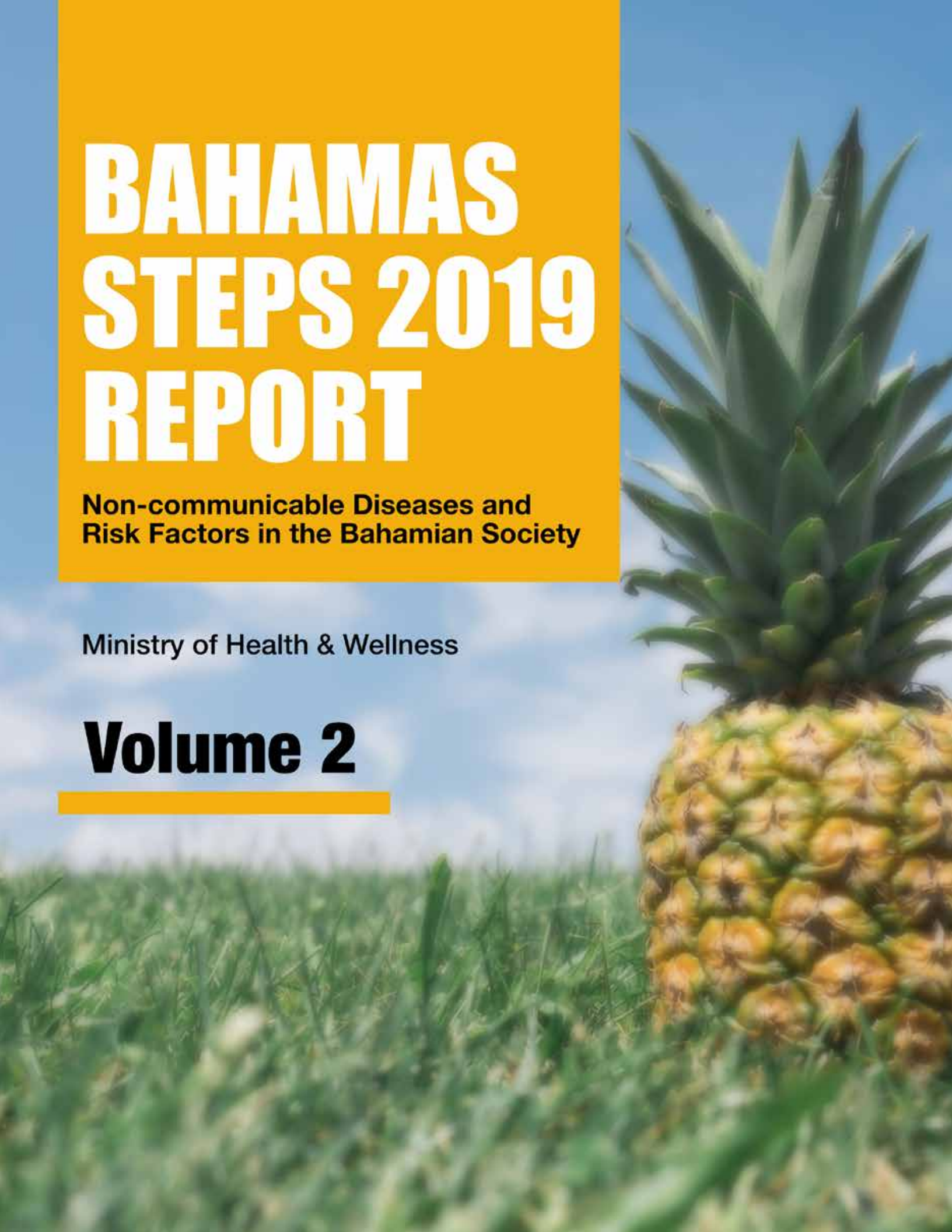
BAHAMAS STEPS 2019 REPORT

Non-communicable Diseases and Risk Factors in the Bahamian Society

Ministry of Health & Wellness

Volume 2



2019 BAHAMAS NCD RISK FACTOR REPORT

MINISTRY OF HEALTH & WELLNESS

STEPS

Pan American Health Organization

World Health Organization

Americas

The Bahamas 2019 Report of the Pan American STEPS NCD Risk Factor Surveillance Survey

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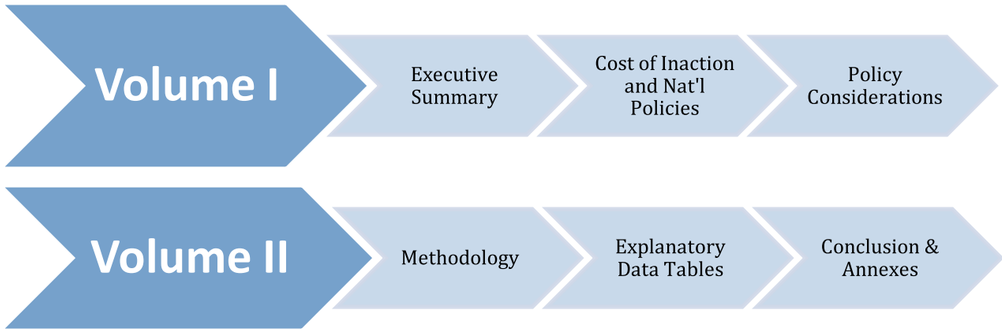
SPECIAL NOTES

This publication of the STEPS 2019 Survey findings is presented in two complementary volumes.



The study was executed in 2019 and Report published in 2022. This delay was the result of shifting priorities due to Hurricane Dorian and the Covid-19 pandemic.

2019 BAHAMAS NCD RISK FACTOR REPORT

Message From
The Minister of Health & Wellness

Non-Communicable diseases (NCDs) continue to be a challenge both globally and regionally and constitute a significant burden for populations across the globe. Data from The World Health Organization (WHO) has identified obesity, chronic heart disease, hypertension, diabetes, and some cancers as the top five causes of death in the region over the past decade.

NCDs have become a major burden on the Bahamian health system with significant economic impact on the public purse. Not only has the burden of NCDs has been exacerbated during the Covid-19 pandemic, but the implications of the increased vulnerabilities and health risks associated with NCDs in individuals have been highlighted through an increased mortality rate. These realities have once again attracted new attention to NCDs and the need to re-orientate health and other systems to intentionally address the prevention and mitigation of morbidity associated with them.

The United Nations' Sustainable Development Goal 3 focuses on ensuring healthy lives and well-being for all. One of the targets of this goal includes reducing by one-third by the year 2030, premature mortality from NCDs through prevention, early identification, and treatment. Knowing one's family's health history, adopting healthy habits such as more water, engaging in daily physical activity and getting regular health screenings are just some of the practices that can mitigate the risks of NCDs occurring or progressing to complications, including death.

The health and wellness of the people of the Commonwealth of The Bahamas remains a priority of this Government, and this stewardship has been entrusted to the Ministry of Health & Wellness. In the 2022-2023 Budget, 2.5 million dollars was allocated to the Ministry to specifically address health and wellness and will be directed at decreasing the incidence of NCDs in this country. Additionally, improved health infrastructure and the expansion of technology in the public health system will auger well for improved access to quality health services, offering a good return on investment in the pursuit of achieving an overall healthier lifestyle.

The Government is committed to making the decisions, crafting the necessary legislation, and guiding the implementation of the policies that are necessary to reduce the occurrence of NCDs. The foregoing notwithstanding, the Government can only improve the environment to facilitate a change to healthier personal lifestyle choices. It is incumbent on individuals to make a determined choice for a healthier existence, and for stakeholders to work collaboratively and cooperatively to reduce NCDs and improve health and wellness across the archipelago.

The conclusions presented in this 2019 STEPS Survey Bahamas Report are fundamental for our country and will guide the way forward for the implementation and sustainability of the strategies, initiatives, and programmes to promote health and wellness and enhance our modalities for healthcare delivery.

The Hon. Dr. Michael R. Darville, M.P.
Minister of Health & Wellness

Message From
The Chief Medical Officer

Individual and collective health are without doubt the fuel for our pressing onward and marching together to loftier goals. Attaining these goals, are in peril to a magnitude never contemplated nor seen. As decades passed, more and more of our people are experiencing and at risk for potentially developing a non-communicable disease (NCD), resulting in disability, reduced quality of life and premature death due to hypertension, diabetes, cardiovascular disease, cancer, and mental health illnesses.

Unhealthy lifestyles are categorically implicated; and are being perpetuated to across generations. These lifestyle choices include, but are not exclusive to, excess consumption of salt, sugars, and fats; over-indulgence in ultra-processed foods and simple carbohydrates; as well as the harmful use of alcohol and tobacco use.

Addressing lifestyle behaviors do not rest solely with the health sector. In fact, the co-occurrence of multiple risk factors demands urgent, meaningful, and coordinated action across all sectors to effectively address the social determinants of health, while simultaneously innovating to redesign our health systems. The new order of the day, to keep more of our people in better states of health and wellness, must also address root causes, or the structural determinants of the social determinants of health inequities. This requires adopting the Health in All Policies (HiAP) approach with infusion of health considerations in the development of policy in every sector which can potentially affect health and inequities in health. Diminished quality of life and increasing premature deaths, that often accompany NCDs will then be in our reach.

The statistics revealed in the STEPS 2019 Report underscore that our nation is at a critical and perilous crossroad. It is clear, inaction is no longer an option if we are to realize the great potential of our land and our people. The revelations contained in these pages, are envisioned to catalyze a revolution to sharply bend the trajectory of non-communicable diseases and their risk factors in our country.

I commend the work that produced the STEPS 2019 Report. Profound appreciation is extended to the nearly thirty-nine hundred STEPS survey participants across seven islands; and the almost eighty fieldworkers and supervisors whose work has borne fruit. Ministry of Finance and the Pan American Health Organization (PAHO) are acknowledged for being trusted partners with the Ministry of Health & Wellness (MoHW) on this and many other endeavors.

I close by paraphrasing the words of William James, we must act as if what we do 'now' makes a difference, because it does. It takes all of us – assuming individual and collective responsibility – to press forward, upward onward together to those loftier goals of better health and well-being for all

Dr. Pearl McMillan
Ministry of Health & Wellness

Message From
PAHO/WHO Country Representative

Non-communicable diseases (NCDs) are a major health burden, causing much morbidity, mortality and disability globally. NCDs are estimated to be responsible for over 70% of all deaths in the world. NCDs also threaten to overwhelm health systems, and have high socio-economic costs associated with them. As such the prevention and control of NCDs is vital to sustainable development in all countries.

NCDs tend to be of long duration and are the result of a combination of genetic, physiological, environmental and behavioural factors. However, the rise of NCDs has been driven by primarily four major risk factors: tobacco use, physical inactivity, the harmful use of alcohol and unhealthy diets. Persons throughout the life course, from children, to adults, to the elderly are all vulnerable to these risk factors. The control of these risk factors is therefore an important focus for the prevention and control of NCDs.

