

SEACO Health Round 2018 Codebook

Seaco, Monash

03 September, 2019

Form ID: seaco_health_round_2018 Form Version: 1908291103

Variable Name: starttime

Variable Label: NULL

Data Type: date-time (start)

Variable Name: endtime

Variable Label: NULL

Data Type: date-time (end)

Variable Name: deviceid

Variable Label: NULL

Data Type: deviceid (string)

Variable Name: audio_audit_1

Variable Label: NULL

Data Type: audio audit

Variable Name: dc_namelist

Variable Label: 1. Please select your name:

Data Type: factor (select one)

Value	Label
dc_password	dc_name

Variable Name: dc_name

Variable Label: 2. DC's Name

Data Type: unknown (calculate)

Variable Name: dc_id

Variable Label: 3. Please key in your password:

Data Type: string

Variable Name: sensitive_response

Variable Label: NULL

Data Type: calculate_here

Variable Name: searchopt

Variable Label: 4. Please select an appropriate identification of the household

Data Type: factor (select one)

Value	Label
1	SEACO House Barcode
2	Individual name
3	House Address
4	MyKad
5	Respondent ID

Variable Name: searchopt1_barcode

Variable Label: 4.1. Barcode: Please enter the barcode

Data Type: string

Variable Name: searchopt1_list

Variable Label: 4.2. Barcode: List of Household member(s)

Data Type: factor (select one)

Value	Label
hh_residentsId	Residents_name_concat

Variable Name: searchopt2__name

Variable Label: 4.1. Individual Name: Please enter respondent's name

Data Type: string

Variable Name: searchopt2__list

Variable Label: 4.2. Individual Name: List of respondent

Data Type: factor (select one)

Value	Label
hh_residentsId	Residents_name_concat

Variable Name: searchopt3__houseAddr

Variable Label: 4.1. House Address: Please enter the house address

Data Type: string

Variable Name: searchopt3__list

Variable Label: 4.2. House Address: List of Household member(s)

Data Type: factor (select one)

Value	Label
hh_residentsId	Residents_name_concat

Variable Name: searchopt4__icNo

Variable Label: 4.1. MyKad: Please enter the IC NO

Data Type: string

Variable Name: searchopt4__list

Variable Label: 4.2. MyKad: List of respondent

Data Type: factor (select one)

Value	Label
hh_residentsId	Residents_name_concat

Variable Name: searchopt5_respondentID

Variable Label: 4.1. Respondent ID: Please enter the respondent ID

Data Type: string

Variable Name: searchopt5_list

Variable Label: 4.2. Respondent ID: List of respondent

Data Type: factor (select one)

Value	Label
hh_residentsId	Residents_name_concat

Variable Name: residents_id

Variable Label: 4.3. : Residents's ID

Data Type: string

Variable Name: trigger1

Variable Label: Starting the health round for this household here.

Data Type: trigger

Variable Name: Residents_name

Variable Label: 5. What is the residents full name?

Data Type: string

Variable Name: known_participant_name

Variable Label: 6. Is your name ___?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: new_participant_name

Variable Label: 7. What is your full name?

Data Type: string

Variable Name: residents_agree

Variable Label: 8. Can ___ take part in SEACO's research?

Data Type: factor (select one)

Value	Label
1	Agreed
2	Unwilling
3	No respondent at home
4	Incapable due to acute illness
5	Incapable due to chronic illness
6	Incapable for another reason (included <5 years old)
7	Moved
8	Passed away

Variable Name: residents_agree_other

Variable Label: 8.1. Please specify other

Data Type: string

Variable Name: residents_parted

Variable Label: 9. Is ___ still part of the household

Data Type: factor (select one)

Value	Label
1	Yes
2	No
3	Was never part of the household

Variable Name: address

Variable Label: 10. Verify the address.

Data Type: string

Variable Name: address_true

Variable Label: 11. Is the address shown correct?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: house_barcode_inject

Variable Label: 00. House barcode

Data Type: unknown (calculate)

Variable Name: housedetails_mukim_new

Variable Label: 12. Which Mukim is that dwelling in?

Data Type: factor (select one)

Value	Label
1	Bekok
2	Chaah
3	Gemereh
4	Jabi
5	Sungai Segamat

Variable Name: housedetails_batu_new

Variable Label: 13. Which Batu is that dwelling along?

Data Type: string

Variable Name: housedetails__area__new

Variable Label: 14. Type of the Taman/Kampung/Felda/Felcra/Quarters of that dwelling?

Data Type: factor (select one)

Value	Label
1	Taman
2	Kampung
3	Felda
4	Felcra
5	Quarters
6	Not applicable

Variable Name: housedetails__area2__new

Variable Label: 15. Please specify the Taman/Kampung/Felda/Felcra/Quarters of that dwelling.

Data Type: string

Variable Name: housedetails__area3__new

Variable Label: 16. Type of the Taman/Kampung/Felda/Felcra/Quarters of that dwelling?

Data Type: factor (select one)

Value	Label
1	Taman
2	Kampung
3	Felda
4	Felcra
5	Quarters
6	Not applicable

Variable Name: housedetails__area4__new

Variable Label: 17. Please specify the Taman/Kampung/Felda/Felcra/Quarters of that dwelling.

Data Type: string

Variable Name: housedetails__street__new

Variable Label: 18. Type of the Street/Lorong of that dwelling?

Data Type: factor (select one)

Value	Label
1	Jalan
2	Lorong
3	Not applicable

Variable Name: housedetails_street2_new

Variable Label: 19. Please specify the Street name/Lorong of that dwelling.

Data Type: string

Variable Name: housedetails_street3_new

Variable Label: 20. Type of the Street/Lorong of that dwelling?

Data Type: factor (select one)

Value	Label
1	Jalan
2	Lorong
3	Not applicable

Variable Name: housedetails_street4_new

Variable Label: 21. Please specify the Street name/Lorong of that dwelling.

Data Type: string

Variable Name: housedetails_number_new

Variable Label: 22. Type of the Lot number/House number/Pole number of that dwelling?

Data Type: factor (select one)

Value	Label
1	Lot
2	Number
3	Pole number
4	Not applicable

Variable Name: housedetails__number2__new

Variable Label: 23. Please specify the Lot number/House number/Pole number of that dwelling.

Data Type: string

Variable Name: housedetails__number3__new

Variable Label: 24. Type of the Lot number/House number/Pole number of that dwelling?

Data Type: factor (select one)

Value	Label
1	Lot
2	Number
3	Pole number
4	Not applicable

Variable Name: housedetails__number4__new

Variable Label: 25. Please specify the Lot number/House number/Pole number of that dwelling.

Data Type: string

Variable Name: Residents__sex

Variable Label: 26. What is ___'s gender?

Data Type: factor (select one)

Value	Label
1	Male
2	Female
3	Other

Variable Name: gender__other

Variable Label: 27. Please specify other.

Data Type: string

Variable Name: Residents__ethnicity

Variable Label: 28. What is ___'s ethnicity?

Data Type: factor (select multiple)

Value	Label
-9	Refused to answer
-8	Don't Know
1	Malay
2	Indian
3	Chinese
4	Bumiputera
5	Other
8	Orang Asli

Variable Name: Residents__ethnicity__other

Variable Label: 28.1. If other please state the ethnicity of ___

Data Type: string

Variable Name: language

Variable Label: 29. What language is being used for the interview

Data Type: factor (select one)

Value	Label
1	Malay
2	Mandarin or a Chinese dialect
3	Tamil
4	English
5	Other

Variable Name: Residents__rhh

Variable Label: 30. What is ___'s relationship to the head of household?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	is the Head of Household
2	Husband or Wife

Value	Label
3	Parent (in law)
4	Grandparent (in law)
5	Brother or Sister
6	Child
7	Domestic servant (e.g., maid/driver)
8	There is no Head of Household
9	Other
12	Daughter-in-law or Son-in-law
13	Adopted
14	Stepchild
15	Grandchild
16	Acquaintance
17	Friend

Variable Name: ic_01_1

Variable Label: 31. Verify your NRIC.

