 99 Missing		M10	M11	Numeric	--
85	--	Reading 1	Systolic: 40.0-300 / 888 Refused / 999 Missing		M11a	M12a	Numeric	Numeric
			Diastolic: 30.0-200.0 / 888 Refused / 999 Missing		M11b	M12b	Numeric	Numeric
86	--	Reading 2	Systolic: 40.0-300 / 888 Refused / 999 Missing		M12a	M13a	Numeric	Numeric
			Diastolic: 30.0-200.0 / 888 Refused / 999 Missing		M12b	M13b	Numeric	Numeric

Step 2: Physical Measurements, Continued

Step 2: Physical Measurements			Response			Code (variable name)		Data Type	
STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic		Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
87	--	Reading 3	Systolic	40.0-300.0 888 Refused 999 Missing		M13a	M14a	Numeric	Numeric
			Diastolic	30.0-200.0 888 Refused 999 Missing		M13b	M14b	Numeric	Numeric
88	--	During the past two weeks, have you been treated for raised blood pressure with drugs (medication) prescribed by a doctor or other health worker?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing			M14	M15	Numeric	Numeric
Hip Circumference and Heart Rate									
89	--	Hip circumference	45.0-300.0 888.8 Refused 999.9 Missing			M15	--	Numeric	--
90	--	Heart Rate Reading 1	30.0-200.0 888 Refused 999 Missing			M16a	M17a	Numeric	Numeric
		Heart Rate Reading 2	30.0-200.0 888 Refused 999 Missing			M16b	M17b	Numeric	Numeric
		Heart Rate Reading 3	30.0-200.0 888 Refused 999 Missing			M16c	M17c	Numeric	Numeric

Step 3: Biochemical Measurements

STEPS Q No.	Site Q No.	STEPS Generic Question	STEPS Generic	Site Specific	STEPS Generic	Site Specific	STEPS Generic	Site Specific
Step 3: Biochemical Measurements			**Response**		**Code (variable name)**		**Data Type**	
91	--	During the last 12 hours have you had anything to eat or drink, other than water?	1 Yes 2 No 77 Don't Know 88 Refused 99 Missing		B1	--	Numeric	--
92	--	Technician ID	1-900 999 Missing		B2	--	Numeric	--
93	--	Device ID	1-90 99 Missing		B3	--	Numeric	--
94	--	Time of day blood specimen taken (24 hour clock)	Numeric hh:mm		B4	--	Numeric	--
95	--	Blood glucose	1-50.00 99.99 Missing	In mmol	B5	B5	Numeric	Numeric
Blood Lipids								
96	--	Device ID	1-60 99 Missing		B6	--	Numeric	--
97	--	Total cholesterol	1.75-20.00 99.99 Missing		B7	--	Numeric	--
Triglycerides and HDL Cholesterol								
98	--	Triglycerides	0.25-50.0 99.99 Missing		B8	--	Numeric	--
99	--	HDL Cholesterol	0.10-5.00 9.99 Missing		B9	--	Numeric	--
Country-Specific Questions								
--	--	HDL Cholesterol		1 Bas 2 Elevé 3 Impossible d'évaluer	X16	B14	Numeric	Numeric