Surveillance, particularly measuring and monitoring trends, of these common risk factors for NCDs is essential for guiding policy, priorities and programmes aimed at reducing these common modifiable risk factors. The World Health Organization (WHO) STEPwise approach to NCD risk factor surveillance (STEPS) is a simple, standardized method for collecting, analysing and disseminating data on key NCD risk factors. It facilitates routine monitoring of the risk factors within a country over time, as well as comparisons among countries.

The Pan American Health Organization (PAHO)/WHO was pleased to provide technical assistance to The Bahamas when it conducted its first STEPs survey in 2011-2012 and is equally pleased to have been able to provide support for this survey conducted in 2019.

PAHO/WHO congratulates The Bahamas on completing this second STEPS survey and publishing the survey report, which provides important information on the key risk factors for NCDs in the country. The findings and recommendations will be essential to the development of evidence-based policies, programmes and interventions to combat the increasing health, economic and development burden due to NCDs. PAHO/WHO is committed to continuing to provide technical cooperation to The Bahamas in this regard and to raising political and public awareness and understanding of the burden of the most common NCDs and their related risk factors. We look forward to working together with the country across sectors, and in collaboration with other partners, to reduce the risks and burden of NCDs to improve the physical, mental, and social wellbeing for the people of The Bahamas.

Eldonna Boisson
PAHO/WHO

ACKNOWLEDGEMENTS

The Ministry of Health (MOH) is deeply grateful to all participants in the STEPS Survey. Without their valuable cooperation, this undertaking would not have been a success.

Current and former executive leaders of the MOH, including Dr. The Hon. Michael Darville as well as Dr. The Hon. Duane Sands and The Hon. Renward Wells, present and immediate past Ministers of Health, respectively, and Dr. Pearl McMillan, Chief Medical Officer, are commended for their vision and recognition of non-communicable diseases (NCDs) as an important health concern. These individuals have demonstrated unrelenting support for research to better understand the extent of the burden of NCDs and their risk factors in The Bahamas. This is greatly appreciated given that the results will go a long way to increase understanding about these patterns in The Bahamas. Additionally, policies emanating from the findings will be targeted toward reducing the impact of NCDs and related factors in the population.

The execution of the 2019 STEPS Survey was made possible through the generous conducting provision of technical and financial support by the Pan American Health Organization/World Health Organization (PAHO/WHO). We are indebted to the PAHO/WHO Bahamas Office under the leadership of Dr. Eldonna Boisson and Dr. Esther de Gourville, current and former PAHO/WHO representatives, respectively, for their commitment to this exercise. Warm gratitude is expressed to PAHO's NCD Surveillance team at the Washington D.C., U.S.A., office led by Dr. Roberta Caixta (Advisor, NCD Surveillance, Prevention and Control), and Dolores Ondarshu (NCD Specialist, NCD Monitoring and Surveillance), both of whom were instrumental in providing direct technical support in the project planning, training, data management and analysis phases.

Planning and executing a survey of this magnitude is no small undertaking, therefore, the work of the planning committee is indeed noteworthy. In this regard, great appreciation is expressed to Dr. Cherita Moxey (Principal Investigator/Project Lead); Camille Nairn (Epidemiologist); Dr. Keva Thompson (former PAHO NCD Consultant); Britney Jones (former PAHO Consultant); Annouch Ambrister (Administrative Cadet); Cypreanna Winters, (Statistician, Bahamas National Statistical Institute);

Sincere gratitude is extended for all of the significant work of the principal writer of the report, Dr. Cherita Moxey, as well as contributing writers for Volume II – Cypreanna Winters and Britney Jones. Profound gratitude is extended to Glenise Johnson (Epidemiologist) and Camille Nairn for the additional data analyses performed.

Finally, heart-felt thanks to all of the supervisors, interviewers, support staff, and the entire survey team, including those whose names may not have been mentioned specifically, for their much-valued commitment to the project.
May The Bahamas flourish as a nation rich in good health!

ABBREVIATIONS

ACS	American Cancer Society
ASI	Age-standardized incidence
BAC	Blood (or breath) alcohol concentration
BBSQ	Bahamas Bureau of Standards
BMI	Body Mass Index
CPI	Consumer price index
CVD	Cardiovascular disease
CWD	Caribbean Wellness Day
DALY	Disability-adjusted life years
DRE	Digital rectal examination
DM	Diabetes
DSP	Diastolic blood pressure
ESRD	End-stage renal disease
FCTC	Framework Convention on Tobacco Control
GDP	Gross domestic product
HBC	Healthy Bahamas Coalition
HiAP	Health-In-All Policies
HPV	Human papillomavirus
HTN	Hypertension
mg/dL	Milligrams per deciliter
MI	Myocardial infarction
mmHg	Millimeters of mercury
MoHW	Ministry of Health & Wellness
NIB	National Insurance Board
NCDs	Non-communicable diseases
NPDP	National Prescription Drug Plan
NHI	National Health Insurance
PAHO	Pan American Health Organization
PSA	Prostate specific antigen
RBPF	Royal Bahamas Police Force
RTA	Road traffic accident
RR	Risk ratio
SBP	Systolic blood pressure
SDH	Social determinants of health
SDGs	Sustainable Development Goals
SSBs	Sugar-sweetened beverages
STEMI	ST elevation myocardial infarction
TV	Television
UN	United Nations
WHO	World Health Organization
WHR	Waist-to-hip ratio

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SURVEY GOALS & OBJECTIONS

Goal

The goal of the survey was to assess the prevalence of selected NCD risk factors in among the persons aged 18-69 years who live in The Bahamas.

Objectives

The objectives for this survey exercise included: -

- To describe the current levels of selected behavioural risk factors in the population such as harmful alcohol consumption, unhealthy diets, physical inactivity, and tobacco use andexposure
- To measure the prevalence of biological risk factors (raised blood pressure, body mass index, raised blood glucose, raised cholesterol, sodium intake).
- To assess effectiveness of the responsive of the national health system in terms of coverage with early detection and treatment of targeted cardiovascular disease risk factors, including hypercholesterolemia, diabetes, and hypertension.
- To assess the coverage, availability and use of screening and testing services for breast, cervical, colorectal, and prostate cancer.
- To assess the oral health practices of the adult population.
- To assess the prevalence and types of violence and injury metrics
- To track key indicators related to suicide
- To support planning and evaluating NCD policy and programme interventions by the provision of strategic data points through which policy and programmes can be informed.

METHODOLOGY

Survey Design & Sampling Frame

The Non-Communicable Diseases Risk Factors STEPS survey is the Pan-American Health Organization/ World Health Organization's recommended tool for surveillance of chronic non- communicable diseases (NCDs) and their risk factors. It provides an entry point for low- and middle-income countries to get started on NCD surveillance activities. It is also designed to help countries build and strengthen their capacity to conduct surveillance. The STEPS approach uses a representative sample of the study population and allows for results to be generalized to the population.

Survey Scope

The Survey targeted 3,840 dwellings, which were randomly selected throughout the country. Among these, there were 2,939 occupied households. Households with occupants that agreed to participate (n=2,365) were interviewed by specially trained interviewers and data gathering activities occurred over a period of several months. Data collection was supported by eSTEPS – a suite of software that allowed for the collection of the required STEPS data using personal digital assistants.

The STEPS survey protocol employed activities to collect data that described behavioural and biological risk factors across the population through 3 distinct "steps" and included the following components: -

- STEP 1 is designed to capture demographic and behavioural data and involved the face- to-face interview of participants to assess behavioural risk factors and health history related to non-communicable diseases in household settings

- STEP 2 is designed to capture physical measurements and involved physical measurements to assess blood pressure, height, weight, waist circumference and hip circumference in household settings.

- STEP 3 is designed to capture biochemical measurements and involved the measurementof fasting blood glucose, total cholesterol, and urinary sodium and creatinine in household settings.

Within the Step 1, there were three levels of data collection which included core, expanded, and optional questions. Step 2 included data collection from the core and expanded options and Step 3 only involved the core data collection options.

The optional and expanded modules enumerated as part of the data collection on risk factors for non-communicable diseases in The Bahamas were demographic information, tobacco use, alcohol consumption, diet and diet routine, physical activity – sedentary behaviour, family history, oral health, sexual health, violence and injury and mental health/suicide.

Study Population

The population targeted for the study was all adults aged 18 to 69 years residing in The Bahamas during the period of data collection.

Survey Design

The survey design was based on data from the 2010 Population and Housing Census. The census provides information on the number of dwellings in the country at enumeration district (ED) level, conditions of the dwelling units, as well as basic characteristics of the population, such as age, sex, education, and economic activity. The ED was the smallest area used in the collection of census data and they formed an integral part of the survey design.

For the survey certain areas (mainly Cays) were excluded from the frame. They were EDs 01, 09, 14 and 15 in South Abaco and EDs 01, 02 and 03 in Exuma, as well as the Berry Islands and Ragged Island. Additionally, EDs 01, 02 and 03 in St. Thomas Moore, EDs 01 and 02 in Clifton, both areas in New Providence, were also excluded.

Sample Size

The Survey was aimed at 3,840 dwellings, which were to be randomly selected throughout the country. Selected dwellings were assessed for occupancy status. For occupied dwellings (households), using the Hirsh method, individuals were to be interviewed by specially trained interviewers.

An estimated prevalence of 50% was the most conservative one and it required the highest sample size. However, since no prevalence estimates existed for the indicators of interest, it was agreed that the sample size be calculated using 50% as the baseline level for indicators.

Indicator	Value
Level of Confidence Measure	1.96
Margin of Error (MOE)	0.05
Baseline levels of the indicators	0.5
Design effect (Deff)	1
Expected Response Rate	.80
Number of age/sex Estimates	8

An initial indicator of needed sample size was calculated assuming a simple random sample. The initial calculation was then corrected for the loss of sampling efficiency due to the use of cluster sampling.

$$= Z^2 \frac{P(1-P)}{e^2}$$

Sample Selection

Cluster sampling is one of the most common and suitable sampling methods used in national surveys. It allows for national representative samples to be selected from the total population and it uses probability proportional to size (PPS). Probability proportional to size (PPS) sampling is a method of sampling from a finite population in which a size measure is available for each population unit before sampling and where the probability of selecting a unit is proportional to its size.

For this survey, the islands were first grouped by using the poverty rates from the latest Expenditure survey to form the strata. The standard from that survey categorized Group 1 as New Providence, 2 - Grand Bahama, 3 - Abaco, 4 - Andros and Eleuthera-including Harbour Island and Spanish Wells, Group 5 -Exuma and Long Island, with the remainder of the Family Islands forming Group 6. Groups or clusters of households that were to be interviewed were from the various selected EDs from each group.