Data Type: string

Variable Name: ic_01_2

Variable Label: 32. Is the NRIC shown correct?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: ic_01

Variable Label: 33. Do you have a NRIC?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: ic_02

Variable Label: 34. [DC] Please scan the participant's NRIC using the IC reader.

Data Type: acknowledge

Variable Name: ic_03

Variable Label: 35. MyKAD Data

Data Type: string

Variable Name: ic_04

Variable Label: 36. [DC] Were you able to scan the participant's NRIC?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: ic_05

Variable Label: 37. [DC] Enter NRIC number.

Data Type: string

Variable Name: ic_06

Variable Label: 38. [DC] Enter NRIC number (repeat).

Data Type: string

Variable Name: type_id

Variable Label: 39. What other identification do you have?

Data Type: factor (select one)

Value	Label
1	Other Malaysian government issued ID
2	Foreign passport
3	Other
4	ID missing

Value	Label
5	Refused to provide ID

Variable Name: ic_08

Variable Label: 40. Please specify other.

Data Type: string

Variable Name: ic_09

Variable Label: 41. Please enter the ID number.

Data Type: string

Variable Name: ic_10

Variable Label: 00. IC No:

Data Type: unknown (calculate)

Variable Name: dob_ic_injected_1

Variable Label: 00. Verify Date of Birth.

Data Type: unknown (calculate)

Variable Name: dob_02

Variable Label: 42.2. Is the date of birth shown correct?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: age_ic_injected

Variable Label: 00. Age

Data Type: unknown (calculate)

Variable Name: age_ic_injected_2

Variable Label: 42.3. Age: Please key in the respondent's age again for verification

Data Type: integer

Variable Name: dob_ic_1

Variable Label: 00. Verify Date of Birth.

Data Type: unknown (calculate)

Variable Name: dob_03

Variable Label: 43.2. Is the date of birth shown correct?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: age_ic

Variable Label: 00. Age

Data Type: unknown (calculate)

Variable Name: age_ic_2

Variable Label: 43.3. Age: age_ic. Please key in the respondent's age again for verification

Data Type: integer

Variable Name: dob_ic_key_1

Variable Label: 00. Verify Date of Birth.

Data Type: unknown (calculate)

Variable Name: dob_04

Variable Label: 44.2. Is the date of birth shown correct?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: age_ic_key

Variable Label: 00. Age

Data Type: unknown (calculate)

Variable Name: age_ic_key_2

Variable Label: 44.3. Age: (age_ic_key).Please key in the respondent's age again for verification

Data Type: integer

Variable Name: dob

Variable Label: 45.1. What is your Date of Birth?

Data Type: date

Variable Name: dob_key

Variable Label: 00. Age

Data Type: unknown (calculate)

Variable Name: age_dob

Variable Label: 45.2. Age: dob_key. Please key in the respondent's age again for verification

Data Type: integer

Variable Name: residents_age

Variable Label: Please key in the respondent's age again for verification

Data Type: unknown (calculate)

Variable Name: consent_2

Variable Label: 1. I have received an information sheet and a copy of the privacy statement

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_3

Variable Label: 2. Any questions I had about participation have been satisfactorily answered

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_4

Variable Label: 3. I am going to take part in a questionnaire survey

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_5

Variable Label: 4. I am going to take part in a health check that may include measurement of height, weight, waist circumference, blood pressure and (finger-prick) blood glucose

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_6

Variable Label: 5. My responses will be stored securely on a computer and only destroyed when they are no longer useful for research

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_7

Variable Label: 6. My responses will only be made available to researchers, and only in a de-identified form; for research purposes

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_8

Variable Label: 7. Summary results combining many household's responses, including mine, may be published in a de-identified form

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_9

Variable Label: 8. The responses I provide may be used by researchers in future research projects in a de-identified form

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_10

Variable Label: 9. The responses I provide may be linked in the future to other SEACO data or other data collected by a third-party

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_11

Variable Label: 10. Participation is voluntary and I may withdraw at any time without penalty. If I withdraw from the research before the completion of the survey, the data will not be recorded or retained by SEACO. If I withdraw after the completion of the survey, the data will be retained by SEACO, but the data will be de-identified; that is, the data will be unlinked from my personal identifying information, and the personal identifying information will be deleted from the SEACO database

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_12

Variable Label: 11. SEACO may share my health related data, with my personal identifying data, with the Ministry of Health for the purposes of improving health service delivery in Segamat.

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consent_13

Variable Label: I understand that any information I provide is confidential, and that no information that could lead to my identification will be disclosed in any reports on the project, or to any other party except where I have given express permission in Point 11

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consented_initial

Variable Label: NULL

Data Type: unknown (calculate)

Variable Name: consent_15

Variable Label: Participant's signature

Data Type: image

Variable Name: signed

Variable Label: Did participant sign the consent?

Data Type: factor (select one)

Value	Label
1	Yes
2	No
3	No, but gave verbal consent

Variable Name: consent_16

Variable Label: Record the participant on video saying: I NAME from ADDRESS agree to SEACO collecting health information about myself

Data Type: video

Variable Name: verbal

Variable Label: Did participant provide verbal consent on record?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: consented

Variable Label: NULL

Data Type: unknown (calculate)

Variable Name: child__consent__1

Variable Label: Parent's or guardian's name

Data Type: string

Variable Name: child__consent__2

Variable Label: Relationship with participant

Data Type: factor (select one)

Value	Label
1	Father
2	Mother
3	Guardian

Variable Name: child__consent__4

Variable Label: 1. I have received an information sheet and a copy of the privacy statement

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: **child_consent_5**

Variable Label: 2. Any questions I had about participation have been satisfactorily answered

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: **child_consent_6**

Variable Label: 3. My child/ward will take part in a questionnaire survey

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: **child_consent_7**

Variable Label: 4. My child/ward take part in a health check that may include measurement of height, weight and waist circumference

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: **child_consent_8**

Variable Label: 5. Responses will be stored securely on a computer and only destroyed when they are no longer useful for research

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: **child_consent_9**

Variable Label: 6. Responses will only be made available to researchers, and only in a de-identified form for research purposes

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: **child_consent_10**

Variable Label: 7. Summary results combining many household's responses, including those of my child/ward, may be published in a de-identified form

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: **child_consent_11**

Variable Label: 8. Responses provided may be used by researchers in future research projects in a de-identified form

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: **child_consent_12**

Variable Label: 9. Responses provided may be linked in the future to other SEACO data or other data collected by a third-party

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: child_consent_13

Variable Label: 10. Participation is voluntary and my child/ward may withdraw at any time without penalty. If my child/ward withdraws from the research before the completion of the survey, the data will not be recorded or retained by SEACO. If my child/ward withdraws after the completion of the survey, the data will be retained by SEACO, but the data will be de-identified; that is, the data will be unlinked from any personal identifying information of my child/ward, and the personal identifying information will be deleted from the SEACO database.

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: child_consent_14

Variable Label: 11. SEACO may share the health related data of my child/ward, and the personal identifying data, with the Ministry of Health for the purposes of improving health service delivery in Segamat.

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: child_consent_15

Variable Label: I understand that any information provided by my child/ward is confidential, and that no information that could lead to their identification will be disclosed in any reports on the project, or to any other party except where express permission was given in Point 11.