Table 1. Islands and Regions of The Bahamas with Poverty Rates

ISLAND/REGION	POVERTY RATES
1. New Providence	12.58
2. Grand Bahama	9.69
3. Abaco	20.32
4.Andros & Eleuthera	17.33
5.Exuma and Long Island	14.71
6. Other Family islands	11.44
7.All Bahamas	12.76

Due to logistical challenges, the decision was taken to use large workable cluster sizes ranging from 20 to 25 households to reduce the number of primary sampling units or EDs to be visited. Additionally, it was also necessary to keep the cluster sizes as close as possible to reduce the sampling error

A three-stage design was used, with the selection of the primary sampling units (PSU) being the first stage. The PSUs (EDs) were selected with probability proportional to size, that is, the number of households in the ED at the time of the census. The design also considered the need to make statements about the groups and about the larger islands among the first two groups. Each of these islands were therefore given at least 220 households. This means that the sampling fraction varies from group to group. The second stage was the selection of a cluster of households, the secondary sampling unit (SSU) from the selected EDs.

The proportion of persons 18 years old and over with 4 years of high school education and higher was used to arrange the EDs within supervisory district in each of the islands. The EDs were arranged in descending order of these proportions.

Each group was allocated a few clusters determined by the number of households in the group, the sampling fraction to be used and an initial approximate cluster size, such that the desired number of households in the survey for each group, as indicated above, can be achieved.

EDs were assigned clusters based on their size or the number of households in the ED.

To allocate the cluster assigned to a group among the EDs, the number of households in each ED was divided by the average cluster size for the group. This number was rounded up or down to the nearest whole number. These, when summed, must be equal to the total number of clusters assigned to the group. In Group 4, “the other family islands” for example, there were 1979 households. A sample of 1 in 9 would yield the 220 households. The total of 1979 households will result in 81 clusters of an average size of 24.4 households

The total number of households expected to be interviewed in the survey was estimated to be about 3840.

Before selecting the households for the sample, EDs were systematically selected within each group. This was done by accumulating the number of clusters in the EDs with the cumulated number being placed next to the ED (see table following). A random number was selected between 1 and the inverse of the sampling fraction of the group that is between 1 and 60, 1 and 13, 1 and 8 and 1 and 9 for the respective groups. The inverse of the sampling fraction was the sampling interval. The sampling interval was added to the randomly selected number and the process was repeated until the number of clusters for the group was reached but not exceeded.

In the case of Group1, the random number selected was 27. With an interval of 60, this meant that clusters 27, 87, 147, 207, etc. were selected. The EDs within which these clusters fell became a selected ED. For example, in Group 1, New Providence and Grand Bahama; EDs indicated with '#' were selected EDs because clusters 27, 87, 147, 207 and 267 fell within these EDs.

Table 2. Enumeration Districts per Constituency for STEPS Survey Sampling Selection

STEPS SURVEY						
	EDNO	18+ with 4+ yearsHigh School	No. of H/holds	No. of Clusters Assigned	Cumulated Clusters	E.D.'s Selected R. S=27
NEW PROVIDENCE						
Yamacraw	11601	100.0	88	4	4	
	12001	97.7	53	3	7	
	11501	95.7	124	6	13	
	11901	94.3	61	3	16	
	10701	92.5	147	7	23	
	10601	92.2	111	6	29	#
	10901	89.0	145	7	36	
	10801	88.2	103	5	41	
	11001	88.0	160	8	49	
	11201	86.7	75	4	53	
	10201	86.4	118	6	59	
	11101	85.7	106	5	64	
	11701	84.0	115	6	70	
	11401	82.1	103	5	75	
	11801	80.6	72	4	79	
	10301	79.1	113	6	85	
	10401	78.8	91	5	90	#
	10101	76.8	105	5	95	
	11301	74.8	120	6	101	
	10501	73.7	161	8	109	
ELIZABETH	22601	97.8	187	9	118	
	21101	92.4	235	12	130	
	20801	89.8	117	6	136	
	21301	88.4	126	6	142	
	22301	87.3	143	7	149	#
	20401	86.6	97	5	154	
	22401	85.7	44	2	156	
	21701	85.0	63	3	159	
	20301	84.7	148	7	166	
	21001	84.3	133	7	173	
	20501	83.9	154	8	181	
	21201	82.9	89	5	186	
	20601	81.5	112	6	192	
	22501	80.3	149	8	200	
	20201	80.1	106	5	205	
	20701	80.1	86	4	209	#
	21401	78.0	222	11	220	
	21601	78.0	143	7	227	
	22101	75.3	99	5	232	
	20901	70.6	175	9	241	

	21801	66.1	109	6	247	
	20101	53.3	121	6	253	
	22201	48.9	115	6	259	
	22001	45.7	21	1	260	
	21501	30.8	140	7	267	#

The second stage of the design was the selection of the USU or households to be interviewed. For the selection of households within EDs, the procedure is the same, with the interval being the number of clusters assigned to the ED. For example, ED 06 in Yamacraw, the clusters assigned is 6 because it had 111 households. The randomly selected number between 1 and 6 was 4, therefore households 4, 10, 16, 22, 28, 34, 40, 46, 52, 58, 64, 70, 76, 82, 88, 94, 100 and 106 were selected. Note that 106 is less than 111. However, if 6 was added it would make household 112 eligible for interviewing. But that would exceed 111. There is no household 112. If, however, while the survey was being carried out, and the listing of the ED done as is required and there were now 115 households then household 112 would have become eligible for being selected and being interviewed.

Table 3. Distribution of Enumerators and Supervisors for STEPS Survey Field Work

ISLAND	**NO. OF HOUSEHOLD**	**NO. OF ENUMERATORS**	**NO. OF SUPERVISORS**
NEW PROVIDENCE	2,800	56	13
GRAND BAHAMA	580	11	2
ABACO	200	4	1
CAT ISLAND	45	1	0
INAGUA	45	1	0
EXUMA	80	2	0
ELEUTHERA	90	2	0
TOTAL	**3,840**	**77**	**14**

The Tertiary Sampling Unit (TSU) is the individual in the household. The Kish Method was used to select individuals from each household in the survey

Sampling Errors

The sampling design for the STEPS survey was a self-weighting design. This meant that the probability of the selection of a household was the same for all households in the population, which in effect resulted in a fixed sampling interval for all strata. The sampling fraction was different for each stratum (group).

To preserve the self-weighting nature of the sample, adjustment factors were applied at the ED level for non-responses. The adjustment factor was the total number assigned under the self- weighting design divided by the number of dwellings for which data were finally accepted for analysis. The underlying assumption of this method was that both the non-responding and responding households had similar features.

Adjustment factor = Sampling fraction for each stratum X (No. of assigned dwellings/ No. of dwellings accepted for analysis).

The formulae for the estimation of the sample mean and its variance are as follows:

Estimation Procedures

Estimator of Total Number

The estimator of a given total 'Y' for a given subpopulation 'A' is:

$$U_A = S_h S_i S_{j \hat{I} A} w'_{hij} y_{hij}$$

where

U_A = the estimated total for variable Y in subpopulation A h = the substratum within the estimation domain: 1 - 4

i = the sample PSU, 1 - n_h

j = the unit of analysis or element, 1 - A

A = a subset of elements possessing a given attribute, that is, belonging to a given subpopulation A, for example, persons in a given age group

y_{hij} = the observed value of the variable 'y' for the j-th element of the i-th sample PSU in substratum h; and

w'_{hij} = the final (adjusted) sampling weight for the element; includes all the stages of selection

Estimator of Variance for Total

Under the ultimate clusters approach, the variance of an estimator of total for a given subpopulation A, within any domain of estimation is estimated by:

$$n(U_A) = \frac{S}{n_h - 1} \left[\frac{n_h}{n_h} \left[\text{å}\, U_{Ahi} - \underline{U_A} \right)^2 \right.$$

where:

U_{Ahi} = $S_{j\hat{I}A}\, w'_{hij} y_{hij}$

U_{Ah} = $S_i S_{j\hat{I}A}\, w'_{hij} y_{hij}$

Other notation as previously defined.

Estimation for a Proportion (p)

For a proportion for example the proportion of households with a given characteristic (poverty).

$$P_h = \text{å} w_h p_h$$

Where

p_h = proportion of household with the given characteristics i.e., in stratum # (group) h w_h = $F^*_h n_h$ / å $F^*_h n_h$

f_h = the sampling fraction for stratum (group) h F_h = 1/ f_h

F^*_h = F_h adjusted for non-response

= F_h x no. of household selected /No of households interviewed n_h = number of elements (households)

Variance of a Proportion

$$\text{Var}(P_h) = \frac{\text{å} w_h^2 (1-f_h).\underline{P_h (1-p_h)}}{(n_h - 1} -$$

Data Collection

Preparation of Survey Enumerators

Enumerators and supervisors were recruited. Preference was given to applicants with experience in conducting other surveys, including the national census. Training in the use of the data collecting tool and the equipment as well as how to conduct the survey was conducted facilitated by experts from the Health and Information & Research Unit in the Ministry of Health, the Department of Statistics, and the Pan American Health Organization.

The training and pilot testing addressed the following topics:

- Overview and rationale of STEPS
- Approaching selected households and using the Kish method
- Informing participants and obtaining consent
- Interview skills
- Data collection using eSTEPS on PDAs
- Use of show cards
- Taking and recording physical measurements and
- Procedure for referrals for biochemical measurements, including requirements

Upon successful completion of the training, data collection commenced with 77 enumerators who were allocated across thirteen teams for STEPS 1 and 2, each team was overseen by a supervisor. A separate chief supervisor was designated to support the enumeration process as well for quality control purposes. Each team was provided with their respective household listings and maps, other survey documents, an eSTEPS PDA and equipment to conduct the physical measurements for STEP 2. The teams also had access to the necessary equipment to conduct the biometric data collection. This equipment was provided in a duffle bag and included a stadiometer, digital scale, BMI wheel, tape measure, and blood pressure monitor (Omron®).

Healthcare professionals conducting STEP 3 biochemical measurements were trained in the use of CardioChek® machines and use of eSTEPS on the PDA to enter the data.

The data collection period was varied in length to accommodate data collecting activities to reach the desired number and percentage of respondents.

Data Collection Tool

The survey comprised of three STEPS and data was collected using a modified and validated instrument based on the WHO NCD STEPS tool. Each step consisted of several core components

as well as expanded questions that were modified and included to meet the local context, specifically

all core modules and expanded modules on tobacco consumption, alcohol consumption, oral health, cervical cancer screening, mental health and violence and injury.

STEP 1 included:

- Demographic information on date of birth, age, sex, marital status, and years at school, employment status, private insurance ownership, country of birth and household income
- Tobacco use
- Alcohol consumption
- Fruit and vegetable consumption
- Dietary fat consumption
- Dietary salt consumption
- Dietary sugar consumption
- Physical activity
- Mental health (suicide)
- Oral health
- Breast, cervical, colon and prostate cancer screening
- Violence and injury
- History of raised blood pressure and raised blood glucose

STEP 2 included physical measurements: -

- Height
- Weight
- Waist circumference
- Hip circumference
- Blood pressure

STEP 3 included biochemical measurements: -

- blood glucose
- total cholesterol
- urinary sodium

Assistive pictorial show cards were provided to enumerators to assist with visual references for various tobacco and alcohol products, types of fruits and vegetables and corresponding servings sizes (one standard serving of fruit or vegetables equals 80 grams), various salty sauces and processed foods, various levels of physical activity and sedentary activities.

Pre-testing of Survey Tool

The questionnaire was pretested to assess the applicability, relevancy, content, timing, and sequencing/flow; as well as to provide the enumerators with experience in managing the data entry components. All challenges that were identified during pre-testing were addressed.

Data Collection Process

Data collection involved the selection of a respondent from among the usual household members aged 18-69 years except for the usual household member who was severely sick and/or too disabled to participate in the survey. Data was collected for both STEPS 1 and 2 at the same time at the respondent's home. Responses from participants were recorded in real-time by survey enumerators with direct entry into the survey database using a handheld Android Samsung tablet which had been pre-programmed with assistance from WHO/PAHO experts.

After consent was obtained, questions associated with components were asked by enumerators and the responses entered into the database. During the same visit, respondents were exposed to a process to collect physical measurements.

For physical measurements, the height was measured using a stadiometer, weight using the approved scale, waist circumference and hip circumference were measured with the assistance of the respondent and in the prescribed manner. For standardization, measurements were recorded using metric units. The final measurement recorded was the blood pressure. The blood pressure was measured with a digital automated blood pressure monitor (Omron brand) with uniform cuff-size as per the standard protocol. Three readings of the systolic and diastolic blood pressure were obtained with five minutes rest between each reading. As per survey protocol, the recordings were recorded in the tablet.

Randomly selected respondents were then asked to propose when they would be available for a visit by a healthcare worker to collect the biochemical samples and instructions given for the appropriate preparation for same. The biochemical assessments were performed to determine fasting blood glucose and total blood cholesterol were measured on the spot using a CardioCheck handheld machine. Spot urine sample was collected and transferred to the dedicated laboratory for analysis for sodium and creatinine to determine the mean salt intake.

Data Entry

All the survey data were directly entered on a handheld Android Samsung tablet which had been pre-programmed with assistance from WHO/PAHO experts and was pre-loaded with the WHO eSTEPS software by the enumerators except for urine samples, which were separately recorded by a central laboratory later. The final data from the field were uploaded to the server which was reviewed in real time by the central team from the master database.

Data Processing

The data from the handheld Android Samsung tablet was uploaded to the main database once the device was able to access the internet. Following completion of the fieldwork the single database was subjected to extensive data cleaning and verification prior to data analysis, following the guidance provided by the WHO in the eSTEPS manual. Data preparation steps included validating ranges and combinations of variables, verifying missing data, and reconciling data outliers. Data was then weighted to ensure that the sample of respondents was representative of the target population (aged 18 – 69 years). The weights considered and added to adjust for the probability of selection (sample weights), non-response (non-response weight), and differences between the sample population and target population (population weight) were incorporated into each aspect of the data analysis process for the survey to arrive at the final dataset.

Data Analysis

Data analysis was primarily performed using STATA version 15.0. WHO team provided virtual technical support for data analysis.

Ethical Considerations

Ethical clearance for the survey was obtained from the Research Ethics Board as designated by the Ministry of Health, in this case the Public Hospitals Authority IRB (Ethics Committee). Two consent forms were used - one for STEPS 1 and 2, and the other for STEP 3. A copy of the information sheet was given to the respondents, while the signed consent forms were filed with the Survey Administrator.

Participation in the survey was voluntary. Interviews were conducted in a manner that ensured confidentiality and the privacy of the respondents. Respondents were given the assurance that their information would be handled confidentially and only used for scientific purposes.

RESULTS

Response Rate

There were 3,840 dwellings selected as the sample size for the survey. Of that number 3,083 (or 80%) were occupied, thus being qualified to be further characterised as households. Among the households identified, 2,365 responses were received for the survey questionnaire – with enumeration of questions included in components of Steps 1 and 2. This translated to a household response rate of 77% and a dwellings response rate of 62%.

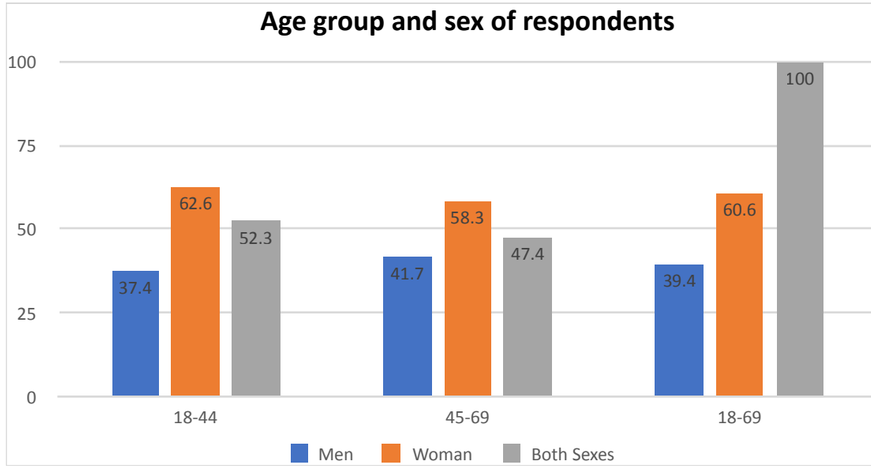
The total sample size was therefore 2,365 adults aged 18-69 years. The following section provides a description of the data and information that resulted from the analysis of the responses to the survey.

Demographics

Age & Sex

The Figures 1 – 18 provide the results of the analysis of the responses when examining various parameters that described the demographics of the sample population. These parameters included age, sex, years, level of education, marital status and employment and employability status.

Figure 1. Percent distribution of respondents by both sexes and age groups

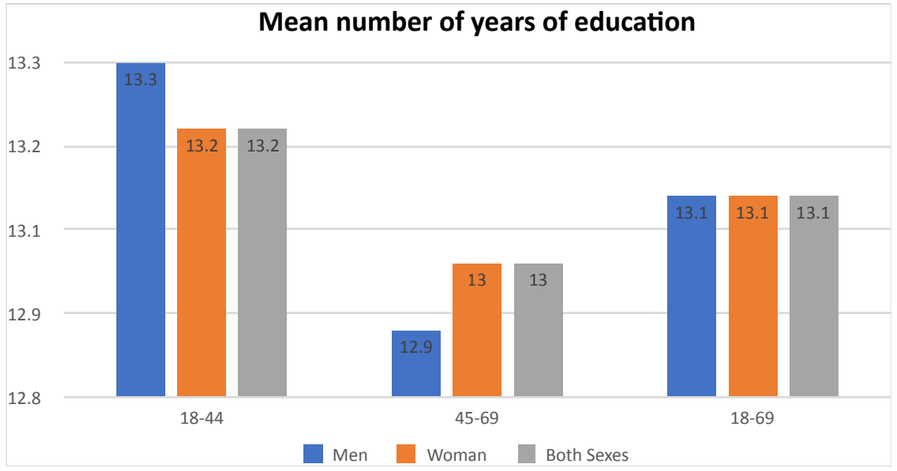


Of the data received from 2,363 respondents, 39.4% (n=932) were male and 60.6% (n=1431) were female. Also, 52.3% of all respondents were aged 18-44 years (n=1237) and 47.4% were aged 45-69 years (n=1126). The sex distribution for respondents aged 18-44 years was 37.4% (n=463) male and 62.6% (n=774) female. Among those aged 45-69 years (n=1126), males accounted for 41.7% (n=469) and females 58.3% (n=657).

Educational Profile

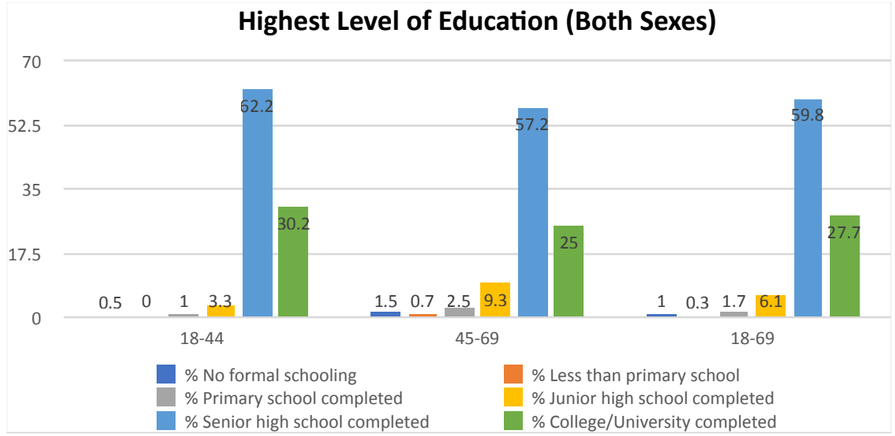
The parameters used to assess the educational profile of the survey population included, age, sex, mean number of years of education, and highest level of education. The descriptors used were no formal education, less than primary school education, completed primary school education, completed secondary or high school education and completion of either a college or university or a postgraduate degree.

Figure 2. Mean number of years of exposure to formal education of respondents aged 18-69 years, by both sexes and age groups



The mean number of years of education reported by all respondents across both sexes and age groups (n=2363) was 13.1 years. The mean number of years of education among male respondents (n=1237) and female respondents (n=1126) both measured 13.1 years. The mean number of years of education was highest of male respondents aged 18-44 years (n=463) at 13.3 years, followed by female respondents aged 18-44 years (n=774) at 13.2 years. Of male respondents aged 45-69 years (n=469), the mean number of years of education was 12.9 years. For female respondents aged 45-69 years (n=657) the mean number of years of education was 13.0 years.