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: child_consented_initial

Variable Label: NULL

Data Type: unknown (calculate)

Variable Name: child__consent__16

Variable Label: Parent's/Guardian's signature

Data Type: image

Variable Name: child__signed

Variable Label: Did parent/guardian sign the consent?

Data Type: factor (select one)

Value	Label
1	Yes
2	No
3	No, but gave verbal consent

Variable Name: child__consent__17

Variable Label: Record the participant on video saying: I \${child__consent__1} from ADDRESS agree to SEACO collecting health information about my child

Data Type: video

Variable Name: child__verbal

Variable Label: Did parent/guardian provide verbal consent on record?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: child__consented

Variable Label: NULL

Data Type: unknown (calculate)

Variable Name: trigger2

Variable Label: We do not have consent to continue. Save and Close the form.

Data Type: acknowledge

Variable Name: Residents__citizen

Variable Label: 46. What is ___'s citizenship?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	Malaysian
2	Singaporean
3	Indonesian
4	Indian
5	Other
8	Vietnamese
9	Philippines
10	Bangladeshi
11	Nepali
12	Thai
13	Cambodian

Variable Name: Residents__citizen__other

Variable Label: 46.1. If 'Other' please specify citizenship of ___

Data Type: string

Variable Name: demographic__11

Variable Label: 47. What is your marital status?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	Single
2	Married
3	Separated / Living Apart (Not Divorced)
4	Divorced
5	Widow / Widower

Variable Name: demographic_12

Variable Label: 48. Are you in a polygamous marriage?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: demographic_13

Variable Label: 49. Which wife are you?

Data Type: factor (select one)

Value	Label
1	First
2	Second
3	Third
4	Fourth

Variable Name: demographic_14

Variable Label: 50. How many wives do you have?

Data Type: factor (select one)

Value	Label
1	2
2	3
3	4

Variable Name: demographic_15

Variable Label: 51. Does your spouse live with you in this house?

Data Type: factor (select one)

Value	Label
1	Yes

Value	Label
2	No

Variable Name: school_1

Variable Label: 52. Is ___ currently attending (pre-)school, college or university?

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: age_check_17

Variable Label: 00. age_check_17

Data Type: unknown (calculate)

Variable Name: school_2

Variable Label: 53. What year of study is ___ in?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	Pre-school playgroup
2	Kindergarten
3	Primary School, Year 1
4	Primary School, Year 2
5	Primary School, Year 3
6	Primary School, Year 4
7	Primary School, Year 5
8	Primary School, Year 6
9	Secondary School, Form 1
10	Secondary School, Form 2
11	Secondary School, Form 3
12	Secondary School, Form 4
13	Secondary School, Form 5
14	Secondary School, Form 6/Pre-University
15	College (Diploma)
16	University (Degree)

Value	Label
17	Other

Variable Name: school_2_others

Variable Label: 53.1. If 'Other', please describe the year of study is ___ in

Data Type: string

Variable Name: school_3

Variable Label: 54. What type of school is ___ attending?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	National Primary School
2	Tamil Primary School
3	Chinese Primary School
4	National Secondary School
5	Vocational Secondary School
6	National Secondary School (Agama)
7	Other

Variable Name: school_4a

Variable Label: 55. What is the name of the school ___ is attending?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	SK (FELDA) CHEMPLAK
2	SK (FELDA) KEMELAH
3	SK (FELDA) PEMANIS 2
4	SK (FELDA) REDONG
5	SK BALAI BADANG
6	SK BANDAR PUTRA
7	SK BATU ANAM
8	SK BUKIT HAMPAR
9	SK BUKIT TUNGGAL
10	SK BULOH KASAP
11	SK CANOSSIAN CONVENT (M)

Value	Label
12	SK DATO SERI MAHARAJA LELA
13	SK DATUK WAN IDRIS
14	SK DESA TEMU JODOH
15	SK GELANG CHINCHIN
16	SK GEMEREH
17	SK JEMENTAH
18	SK KAMPONG AWAT
19	SK KAMPONG JAWA
20	SK KAMPONG KUDUNG
21	SK KAMPONG TENANG
22	SK KAMPONG TENGAH
23	SK KAMPUNG PAYA BESAR
24	SK KEMEDAK
25	SK KUALA PAYA
26	SK LABIS
27	SK LADANG WELCH
28	SK LKTP MAOKIL 1
29	SK LKTP MAOKIL 2
30	SK LKTP MEDOI
31	SK LKTP PALONG TIMUR
32	SK LKTP PALONG TIMUR 2
33	SK LKTP PEMANIS 1
34	SK LKTP TENANG
35	SK MELAYU RAYA
36	SK MENSUDUT LAMA
37	SK MENSUDUT PINDAH
38	SK PAYA JAKAS
39	SK PEKAN AIR PANAS
40	SK POGOHO
41	SK SAWAH BAHRU
42	SK SEGAMAT BARU
43	SK SEGAMAT KECIL
44	SK SEPINANG
45	SK SERI BALI
46	SK SERI BEKOK
47	SK SPANG LOI
48	SK SRI LABIS
49	SK TAMBANG
50	SK TEBING TINGGI
51	SK TEMENGGONG ABDUL RAHMAN (INTEG)
52	SK TENANG STESEN
53	Other

Variable Name: school_4b

Variable Label: 56. What is the name of the school ___ is attending?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	SJK(C) AI CHUN
2	SJK(C) BEKOK
3	SJK(C) BUKIT SIPUT
4	SJK(C) CENTRAL SITE
5	SJK(C) CHA'AH
6	SJK(C) HWA NAN
7	SJK(C) JABI
8	SJK(C) JAGOH
9	SJK(C) JEMENTAH (2)
10	SJK(C) JEMENTAH 1
11	SJK(C) KAMPUNG TENGAH
12	SJK(C) KARAS
13	SJK(C) KASAP
14	SJK(C) LABIS
15	SJK(C) LI CHI
16	SJK(C) SEG HWA
17	SJK(C) TAH KANG
18	SJK(C) TAMBANG
19	SJK(C) TENANG
20	SJK(C) TUA OOH
21	Other

Variable Name: school_4c

Variable Label: 57. What is the name of the school ___ is attending?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	SJK(T) BANDAR SEGAMAT
2	SJK(T) BATU ANAM
3	SJK(T) BEKOK
4	SJK(T) CANTUMAN CHAAH
5	SJK(T) LABIS
6	SJK(T) LADANG FORTROSE
7	SJK(T) LADANG GOMALI
8	SJK(T) LADANG NAGAPPA
9	SJK(T) LADANG SEGAMAT
10	SJK(T) LADANG SG MUAR
11	SJK(T) LADANG VOULES
12	SJK(T) LDG SG SENARUT
13	Other

Variable Name: school_4d

Variable Label: 58. What is the name of the school ___ is attending?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	SMK BANDAR PUTRA
2	SMK BEKOK
3	SMK BULUH KASAP
4	SMK CANOSSIAN CONVENT (M)
5	SMK CHAAH
6	SMK DATO' AHMAD ARSHAD
7	SMK DATO' BENTARA DALAM
8	SMK GEMEREH
9	SMK JEMENTAH
10	SMK KAMARUL ARIFFIN
11	SMK LABIS
12	SMK LKTP MAOKIL
13	SMK LKTP PEMANIS
14	SMK MUNSHI IBRAHIM
15	SMK PADUKA TUAN
16	SMK PALONG TIMUR
17	SMK SEG HWA (CF)
18	SMK SERI BALI
19	SMK SERI JEMENTAH
20	SMK SERI KENANGAN
21	SMK TENANG STESEN
22	SMK TINGGI SEGAMAT
23	Other

Variable Name: school_4e

Variable Label: 59. What is the name of the school ___ is attending?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	SMV SEGAMAT
2	Other

Variable Name: school_4f

Variable Label: 60. What is the name of the school ___ is attending?