Figure 3. Highest level of educational attainment by percentage of respondents aged 18-69 years, by both sexes and age groups

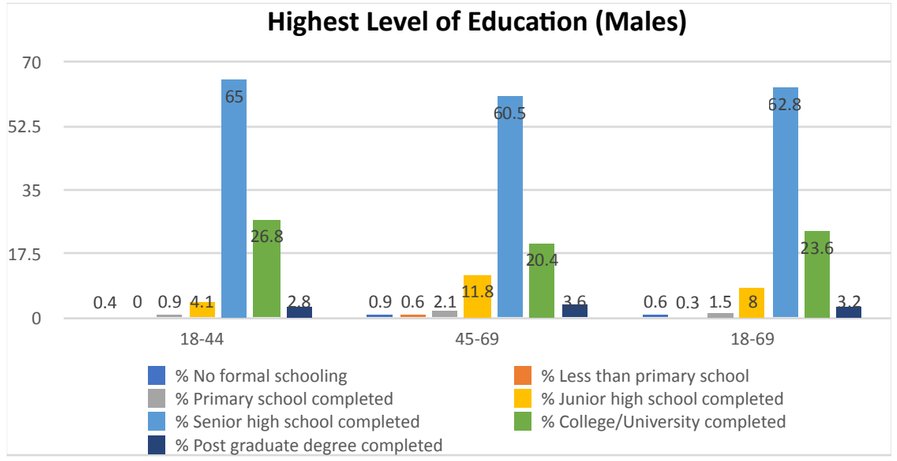


The percentage for different levels of education completed for respondents of both sexes and age groups (n=2358) was determined. The results were that 1.0% of all respondents reported no formal schooling, 0.3% reported having not completed primary school and 1.7% reported having completed primary school as their highest level of education, 6.1% reported having completed junior high school, 59.8% senior high school, while 31.0% reported having completed some form of tertiary education

Among respondents of both sexes aged 18-44 years (n=1236), 0.5% of all respondents reported no formal schooling, 0.0% reported having not completed primary school and 1.0% reported having completed primary school as their highest level of education, 3.3% reported having completed junior high school, 62.2% senior high school, while 30.2% reported having completed some form of tertiary education.

Of respondents of both sexes aged 45-69 years (n=1122), 1.5% of all respondents reported no formal schooling, 0.7% reported having not completed primary school and 2.5% reported having completed primary school as their highest level of education, 9.3% reported having completed junior high school, 57.2% senior high school, while 28.8% reported having completed some form of tertiary education.

Figure 4. Highest level of educational attainment by percentage of male respondents aged 18-69 years, by age groups

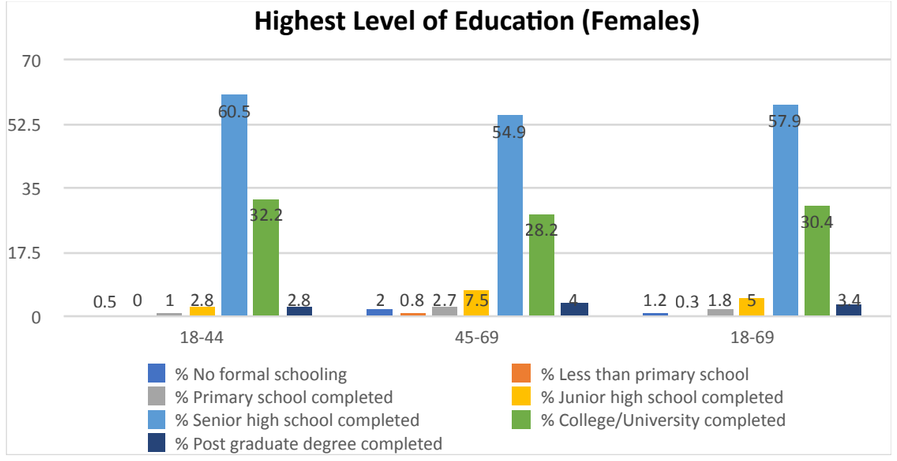


The percentage for different levels of education completed for male respondents across both age groups (n=929) was determined. The results were that 0.6% of male respondents reported no formal schooling, 0.3% reported having not completed primary school and 1.5% reported having completed primary school as their highest level of education, 8.0% reported having completed junior high school, 62.8% senior high school, while 26.8% reported having completed some form of tertiary education

Among male respondents aged 18-44 years (n=463), 0.4% of male respondents reported no formal schooling, 0.0% reported having not completed primary school and 0.9% reported having completed primary school as their highest level of education, 4.1% reported having completed junior high school, 65.0% senior high school, while 29.6% reported having completed some form of tertiary education.

Of male respondents aged 45-69 years (n=466), 0.9% of male respondents reported no formal schooling, 0.6% reported having not completed primary school and 2.1% reported having completed primary school as their highest level of education, 11.8% reported having completed junior high school, 60.5% senior high school, while 24.0% reported having completed some form of tertiary education.

Figure 5. Highest level of educational attainment by percentage of female respondents aged 18-69 years, by age group.



The percentage for different levels of education completed for female respondents across both age groups (n=1429) was determined. The results were that 1.2% of female respondents reported no formal schooling, 0.3% reported having not completed primary school and 1.8% reported having completed primary school as their highest level of education, 5.0% reported having completed junior high school, 57.9% senior high school, while 33.8% reported having completed some form of tertiary education

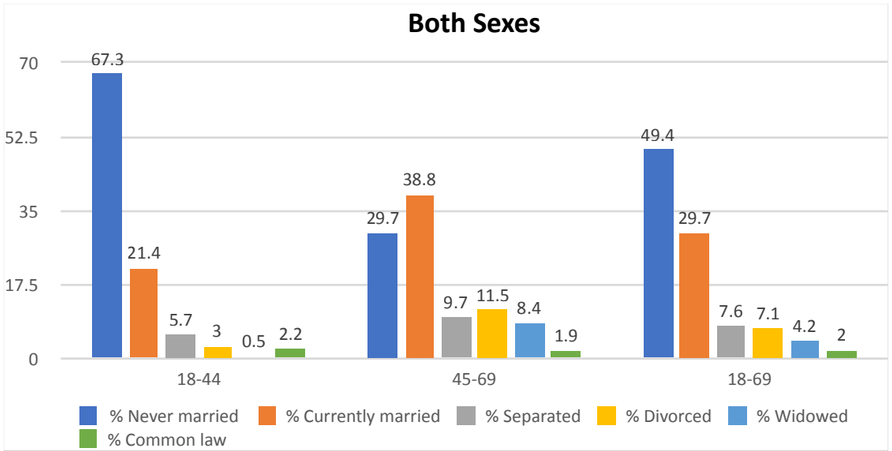
Among female respondents aged 18-44 years (n=773), 0.5% of female respondents reported no formal schooling, 0.0% reported having not completed primary school and 1.0% reported having completed primary school as their highest level of education, 2.1% reported having completed junior high school, 56.0% senior high school, while 35.0% reported having completed some form of tertiary education.

Of female respondents aged 45-69 years (n=656), 2.0% of female respondents reported no formal schooling, 0.8% reported having not completed primary school and 2.7% reported having completed primary school as their highest level of education, 7.5% reported having completed junior high school, 54.9% senior high school, while 32.2% reported having completed some form of tertiary education.

Marital status

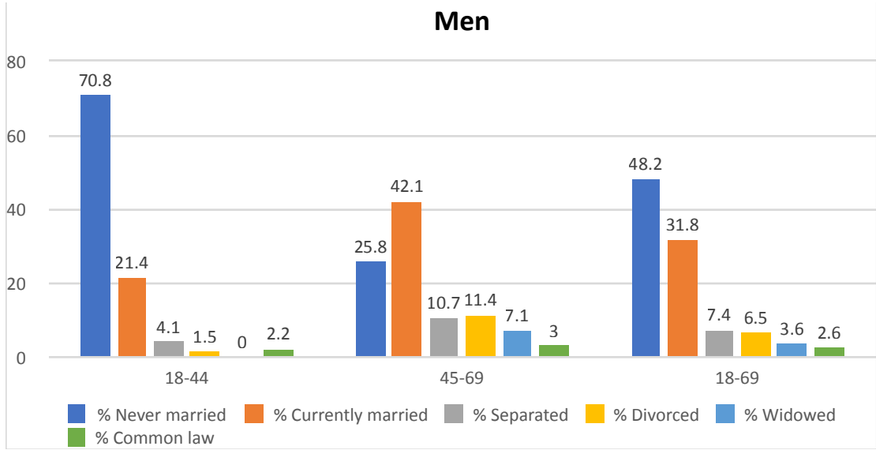
Marital status data were analyzed using age group, sex, never married, currently married, separated, divorced, widowed and in common law relationships.

Figure 6. Marital status of respondents aged 18-69 years, by both sexes and age groups



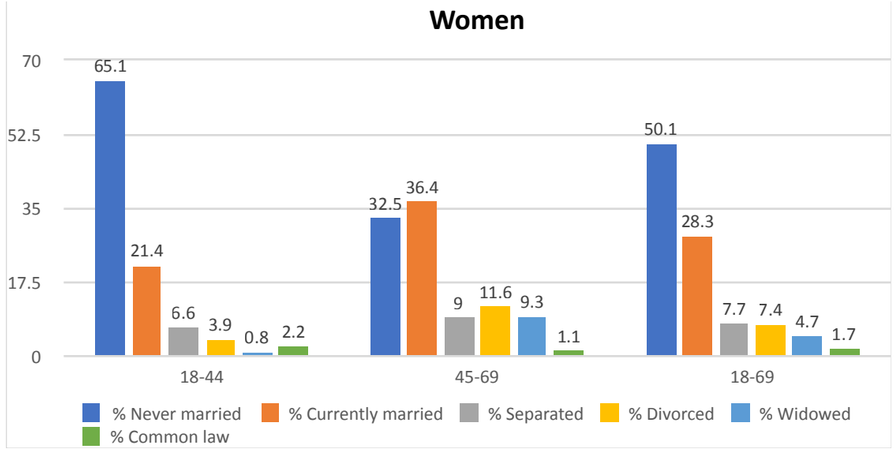
When assessing marital status by both sexes and age groups (n=2353), 49.4% of respondents reported their status as never married, 39.3% reported being in a legally recognized relationship (that is currently married, separated, or common law), 7.1% reported being divorced and 4.2% reported being widowed. Among the respondents of both sexes aged 18-44 years (n=1234), 67.3% reported their status as never married, 29.3% reported being in a legally recognized relationship, 3.0% reported being divorced and 0.5% reported being widowed. Among the respondents of both sexes aged 45-69 years (n=1119), 29.7% reported their status as never married, 50.4% reported being in a legally recognized relationship, 11.5% reported being divorced and 8.4% reported being widowed.

Figure 7. Marital status of male respondents aged 18-69 years, by age groups



Results on marital status were received from 929 males, and for both age groups 48.2% reported their status as never married, 41.8% reported being in a legally recognized relationship, 6.5% reported being divorced and 3.6% reported being widowed. Among the male respondents aged 18-44 years (n=463), 70.8% reported their status as never married, 27.7% reported being in a legally recognized relationship, 1.5% reported being divorced and 0.0% reported being widowed. Among the male respondents aged 45-69 years (n=466), 25.8% reported their status as never married, 55.8% reported being in a legally recognized relationship, 11.4% reported being divorced and 7.1% reported being widowed.

Figure 8. Marital status of female respondents aged 18-69 years, by age groups

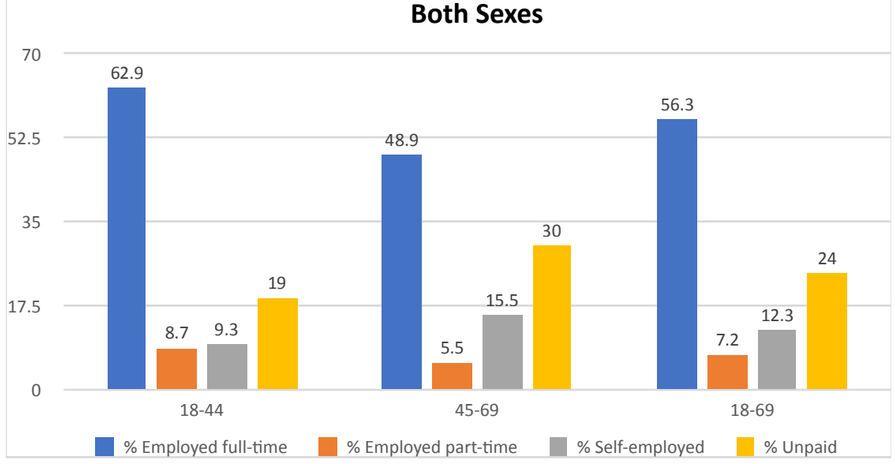


Results on marital status were received from 1424 females, and for both age groups 50.1% reported their status as never married, 37.7% reported being in a legally recognized relationship, 7.4% reported being divorced and 4.7% reported being widowed. Among the female respondents aged 18-44 years (n=777), 65.1% reported their status as never married, 30.2% reported being in a legally recognized relationship, 3.9% reported being divorced and 0.8% reported being widowed. Among the female respondents aged 45-69 years (n=647), 32.5% reported their status as never married, 46.5% reported being in a legally recognized relationship, 11.6% reported being divorced and 9.3% reported being widowed.

Employment Status

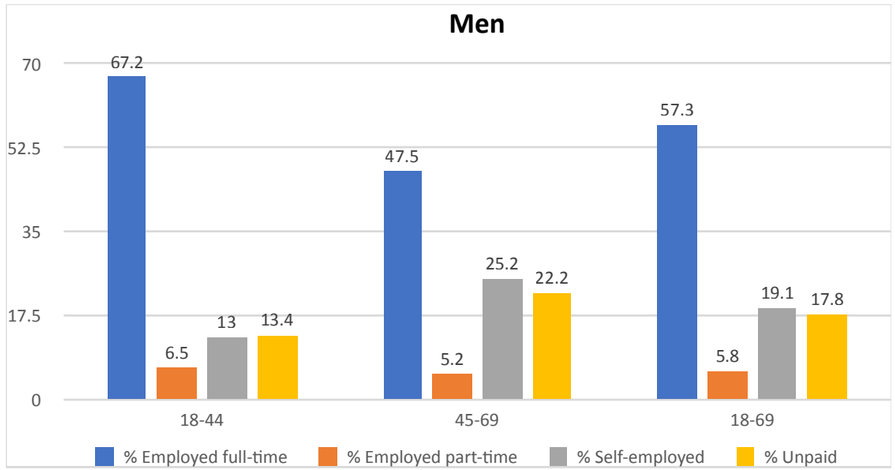
Employment was assessed using two parameters – whether the individual was employed or unpaid – during the previous 12-month period. Employed individuals were further analyzed to determine which sector they were employed in. Respondents who were not employed were assessed on the reason for that state.

Figure 9. Employment type of respondents aged 18-69 years, by both sexes and age groups



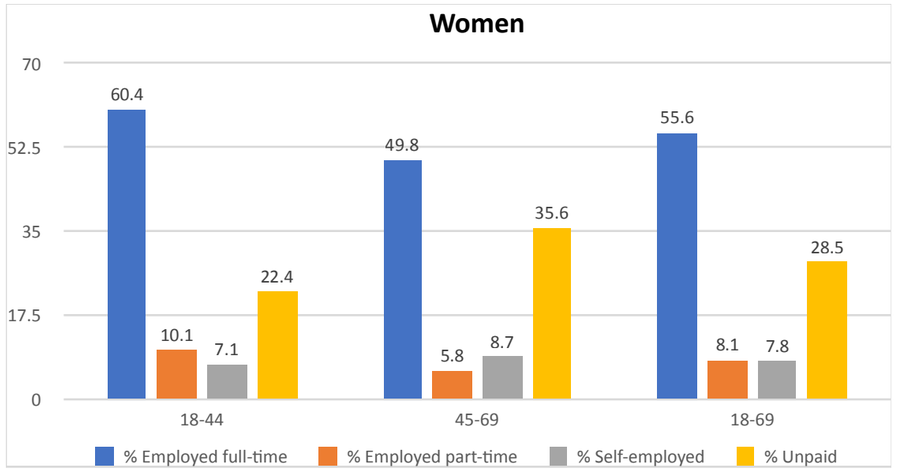
For employment status for both sexes and age groups (n=2355), 56.3% were employed full time, 7.2% were employed part-time, 12.3% were self-employed and 24.2% reported being unpaid. Of respondents 18-44 years (n=1236), 62.9% were employed full-time, 8.7% were employed part time, 9.3% were self-employed and 19.0% reported being unpaid. Of respondents 45-69 years (n=1119), 48.9% were employed full-time, 5.5% were employed part-time, 15.5% were self-employed and 30.0% reported being unpaid.

Figure 10. Employment type of male respondents aged 18-69 years, by age groups



For employment status of male respondents and both age groups (n=928), 57.3% were employed full time, 5.8% were employed part-time, 19.1% were self-employed and 17.8% reported being unpaid. Of male respondents 18-44 years (n=463), 67.2% were employed full-time, 6.5% were employed part-time, 13.0% were self-employed and 13.4% reported being unpaid. Of male respondents 45-69 years (n=465), 47.5% were employed full-time, 5.2% were employed part-time, 25.2% were self-employed and 22.2% reported being unpaid.

Figure 11. Employment type of female respondents aged 18-69 years, by age groups

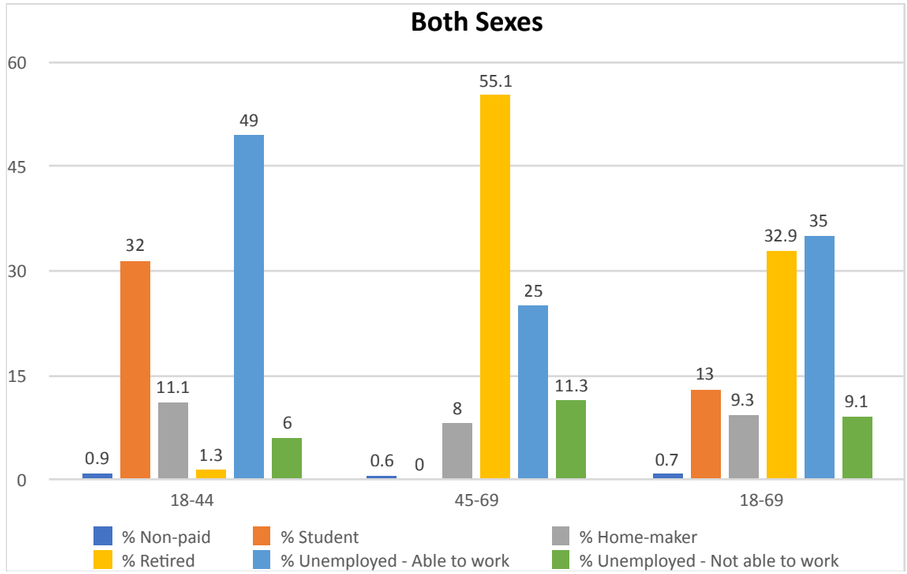


For employment status of female respondents of both age groups (n=1427), 55.6% were employed full-time, 8.1% were employed by part-time, 7.8% were self-employed and 28.5% reported being unpaid. Of female respondents 18-44 years (n=773), 60.4% were employed full-time, 10.1% were employed part-time, 7.1% were self-employed and 22.4% reported being unpaid. Of female respondents 45-69 years (n=654), 49.8 % were employed full-time, 5.8% were employed part-time, 8.7% were self-employed and 35.6% reported being unpaid.

Unpaid Work and Unemployed

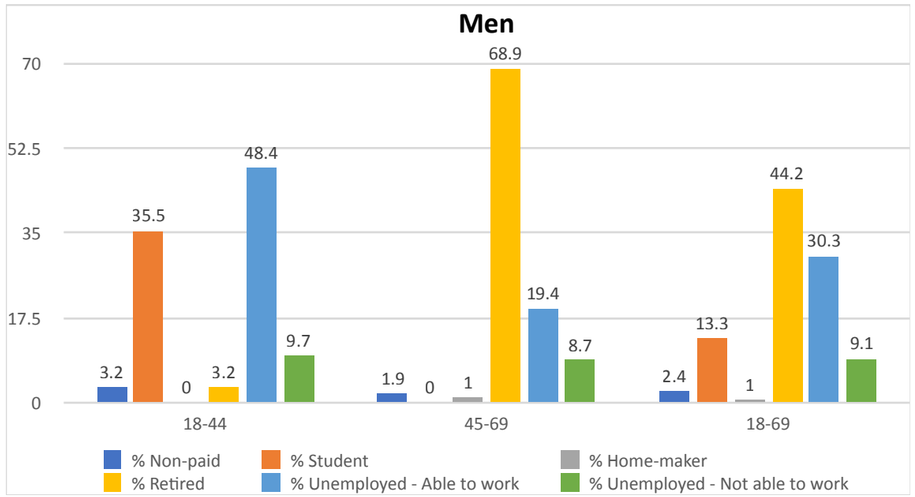
Further evaluation of the responses of individuals who provided during the survey that they were either engaged in unpaid work or unemployed (n=571), categories of responses included non- paid, student, homemaker, retired or unemployed – and able to work or unemployed and not able to work.