Data Type: factor (select one)

Value	Label
-9	Refused to answer
-8	Don't Know
1	SMKA SEGAMAT
2	Other

Variable Name: highest__education

Variable Label: 61. What was the highest level of education achieved by ___?

Data Type: factor (select one)

Value	Label
1	Never attended school
2	Attended but did not finish Primary School
3	Finished Primary School
4	Attended but did not finish Secondary School
5	Finished Form 3
6	Finished Form 5
7	Finished Form 6
8	Started College (Diploma)
9	Finished College (Diploma)
10	Started University (Degree)
11	Finished University (Degree)
12	Other
13	Do not know
14	Refused to answer

Variable Name: education__4

Variable Label: 62. Can you read

Data Type: factor (select multiple)

Value	Label
1	English
2	Malay (Rumi)
3	Malay (Jawi)
4	Chinese (Traditional characters)
5	Chinese (Simplified characters)
6	Tamil
7	Unable to read

Variable Name: education__5

Variable Label: 63. Have you ever studied at a religious school?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: education__7

Variable Label: 64. How many are Malay

Data Type: integer

Variable Name: education__8

Variable Label: 65. How many are Chinese

Data Type: integer

Variable Name: education__9

Variable Label: 66. How many are Indian

Data Type: integer

Variable Name: education__10

Variable Label: 67. How many are Jakun

Data Type: integer

Variable Name: education__11

Variable Label: NULL

Data Type: unknown (calculate)

Variable Name: education_13

Variable Label: Please key in the total number of best friends based on the number displayed above

Data Type: integer

Variable Name: work_2

Variable Label: 68. What did ___ do over the past 30 days?

Data Type: factor (select one)

Value	Label
1	Too young to work
2	Student
3	Housewife / Househusband
4	Not Working
5	Casual Jobs
6	Working Part-time
7	Working Full-Time
8	Do not Know
9	Refused to answer
10	Pensioners/Pensions
11	Self Employed

Variable Name: work_3

Variable Label: 69. What is your average personal gross monthly income, in terms of work/salary/pension (RM)

Data Type: integer

Variable Name: work_4

Variable Label: 70. What is your average personal gross monthly income, in terms of money from other household members (RM)

Data Type: integer

Variable Name: work_5

Variable Label: 71. What is your average personal gross monthly income, in terms of money from other sources, e.g., family members outside the household (RM)

Data Type: integer

Variable Name: insurance__1

Variable Label: 72. Who usually pays for your health care costs?

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Government/pensioner
2	Employer provided health insurance
3	Personal health insurance
4	Employer/Panel Clinic
5	Self/Family/Household Member
6	Other

Variable Name: insurance1__other

Variable Label: 72.1. Please specify other

Data Type: string

Variable Name: insurance__2

Variable Label: 73. Who usually decides whether you need to seek care from a healthcare provider?

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Spouse
2	Father
3	Mother
4	Child
5	An elder in the family
6	Self
7	Employer
8	Insurance
9	Other

Variable Name: insurance2__other

Variable Label: 73.1. Please specify other

Data Type: string

Variable Name: insurance_3

Variable Label: 74. Who usually decides where or from whom you should receive healthcare?

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Spouse
2	Father
3	Mother
4	Child
5	An elder in the family
6	Self
7	Employer
8	Insurance
9	Other

Variable Name: insurance3__other

Variable Label: 74.1. Please specify other

Data Type: string

Variable Name: illness_1

Variable Label: 75. In the last two weeks, have you experienced fast or troubled breathing?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_2

Variable Label: 76. In the last two weeks, have you experienced severe or persistent vomiting?

Data Type: factor (select one)

Value	Label
-8	Refused to answer

Value	Label
1	Yes
2	No

Variable Name: illness_3

Variable Label: 77. In the last two weeks, have you experienced an injury from a fall, traffic accident, burn, poisoning, drowning, firearm, sharp weapon, or an act of violence from another person?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_4

Variable Label: 78. In the last two weeks, have you experienced dental (oral health) problems such as toothache or sensitive teeth, swollen gums (with or without pus), loss of teeth, denture problems, irregular teeth, mouth ulcers, or jaw pain?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_5

Variable Label: 79. In the last two weeks, have you experienced severe pain or tightness in the chest or stomach region

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_6

Variable Label: 80. In the last two weeks, have you experienced sudden dizziness?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_7

Variable Label: 81. In the last two weeks, did you have any health problem or injury that prevented you from doing your usual daily activities such as going to school or work?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_8

Variable Label: 82. In the last two weeks, how many days in total (either whole or part days) were you unable to do your usual daily activities because of health problems or injury

Data Type: string

Variable Name: illness_9

Variable Label: 83. For the health problem/injury did you self medicate

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_10

Variable Label: 84. For the health problem/injury did you seek help from a health care professional

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_10a

Variable Label: 85. For the health problem/injury, which types of health professionals did you consult

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Government health practitioner - Doctor
2	Government health practitioner - Other
3	Private health practitioner - Doctor
4	Private health practitioner - Other

Variable Name: illness_10b

Variable Label: 86. For all the health visits how much money did you have to pay in total (that will not be refunded by health insurance)

Data Type: integer

Variable Name: illness_12_hour

Variable Label: Hours

Data Type: string

Variable Name: illness_12_minute

Variable Label: Minutes

Data Type: string

Variable Name: illness_13_hour

Variable Label: Hours

Data Type: string

Variable Name: illness_13_minute

Variable Label: Minutes

Data Type: string

Variable Name: illness_11

Variable Label: 89. Following the visits, did you have to buy any medication not counted above (additional medicines other than those given by the doctor)

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_11a

Variable Label: 90. How much money in total did you spend on the medication

Data Type: integer

Variable Name: illness_14

Variable Label: 91. Overall how satisfied were you with the treatment you received during the health visits

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very satisfied
2	Satisfied
3	Neither satisfied nor dissatisfied
4	Dissatisfied
5	Very dissatisfied

Variable Name: illness_15

Variable Label: 92. Have you had your teeth examined by a dentist or dental technician in the past 12 months

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_16

Variable Label: 93. Was the examination conducted in a government dental clinic

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_17

Variable Label: 94. Which of the following best describes the state of your teeth

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	I have all my teeth
2	I am missing some of my teeth
3	I am missing most of my teeth
4	I have a mix of my own teeth and dentures
5	I have dentures

Variable Name: illness_18

Variable Label: 95. How frequently do you experience oral pain or discomfort

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Never

Value	Label
2	Occasionally
3	Sometimes
4	Often
5	Constantly

Variable Name: illness__18a

Variable Label: 96. How severe is the pain or discomfort

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Mild
2	Moderate
3	Severe

Variable Name: illness__19

Variable Label: 97. Have you ever been told by a doctor/medical assistant that you have heart disease

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: illness__20

Variable Label: 98. Have you ever been told by a doctor/medical assistant that you have asthma

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: illness__21

Variable Label: 99. Have you ever been told by a doctor/medical assistant that you have had a stroke

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: illness__22

Variable Label: 100. Have you ever been told by a doctor/medical assistant that you have arthritis (a disease of the joints)

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: illness__25

Variable Label: 101. In the last 12 months, did a doctor/medical assistant tell you that you have urinary tract problems?

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: illness__24

Variable Label: 102. Have you ever been told by a doctor/medical assistant that you had dengue fever

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: illness__23

Variable Label: 103. In the last 12 months, did a doctor/medical assistant tell you that you had dengue fever

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: illness__26

Variable Label: 104. Have you ever been told by a doctor/medical assistant that you have kidney disease

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: illness__26__1

Variable Label: 105. Do you have kidney dialysis?

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_27

Variable Label: 106. In the last 6 months, have you taken any herbs or traditional medicine such as Ubat Makjun, ginseng, Tongkat Ali, Kacip Fatimah, etc.

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Yes
2	No

Variable Name: illness_28

Variable Label: 107. How frequently did you take those herbs / traditional medicine

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	At least once a day
2	At least once a week
3	At least once a month
4	Less than once a month

Variable Name: illness_29

Variable Label: 108. How important is it for you to have an enriched religious/spiritual life

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Useful, but I can live without it
2	Important
3	Very important
4	Essential, I cannot live without it

Variable Name: illness_30

Variable Label: 109. How strongly do you feel in control of what you do and achieve in your life

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	I feel no control
2	I feel a little control
3	I feel some control
4	I feel mostly in control
5	I feel in full control

Variable Name: illness__31

Variable Label: 110. How strongly do you agree with the following statement: No matter what I want to do or be in my life, there is a higher power that determines the course of my life.

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Totally agree
2	Agree
3	Neither agree nor disagree
4	Disagree
5	Totally disagree

Variable Name: health__1

Variable Label: 111. Do you usually have daily contact with other people?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: health__2

Variable Label: 112. In case of need, can you count on someone close to you?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: health_3

Variable Label: 113. Do you usually have enough income to meet your daily needs

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: health_4

Variable Label: 114. Did you trip or fall anytime over the past 6 months

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: health_4a

Variable Label: 115. How many times have you tripped or fallen in the past 6 months

Data Type: factor (select one)

Value	Label
1	Once
2	Twice
3	Three times
4	More than three times

Variable Name: health_4b

Variable Label: 116. Which of the following best explains the [most recent] trip/fall

Data Type: factor (select one)

Value	Label
1	Fainted
2	Fitted
3	Slipped
4	Tripped over an object
5	Tripped when my foot got caught
6	Pushed over / Knocked down

Variable Name: health_5

Variable Label: 117. Have you been hospitalized for one or more nights during the past 6 months

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: health_6

Variable Label: 118. Have you visited a hospital EMERGENCY DEPARTMENT during the past 6 months

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: health_7

Variable Label: 119. Overall in the last 30 days, how much difficulty did you have with concentrating or remembering things?

Data Type: factor (select one)

Value	Label
1	None
2	Mild
3	Moderate
4	Severe
5	Extreme / Cannot do

Variable Name: health_8

Variable Label: 120. Overall in the last 30 days, how much difficulty did you have learning a new task (for example, learning how to get to a new place, learning a new game, etc).

Data Type: factor (select one)

Value	Label
1	None
2	Mild
3	Moderate
4	Severe
5	Extreme / Cannot do

Variable Name: health_9

Variable Label: 121. Overall in the last 30 days, how much of a problem did you have with sleeping, such as falling asleep, waking up frequently during the night, or waking up too early in the morning

Data Type: factor (select one)

Value	Label
1	None
2	Mild
3	Moderate
4	Severe
5	Extreme / Cannot do

Variable Name: health_10

Variable Label: 122. Overall in the last 30 days, how much of a problem did you have due to not feeling rested and refreshed during the day (for example, feeling tired or not having energy)?

Data Type: factor (select one)

Value	Label
1	None
2	Mild
3	Moderate
4	Severe
5	Extreme / Cannot do

Variable Name: health_11

Variable Label: 123. Including people you know well, in the past 12 months, has anyone deliberately hit, slapped, punched or kicked you, or used force or violence in any way?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: health_12

Variable Label: 124. Including people you know well, in the past 12 months, has anyone threatened to hit, slap, punch or kick, or use force or violence against you in a way that frightened you?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: health_13

Variable Label: 125. In the past 12 months, has anyone stolen anything of yours that you valued

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: health_13a

Variable Label: 126. What was stolen

Data Type: string

Variable Name: health_14

Variable Label: 127. People are generally dishonest and selfish and they want to take advantage of others

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Totally agree
2	Agree
3	Neither agree nor disagree
4	Disagree
5	Totally disagree

Variable Name: health_15

Variable Label: 128. If I do nice things for someone, I can anticipate that they will respect me and treat me just as well as I treat them

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Totally agree
2	Agree
3	Neither agree nor disagree
4	Disagree
5	Totally disagree

Variable Name: health_16

Variable Label: 129. If I see people who cooperate with each other, I also feel that I would help someone in need

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Totally agree
2	Agree
3	Neither agree nor disagree
4	Disagree
5	Totally disagree

Variable Name: health_17

Variable Label: 130. In a difficult situation, I can count on the help from people in my local community

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Totally agree
2	Agree
3	Neither agree nor disagree
4	Disagree
5	Totally disagree

Variable Name: health_18

Variable Label: 131. I feel a strong attachment to my local community

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Totally agree
2	Agree
3	Neither agree nor disagree
4	Disagree
5	Totally disagree

Variable Name: health_19

Variable Label: 132. Are you an active member of one of more local clubs or associations (e.g., sports club, political group, social club, Parent-Teachers Association, Residents association etc.)

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: health_19a

Variable Label: 133. How many clubs or associations are you actively involved with?

Data Type: integer

Variable Name: health_19b

Variable Label: 134. Thinking about the club or association that you are most actively involved with, and the other members age and sex, how similar to you are they?

Data Type: factor (select one)

Value	Label
-9	Do not Know
1	Similar
2	More similar than dissimilar
3	Half-Half
4	Less similar than dissimilar
5	Dissimilar
8	Refused to answer

Variable Name: health_19c

Variable Label: 135. Thinking about the club or association that you are most actively involved with, and the other members ethnicity, how similar to you are they?

Data Type: factor (select one)

Value	Label
-9	Do not Know
1	Similar
2	More similar than dissimilar
3	Half-Half
4	Less similar than dissimilar
5	Dissimilar
8	Refused to answer

Variable Name: eq

Variable Label: Under each heading, please tick the ONE box that best describes your health TODAY.

Data Type: acknowledge

Variable Name: eq_1

Variable Label: 136. MOBILITY

Data Type: factor (select one)

Value	Label
1	I have no problems in walking about
2	I have slight problems in walking about
3	I have moderate problems in walking about
4	I have severe problems in walking about
5	I am unable to walk about

Variable Name: eq_2

Variable Label: 137. SELF-CARE

Data Type: factor (select one)

Value	Label
1	I have no problems cleaning my body or dressing myself
2	I have slight problems cleaning my body or dressing myself
3	I have moderate problems cleaning my body or dressing myself
4	I have severe problems cleaning my body or dressing myself
5	I am unable to clean my body or dress myself

Variable Name: eq_3

Variable Label: 138. USUAL ACTIVITIES (e.g. work, study, housework, family or leisure activities)

Data Type: factor (select one)

Value	Label
1	I have no problems doing my usual activities
2	I have slight problems doing my usual activities
3	I have moderate problems doing my usual activities
4	I have severe problems doing my usual activities
5	I am unable to do my usual activities

Variable Name: eq_4

Variable Label: 139. PAIN / DISCOMFORT

Data Type: factor (select one)

Value	Label
1	I have no pain or discomfort
2	I have slight pain or discomfort
3	I have moderate pain or discomfort
4	I have severe pain or discomfort
5	I have extreme pain or discomfort

Variable Name: eq_5

Variable Label: 140. ANXIETY / DEPRESSION

Data Type: factor (select one)

Value	Label
1	I am not anxious or depressed
2	I am slightly anxious or depressed
3	I am moderately anxious or depressed
4	I am severely anxious or depressed
5	I am extremely anxious or depressed

Variable Name: eq_6

Variable Label: We would like to know how good or bad your health is TODAY. This scale is numbered from 0 to 100. 100 means the best health you can imagine. 0 means the worst health you can imagine. Now, please show the scale to the respondent.