Figure 12. Unpaid work and unemployed of respondents aged 18-69 years, by both sexes and age groups



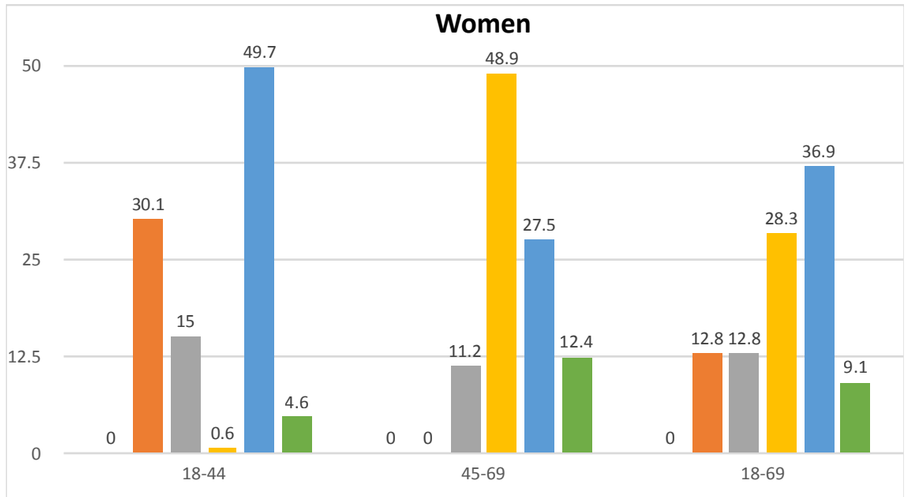
For both sexes and age groups, 571 individuals provided responses that indicated that they were either engaged in unpaid work or unemployed. Non-paid work accounted for 0.7%, students 13.0%, homemaker 9.3%, and retired 32.9%. Of the 571 respondents, 35.0% reported that they were unemployed but able to work, while 9.1% reported that they were unemployed and not able to work. Of respondents (both sexes) aged 18-44 years (n=235), non-paid work accounted for 0.9%, students 31.5%, homemaker11.1%, and retired 1.3%. Of the 336 respondents aged 18- 44 years (both sexes), 49.4% reported that they were unemployed but able to work, while 6.0% reported that they were unemployed and not able to work. Of respondents (both sexes) aged 45-69 years, non-paid work accounted for 0.6%, students 0.0%, homemaker 8.0%, and retired 55.1%. Of all respondents aged 45-69 years (n=336), 25.0% reported that they were unemployed but able to work, while 11.3% reported that they were unemployed and not able to work.

Figure 13. Unpaid work and unemployed of male respondents aged 18-69 years, by age groups



Among male respondents and both sexes, 165 individuals provided responses that indicated that they were either engaged in unpaid work or unemployed. Non-paid work accounted for 2.4%, students 13.3%, homemaker 0.6%, and retired 44.2%. Of the 165 male respondents, 30.3% reported that they were unemployed but able to work, while 9.1% reported that they were unemployed and not able to work. Of male respondents aged 18-44 years (n=62), non-paid work accounted for 3.2%, students 35.5%, homemaker 0.0%, and retired 3.2%. Of the 103 male respondents aged 18-44 years, 48.4% reported that they were unemployed but able to work, while 9.7% reported that they were unemployed and not able to work. Of male respondents aged 45-69 years (n=103), non-paid work accounted for 1.9%, students 0.0%, homemaker 1.0%, and retired 68.9%. Of the 103 male respondents aged 45-69 years, 19.4% reported that they were unemployed but able to work, while 8.7% reported that they were unemployed and not able to work.

Figure 14. Unpaid work and unemployed of female respondents aged 18-69 years, by age groups.

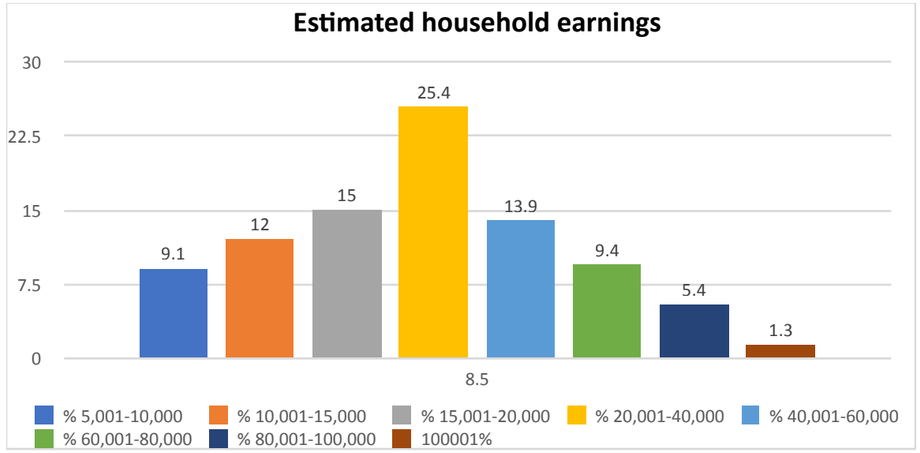


Among female respondents of both age groups, 406 individuals provided responses that indicated that they were either engaged in unpaid work or unemployed. Non-paid work accounted for 0.0%, students 12.8%, homemaker 12.8%, and retired 28.3%. Of the 406 female respondents, 37.0% reported that they were unemployed but able to work, while 12.4% reported that they were unemployed and not able to work. Of female respondents aged 18-44 years (n=173), non-paid work accounted for 0.0%, students 30.1%, homemaker 15.0%, and retired 0.6%. Of the 173 female respondents aged 18-44 years, 49.7% reported that they were unemployed but able to work, while 4.6% reported that they were unemployed and not able to work. Of female respondents aged 45-69 years (n=233), non-paid work accounted for 0.0%, students 0.0%, homemaker 11.2%, and retired 48.9%. Of the 233 female respondents aged 45- 69 years, 27.5% reported that they were unemployed but able to work, while 12.4% reported that they were unemployed and not able to work

Household Income

An evaluation of household income was undertaken the following Figure seeks to provide the results of that analysis. Household income was reported for 1,797 individuals. Approximately 8.5% reported a household income of less than $5,000; 9.1% with $5,001 - $10,000; 12.0% with $10,001-$15,000; 15.0% with $15,001-$20,000; 25.4% with $20,001-$40,000; 13.9% with $40,001-$60,000; 9.4% with $60,001-$80,000; 5.4% with $80,001-$100,000 and 1.3% with greater than $100,000.

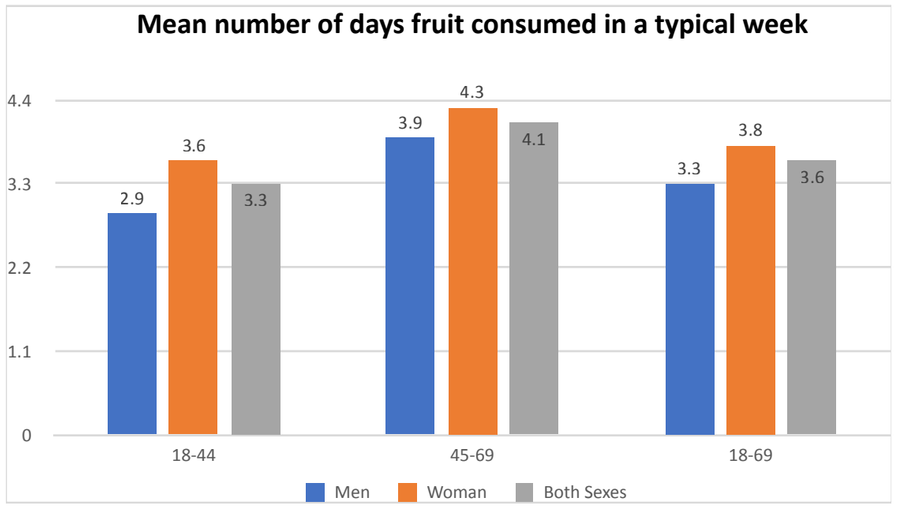
Figure 15. Household Income Spectrum



Dietary/Nutrition

Fruit & Vegetable Consumption

Figure 16. Mean Number of Days Fruit consumed in a typical week

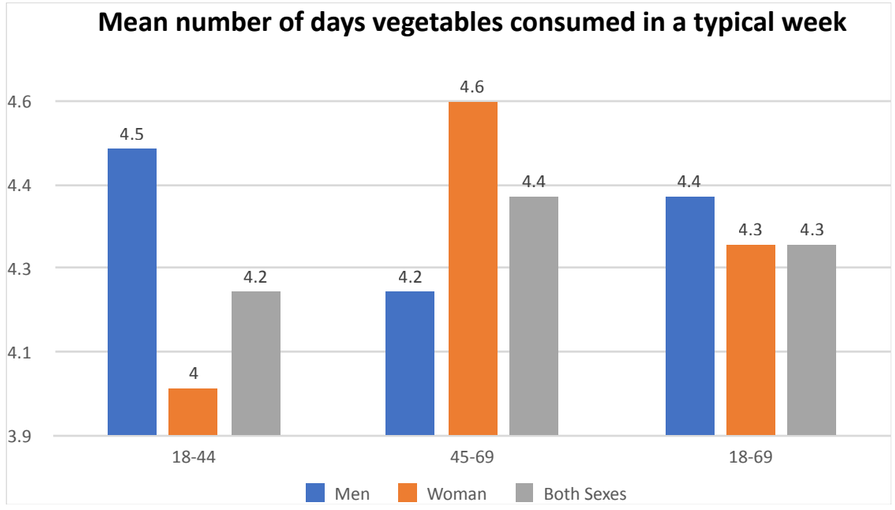


The answers of respondents of both sexes and age groups to the question of the number of days in a typical week that at least one serving of fruit was consumed were evaluated and a determination made of the mean number of days that respondents consumed fruit in a typical week. The following was observed. For all respondents (n=2277), the mean number of days in a typical week that fruit was consumed was 3.6 days. The mean number of days in a typical week that fruit was consumed was 3.3 days for all respondents aged 18-44 years (n=1177), and 4.1 days for all respondents aged 45-69 years (n=1100).

For male respondents (n=889), the mean number of days in a typical week that fruit was consumed was 3.3 days. The mean number of days in a typical week that fruit was consumed was 2.9 days for male respondents aged 18-44 years (n=437), and 3.9 days for all respondents aged 45-69 years (n=452).

For female respondents (n=1388), the mean number of days in a typical week that fruit was consumed was 3.8 days. The mean number of days in a typical week that fruit was consumed was 3.6 days for all respondents aged 18-44 years (n=740), and 4.3 days for female respondents aged 45-69 years (n=648).

Figure 17. Mean number of days vegetable consumed in a typical week.



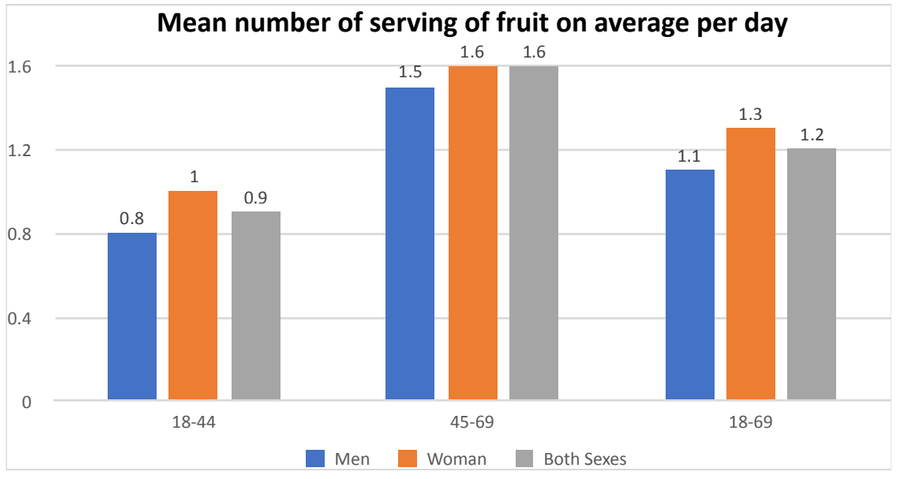
The answers of respondents of both sexes and age groups to the question of the number of days in a typical week that at least one serving of vegetable was consumed were evaluated and a determination made of the mean number of days during which respondents consumed vegetable in a typical week.