Data Type: acknowledge

Variable Name: eq_7

Variable Label: 141.1. YOUR HEALTH TODAY

Data Type: integer

Variable Name: trigger3

Variable Label: I am now going to ask you some questions about your stress and mental health. Please read/listen to each statement and the rating which indicates how much the statement applied to you OVER THE PAST WEEK . There are no right or wrong answers. Do not spend too much time on any statement

Data Type: trigger

Variable Name: **dass_start**

Variable Label: Start time (Do not change the values – swipe to next page)

Data Type: dateTime

Variable Name: **dass_1**

Variable Label: 142. I found it hard to wind down.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_2**

Variable Label: 143. I was aware of dryness of my mouth.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_3**

Variable Label: 144. I couldn't seem to experience any positive feeling at all.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_4**

Variable Label: 145. I experienced breathing difficulty (eg, excessively rapid breathing, breathlessness in the absence of physical exertion).

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_5**

Variable Label: 146. I found it difficult to work up the initiative to do things.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_6**

Variable Label: 147. I tended to over-react to situations.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_7**

Variable Label: 148. I experienced trembling (eg, in the hands).

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: dass_8

Variable Label: 149. I felt that I was using a lot of nervous energy.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: dass_9

Variable Label: 150. I was worried about situations in which I might panic and make a fool of myself.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: dass_10

Variable Label: 151. I felt that I had nothing to look forward to.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time

Value	Label
3	Applied to me very much, or most of the time

Variable Name: **dass_11**

Variable Label: 152. I found myself getting agitated.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_12**

Variable Label: 153. I found it difficult to relax.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_13**

Variable Label: 154. I felt down-hearted and blue.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_14**

Variable Label: 155. I was intolerant of anything that kept me from getting on with what I was doing.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_15**

Variable Label: 156. I felt I was close to panic.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_16**

Variable Label: 157. I was unable to become enthusiastic about anything.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_17**

Variable Label: 158. I felt I wasn't worth much as a person.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_18**

Variable Label: 159. I felt that I was rather touchy.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_19**

Variable Label: 160. I was aware of the action of my heart in the absence of physical exertion (eg, sense of heart rate increase, heart missing a beat).

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: **dass_20**

Variable Label: 161. I felt scared without any good reason.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time

Value	Label
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: dass_21

Variable Label: 162. I felt that life was meaningless.

Data Type: factor (select one)

Value	Label
-8	Refused to answer
0	Did not apply to me at all
1	Applied to me to some degree, some of the time
2	Applied to me to a considerable degree, or a good part of time
3	Applied to me very much, or most of the time

Variable Name: dass_end

Variable Label: End time (Do not change the values – swipe to next page)

Data Type: dateTime

Variable Name: trigger4

Variable Label: The following questions ask how you feel about your quality of life, health, or other areas of your life. I will read out each question to you, along with the response options. Please choose the answer that appears most appropriate. If you are unsure about which response to give to a question, the first response you think of is often the best one. Please keep in mind your standards, hopes, pleasures and concerns. We ask that you think about your life in the LAST FOUR WEEKS .

Data Type: trigger

Variable Name: whoqol_start

Variable Label: Start time (Do not change the values – swipe to next page)

Data Type: dateTime

Variable Name: whoqol_1

Variable Label: 163. How would you rate your quality of life?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very poor
2	Poor
3	Neither poor nor good
4	Good
5	Very Good

Variable Name: whoqol_2

Variable Label: 164. How satisfied are you with your health?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied
4	Satisfied
5	Very satisfied

Variable Name: whoqol_3

Variable Label: 165. To what extent do you feel that physical pain prevents you from doing what you need to do?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	An extreme amount
2	Very much
3	A moderate amount
4	A little
5	Not at all

Variable Name: whoqol_4

Variable Label: 166. How much do you need any medical treatment to function in your daily life?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	An extreme amount
2	Very much
3	A moderate amount
4	A little
5	Not at all

Variable Name: whoqol_5

Variable Label: 167. How much do you enjoy life?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	An extreme amount
2	Very much
3	A moderate amount
4	A little
5	Not at all

Variable Name: whoqol_6

Variable Label: 168. To what extent do you feel your life to be meaningful?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	An extreme amount
2	Very much
3	A moderate amount
4	A little
5	Not at all

Variable Name: whoqol_7

Variable Label: 169. How well are you able to concentrate?

Data Type: factor (select one)

Value	Label
-8	Refused to answer

Value	Label
1	Not at all
2	A little
3	A moderate amount
4	Very much
5	Extremely

Variable Name: whoqol_8

Variable Label: 170. How safe do you feel in your daily life?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Not at all
2	A little
3	A moderate amount
4	Very much
5	Extremely

Variable Name: whoqol_9

Variable Label: 171. How healthy is your physical environment?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Not at all
2	A little
3	A moderate amount
4	Very much
5	Extremely

Variable Name: whoqol_10

Variable Label: 172. Do you have enough energy for everyday life?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Not at all

Value	Label
2	A little
3	Moderately
4	Mostly
5	Completely

Variable Name: whoqol_11

Variable Label: 173. Are you able to accept your bodily appearance?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Not at all
2	A little
3	Moderately
4	Mostly
5	Completely

Variable Name: whoqol_12

Variable Label: 174. Have you enough money to meet your needs?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Not at all
2	A little
3	Moderately
4	Mostly
5	Completely

Variable Name: whoqol_13

Variable Label: 175. How available to you is the information that you need in your day-to-day life?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Not at all
2	A little

Value	Label
3	Moderately
4	Mostly
5	Completely

Variable Name: whoqol_14

Variable Label: 176. To what extent do you have the opportunity for leisure activities?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Not at all
2	A little
3	Moderately
4	Mostly
5	Completely

Variable Name: whoqol_15

Variable Label: 177. How well are you able to get around?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very poor
2	Poor
3	Neither poor nor good
4	Good
5	Very Good

Variable Name: whoqol_16

Variable Label: 178. How satisfied are you with your sleep?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied

Value	Label
4	Satisfied
5	Very satisfied

Variable Name: whoqol_17

Variable Label: 179. How satisfied are you with your ability to perform your daily living activities?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied
4	Satisfied
5	Very satisfied

Variable Name: whoqol_18

Variable Label: 180. How satisfied are you with your capacity for work?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied
4	Satisfied
5	Very satisfied

Variable Name: whoqol_19

Variable Label: 181. How satisfied are you with yourself?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied
4	Satisfied

Value	Label
5	Very satisfied

Variable Name: whoqol_20

Variable Label: 182. How satisfied are you with your personal relationships?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied
4	Satisfied
5	Very satisfied

Variable Name: whoqol_21

Variable Label: 183. How satisfied are you with your sex life?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied
4	Satisfied
5	Very satisfied

Variable Name: whoqol_22

Variable Label: 184. How satisfied are you with the support you get from your friends?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied
4	Satisfied
5	Very satisfied

Variable Name: whoqol_23

Variable Label: 185. How satisfied are you with the conditions of your living place?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied
4	Satisfied
5	Very satisfied

Variable Name: whoqol_24

Variable Label: 186. How satisfied are you with your access to health services?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied
4	Satisfied
5	Very satisfied

Variable Name: whoqol_25

Variable Label: 187. How satisfied are you with your transport?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Very dissatisfied
2	Dissatisfied
3	Neither satisfied nor dissatisfied
4	Satisfied
5	Very satisfied

Variable Name: whoqol_26

Variable Label: 188. How often do you have negative feelings such as blue mood, despair, anxiety, depression?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Never
2	Seldom
3	Quite Often
4	Very Often
5	Always

Variable Name: whoqol_end

Variable Label: End time (Do not change the values – swipe to next page)

Data Type: dateTime

Variable Name: smoking_1

Variable Label: 189. Have you ever smoked a whole cigarette

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: smoking_1a

Variable Label: 190. How old were you when you had your first whole cigarette

Data Type: integer

Variable Name: smoking_2

Variable Label: 191. Currently do you smoke tobacco everyday, less than everyday, or not at all?

Data Type: factor (select one)

Value	Label
-8	Refused to answer

Value	Label
1	Everyday
2	Less than everyday
3	Not at all

Variable Name: **smoking_3**

Variable Label: 192. In the past did you smoke tobacco everyday, less than everyday, or not at all?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Everyday
2	Less than everyday
3	Not at all

Variable Name: **smoking_4_year**

Variable Label: Years

Data Type: string

Variable Name: **smoking_4_month**

Variable Label: Months

Data Type: string

Variable Name: **smoking_5**

Variable Label: 194. How old were you when you started smoking everyday

Data Type: integer

Variable Name: **smoking_6**

Variable Label: 195. Of the following tobacco products, which ones did you smoke in the past month (select all that apply)

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Manufactured cigarettes excluding kretek
2	Hand rolled cigarettes
3	Kretek
4	Other

Variable Name: smoking_7

Variable Label: 196. On average, how many manufactured cigarettes do you smoke a day

Data Type: integer

Variable Name: smoking_8

Variable Label: 197. On average, how many hand rolled cigarettes do you smoke a day

Data Type: integer

Variable Name: smoking_9

Variable Label: 198. On average, how many kretek do you smoke a day

Data Type: integer

Variable Name: smoking_10

Variable Label: 199. Do you think you are addicted to cigarettes?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: smoking_11

Variable Label: 200. How difficult would you find it to quit smoking

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Very Easy
2	Easy
3	Possible but not easy
4	Difficult
5	Very Difficult
6	Impossible

Variable Name: **smoking_12**

Variable Label: 201. Have you ever tried to quit smoking?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: **smoking_13**

Variable Label: 202. In the past 12 months, how many times did you try to quit smoking

Data Type: factor (select one)

Value	Label
-9	Do not Know
-8	Refused to answer
1	Once
2	Twice
3	Three times
4	More than three time
5	None

Variable Name: **drinking_1**

Variable Label: 203. Have you consumed an alcoholic drink within the past 30 days?

Data Type: factor (select one)

Value	Label
-8	Refused to answer

Value	Label
1	Yes
2	No

Variable Name: drinking_2

Variable Label: 204. During the past 30 days, when you consumed an alcoholic drink, how often was it with meals? Please do not count snacks.

Data Type: factor (select one)

Value	Label
1	Always with a meal
2	Usually with a meal
3	Half the time with a meal
4	Rarely with a meal
5	Never with a meal

Variable Name: drinking_3

Variable Label: 205. During the past 30 days, have you drunk so much that you woke up somewhere without remembering how you got there?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: nutrition_1

Variable Label: 206. On average, how many meals (of the 21 meals in a week? breakfast, lunch and dinner) do you eat in a restaurant, food stall, mamak

Data Type: decimal

Variable Name: nutrition_2

Variable Label: 207. How many servings of fruit do you eat on a typical day? (Banana, mango, apple, orange, papaya, pineapple, grapefruit, pear, dragon fruit, honeydew, guava, etc)

Data Type: decimal

Variable Name: nutrition_3

Variable Label: 208. How many servings of vegetables do you eat on a typical day? (Tomato, cauliflower, potato, spinach, cucumber, kale, cabbage, mustard etc)

Data Type: decimal

Variable Name: nutrition_4

Variable Label: 209. In the last 12 months, how often did you ever eat less than you felt you should because there wasn't enough food?

Data Type: factor (select one)

Value	Label
1	Every month
2	Almost every month
3	Some months, but not every month
4	Only in 1 or 2 months
5	Never

Variable Name: nutrition_5

Variable Label: 210. In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

Data Type: factor (select one)

Value	Label
1	Every month
2	Almost every month
3	Some months, but not every month
4	Only in 1 or 2 months
5	Never

Variable Name: physical_1

Variable Label: 211. Does your work involve VIRGOROUS-INTENSITY activities 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?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: **physical__2**

Variable Label: 212. In a typical week, on how many days do you do VIRGOROUS-INTENSITY activities as part of your work?

Data Type: string

Variable Name: **physical__3__hour**

Variable Label: Hours

Data Type: string

Variable Name: **physical__3__minute**

Variable Label: Minutes

Data Type: string

Variable Name: **physical__4**

Variable Label: 214. Does your work involve MODERATE-INTENSITY activities, that causes small increases in breathing or heart rate such as brisk walking [or carrying light loads] for at least 10 minutes continuously?

[INSERT EXAMPLES] (USE SHOWCARD)

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: **physical__5**

Variable Label: 215. In a typical week, on how many days do you do MODERATE-INTENSITY activities as part of your work?

Data Type: string

Variable Name: physical_6_hour

Variable Label: Hours

Data Type: string

Variable Name: physical_6_minute

Variable Label: Minutes

Data Type: string

Variable Name: physical_7

Variable Label: 217. Do you walk or use a pedal bicycle for at least 10 CONTINUOUS minutes to get to and from places

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: physical_8

Variable Label: 218. In a typical week, on how many days do you walk or bicycle for at least 10 CONTINUOUS minutes to get to and from places?

Data Type: string

Variable Name: physical_9_hour

Variable Label: Hours

Data Type: string

Variable Name: physical_9_minute

Variable Label: Minutes

Data Type: string

Variable Name: physical_10

Variable Label: 220. Do you do any VIRGOROUS-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?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: physical_11

Variable Label: 221. In a typical week, on how many days do you do VIRGOROUS-INTENSITY sports, fitness or recreational (leisure) activities?

Data Type: string

Variable Name: physical_12_hour

Variable Label: Hours

Data Type: string

Variable Name: physical_12_minute

Variable Label: Minutes

Data Type: string

Variable Name: physical_13

Variable Label: 223. Do you do any MODERATE-INTENSITY sports, fitness or recreational (leisure) activities that cause small increases in breathing or heart rate like such as brisk walking, [cycling, swimming, volleyball] for at least 10 minutes continuously?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: physical_14

Variable Label: 224. In a typical week, on how many days do you do MODERATE-INTENSITY sports, fitness or recreational (leisure) activities?

Data Type: string

Variable Name: physical_15_hour

Variable Label: Hours

Data Type: string

Variable Name: physical_15_minute

Variable Label: Minutes

Data Type: string

Variable Name: physical_16_hour

Variable Label: Hours

Data Type: string

Variable Name: physical_16_minute

Variable Label: Minutes

Data Type: string

Variable Name: hypertension_1

Variable Label: 227. Have you ever had your blood pressure measured by a doctor or other health worker

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: hypertension_2

Variable Label: 228. Have you ever been told by a doctor or other health worker that you have raised blood pressure or hypertension?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: hypertension_3

Variable Label: 229. Have you been told this in the past 12 months?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: hypertension_4

Variable Label: 230. Have you taken any drugs (medication - not Traditional Chinese Medicine (TCM)) in the past 2 weeks for your blood pressure

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: hypertension_5

Variable Label: 231. In the past 12 months, have you seen a traditional healer or TCM practitioner for raised blood pressure or hypertension

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes

Value	Label
2	No

Variable Name: hypertension_6

Variable Label: 232. In the past 12 are you currently taking any herbal or traditional remedy for raised blood pressure or hypertension

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: diabetes_1

Variable Label: 233. Have you ever had your blood sugar measured by a doctor or other health worker

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: diabetes_2

Variable Label: 234. Have you ever been told by a doctor or other health worker that you have raised blood sugar or diabetes?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: diabetes_3

Variable Label: 235. Have you been told this in the past 12 months?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: diabetes_4

Variable Label: 236. Are you currently receiving insulin for your diabetes or raised blood sugar

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: diabetes_5

Variable Label: 237. Have you taken any drugs (medication not TCM) in the past 2 weeks for your diabetes or raised blood sugar?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: diabetes_6

Variable Label: 238. In the past 12 months, have you seen a traditional healer or TCM practitioner for raised blood sugar or diabetes

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: diabetes_7

Variable Label: 239. In the past 12 months, are you currently taking any herbal or traditional remedy for raised blood sugar or diabetes?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: tech_1

Variable Label: 240. Do you own a smartphone?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: tech_1a

Variable Label: 241. Do you have data access for your smartphone?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: tech_2

Variable Label: 242. Do you own a tablet?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: tech_2a

Variable Label: 243. Do you have data access for your tablet?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: tech_3

Variable Label: 244. Do you own a laptop computer?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: tech_4

Variable Label: 245. Do you have internet access from home?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: tech_5

Variable Label: 246. On average how often would you access the internet each week?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	More than once per day

Value	Label
2	Once per day
3	Once every two days
4	At least twice a week
5	At least once per week
6	At least once per fortnight
7	At least once per month
8	Less than once per month
9	Never

Variable Name: demographic_8

Variable Label: 247. Phone number

Data Type: string

Variable Name: bp_start

Variable Label: Start time (Do not change the values – swipe to next page)

Data Type: dateTime

Variable Name: bp_1

Variable Label: 248. Enter device ID for blood pressure

Data Type: unknown (calculate)

Variable Name: bp_1a

Variable Label: 248. Enter device ID for blood pressure: \${bp_1}

Data Type: string

Variable Name: bp_2

Variable Label: 249. Which arm will you use for BP measurement, it should be the left

Data Type: factor (select one)

Value	Label
1	Left
2	Right

Variable Name: bp_3

Variable Label: 250. Arm circumference (cm)

Data Type: decimal

Variable Name: bp_4

Variable Label: 251. Cuff Size

Data Type: factor (select one)

Value	Label
1	Small (16 - 22 cm)
2	Medium (23 - 32 cm)
3	Large (>32 cm)

Variable Name: bp_5

Variable Label: 252. Systolic1

Data Type: integer

Variable Name: bp_6

Variable Label: 253. Diastolic1

Data Type: integer

Variable Name: bp_7

Variable Label: 254. Heart Rate1

Data Type: integer

Variable Name: bp_8

Variable Label: 255. Any problems with BP measurement 1 (e.g., misplaced cuff)?

Data Type: factor (select one)

Value	Label
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Value	Label
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1	Yes
---	-----

2	No
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Variable Name: bp_9

Variable Label: 256. Systolic2

Data Type: integer

Variable Name: bp_10

Variable Label: 257. Diastolic2

Data Type: integer

Variable Name: bp_11

Variable Label: 258. Heart Rate2

Data Type: integer

Variable Name: bp_12

Variable Label: 259. Any problems with BP measurement 2 (e.g., misplaced cuff)?

Data Type: factor (select one)

Value	Label
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1	Yes
---	-----

2	No
---	----

Variable Name: bp_13

Variable Label: 260. Systolic3

Data Type: integer

Variable Name: bp_14

Variable Label: 261. Diastolic3

Data Type: integer

Variable Name: bp_15

Variable Label: 262. Heart Rate3

Data Type: integer

Variable Name: bp_16

Variable Label: 263. Any problems with BP measurement 3 (e.g., misplaced cuff)?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: bp_17

Variable Label: 264. During the past 2 weeks have you been treated for raised blood pressure with drugs (medication) prescribed by a doctor or other health worker

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: bp_end

Variable Label: End time (Do not change the values – swipe to next page)

Data Type: dateTime

Variable Name: bg_start

Variable Label: Start time (Do not change the values – swipe to next page)

Data Type: dateTime

Variable Name: bg_1_hour

Variable Label: Hours

Data Type: string

Variable Name: bg_1_minute

Variable Label: Minutes

Data Type: string

Variable Name: bg_2

Variable Label: 267. Enter device id for blood glucose

Data Type: unknown (calculate)

Variable Name: bg_2a

Variable Label: 267. Enter device id for blood glucose: \${bg_2}

Data Type: string

Variable Name: bg_4

Variable Label: 268. Blood Glucose

Data Type: decimal

Variable Name: bg_5

Variable Label: 269. Any problems with the blood glucose measurement

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: bg_5_yes

Variable Label: 270. If yes, please specify the problem:

Data Type: string

Variable Name: bg_6

Variable Label: 271. During the past 2 weeks have you been treated for raised blood glucose or diabetes with insulin or other drugs (medication) prescribed by a doctor or other health worker

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: bg_end

Variable Label: End time (Do not change the values – swipe to next page)

Data Type: dateTime

Variable Name: hw_start

Variable Label: Start time (Do not change the values – swipe to next page)

Data Type: datetime

Variable Name: hw_1

Variable Label: 272. Can ___ stand straight

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: hw_2

Variable Label: 273. Can ___ move and stand on the weighing scales without assistance

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: hw__3

Variable Label: 274. Enter device ID for height and weight

Data Type: unknown (calculate)

Variable Name: hw__3a

Variable Label: 274. Enter device ID for height and weight: \${hw__3}

Data Type: string

Variable Name: hw__4

Variable Label: 275. Height (cm)

Data Type: decimal

Variable Name: hw__5

Variable Label: 276. Arm Span (cm)

Data Type: decimal

Variable Name: hw__6

Variable Label: 277. Weight (kg)

Data Type: decimal

Variable Name: hw__7

Variable Label: 278. Are you pregnant?

Data Type: factor (select one)

Value	Label
-8	Refused to answer
1	Yes
2	No

Variable Name: hw__8

Variable Label: 279. Enter device ID for waist

Data Type: unknown (calculate)

Variable Name: hw__8a

Variable Label: 279. Enter device ID for waist: \${hw__8}

Data Type: string

Variable Name: hw__9

Variable Label: 280. Waist circumference (cm)

Data Type: decimal

Variable Name: hw__10

Variable Label: 281. Do you think the waist measurement was done correctly?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: hw__end

Variable Label: End time (Do not change the values – swipe to next page)

Data Type: datetime

Variable Name: referral

Variable Label: 282. Referral leaflet serial number

Data Type: string

Variable Name: quality

Variable Label: 283. On a scale of 0 to 10 how well do you think you recorded the data?

Data Type: integer

Variable Name: honesty

Variable Label: 284. On a scale of 0 to 10 how well do you think the respondent was to your questions?

Data Type: integer

Variable Name: respondent_complaint

Variable Label: Have the respondent complaint that SEACO visited the house too frequent?

Data Type: factor (select one)

Value	Label
1	Yes
2	No

Variable Name: field_notes

Variable Label: Field notes

Data Type: string

Variable Name: remarks

Variable Label: If the form is incomplete, please state here

Data Type: string