The following was observed. For all respondents (n=2293), the mean number of days in a typical week that vegetable was consumed was 4.3 days. The mean number of days in a typical week that vegetable was consumed was 4.2 days for all respondents aged 18-44 years (n=1189), and 4.4 days for all respondents aged 45-69 years (n=1104).

For male respondents (n=899), the mean number of days in a typical week that vegetable was consumed was 4.4 days. The mean number of days in a typical week that vegetable was consumed was 4.5 days for male respondents aged 18-44 years (n=444), and 4.2 days for male respondents aged 45-69 years (n=455).

For female respondents (n=1394), the mean number of days in a typical week that vegetable was consumed was 4.3 days. The mean number of days in a typical week that vegetable was consumed was 4.0 days for all respondents aged 18-44 years (n=745), and 4.6 days for female respondents aged 45-69 years (n=649).

Figure 18. Mean number of servings of fruit on an average per day.

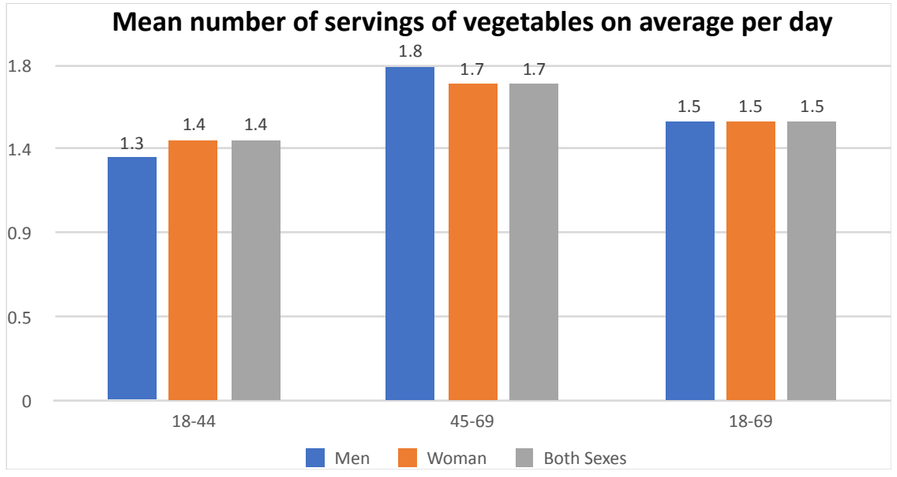


The answers of respondents of both sexes and age groups to the question of the number of servings of fruit that was consumed were evaluated and a determination made of the mean number of servings that respondents consumed on average per day. The following was observed. For all respondents (n=2248), the mean number of servings of fruit was 1.2. The mean number of servings of fruit was 0.9 for all respondents aged 18-44 years (n=1157), and 1.6 for all respondents aged 45-69 years (n=1091).

For male respondents (n=872), the mean number of servings of fruit was 1.1. The mean number of servings of fruit was 0.8 for male respondents aged 18-44 years (n=424), and 1.5 for all respondents aged 45-69 years (n=448).

For female respondents (n=1376), the mean number of servings of fruit was 1.3. The mean number of servings of fruit was 1.0 for female respondents aged 18-44 years (n=733), and 1.6 for all respondents aged 45-69 years (n=643).

Figure 19. Mean number of servings of vegetable on an average per day.



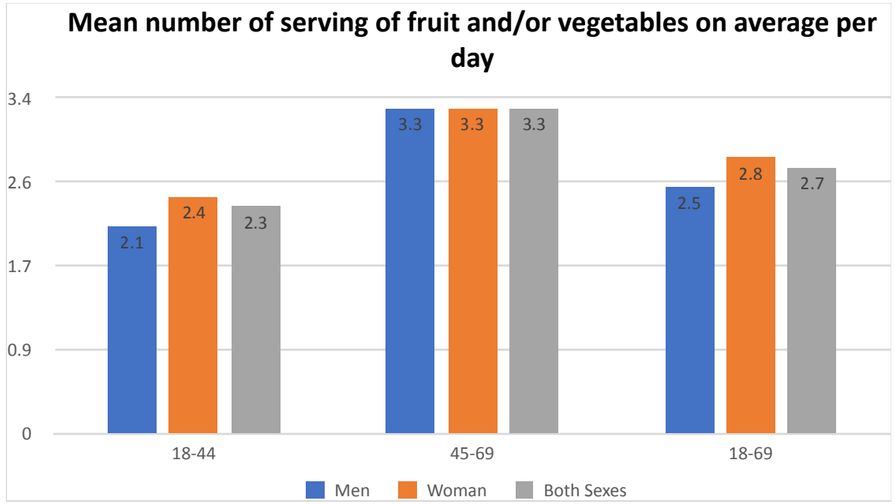
The answers of respondents of both sexes and age groups to the question of the number of servings of vegetables that was consumed were evaluated and a determination made of the mean number of servings that respondents consumed on average per day. The following was observed. For all respondents (n=2257), the mean number of servings of vegetables was 1.5. The mean number of servings of vegetable was 1.4 for all respondents aged 18-44 years (n=1167), and 1.7 for all respondents aged 45-69 years (n=1090).

For male respondents (n=877), the mean number of servings of vegetables was 1.5. The mean number of servings of vegetable was 1.3 for male respondents aged 18-44 years (n=431), and 1.8 for all respondents aged 45-69 years (n=446).

For female respondents (n=1380), the mean number of servings of vegetables was 1.5. The mean

number of servings of vegetable was 1.4 for female respondents aged 18-44 years (n=736), and 1.7 for all respondents aged 45-69 years (n=644).

Figure 20. Mean number of servings of fruit and/or vegetable on an average per day.

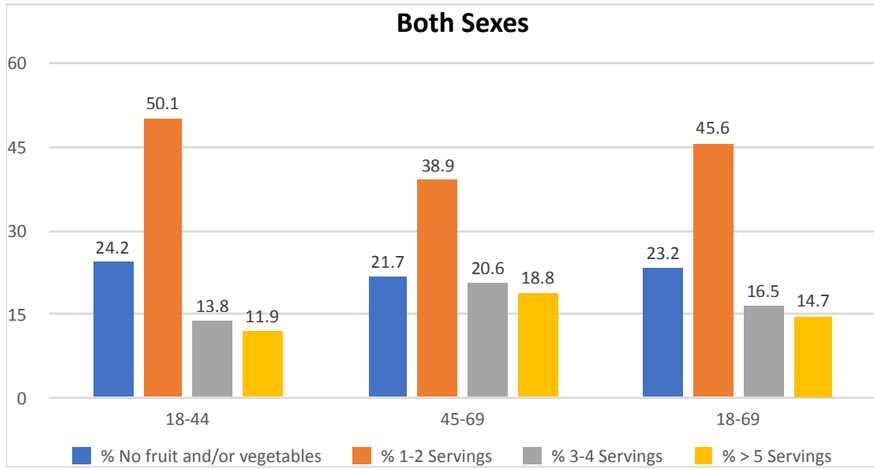


The answers of respondents of both sexes and age groups to the question of the number of servings of fruit and/or vegetable was consumed were evaluated and a determination made of the mean number of servings that respondents consumed on average per day. The following was observed. For all respondents (n=2281), the mean number of servings of fruit and/or vegetable was 2.7. The mean number of servings of fruit and/or vegetable was 2.3 for all respondents aged 18-44 years (n=1182), and 3.3 for all respondents aged 45-69 years (n=1099).

For male respondents (n=888), the mean number of servings of fruit and/or vegetable was 2.5. The mean number of servings of fruit and/or vegetable was 2.1 for all respondents aged 18-44 years (n=437), and 3.3 for all respondents aged 45-69 years (n=451).

For female respondents (n=1393), the mean number of servings of fruit and/or vegetable was 2.8. The mean number of servings of fruit and/or vegetable was 2.4 for all respondents aged 18-44 years (n=745), and 3.3 for all respondents aged 45-69 years (n=648).

Figure 21. Number of servings of fruit and/or vegetable on an average per day for all respondents of both sexes and ages.

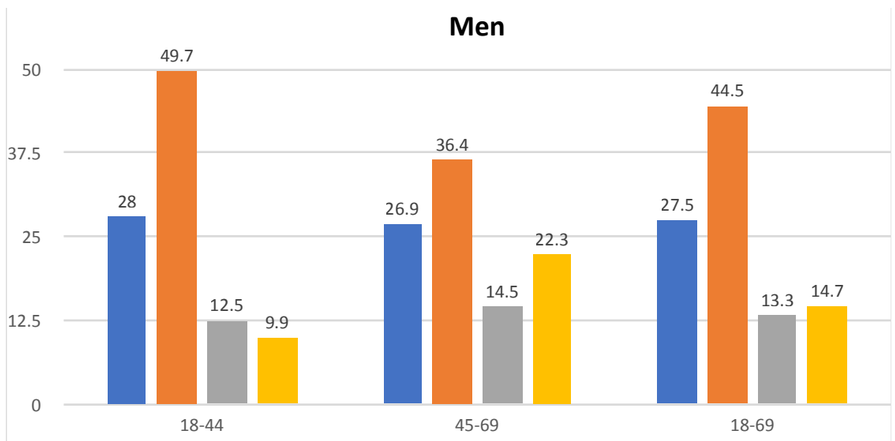


Respondents of both sexes and age groups responded to the question of the number of servings of fruit and/or vegetable was consumed on average per day. The following frequencies were observed. For all respondents (n=2281), 23.2% consumed no fruit and/or vegetable on average per day, 45.6% consumed one to two servings on average per day, 16.5% consumed three to four servings on average per day and 14.7% consumed five or more servings on average per day less than five servings of fruit and/or vegetable on average per day.

For all respondents aged 18-44 years (n=1182), 24.2% consumed no fruit and/or vegetable on average per day, 50.1% consumed one to two servings on average per day, 13.8% consumed three to four servings on average per day and 11.9% consumed five or more servings on average per day less than five servings of fruit and/or vegetable on average per day.

For all respondents aged 45-69 years (n=1099), 21.7% consumed no fruit and/or vegetable on average per day, 38.9% consumed one to two servings on average per day, 20.6% consumed three to four servings on average per day and 18.8% consumed five or more servings on average per day less than five servings of fruit and/or vegetable on average per day.

Figure 22. Number of servings of fruit and/or vegetable on an average per day for male respondents of both ages.

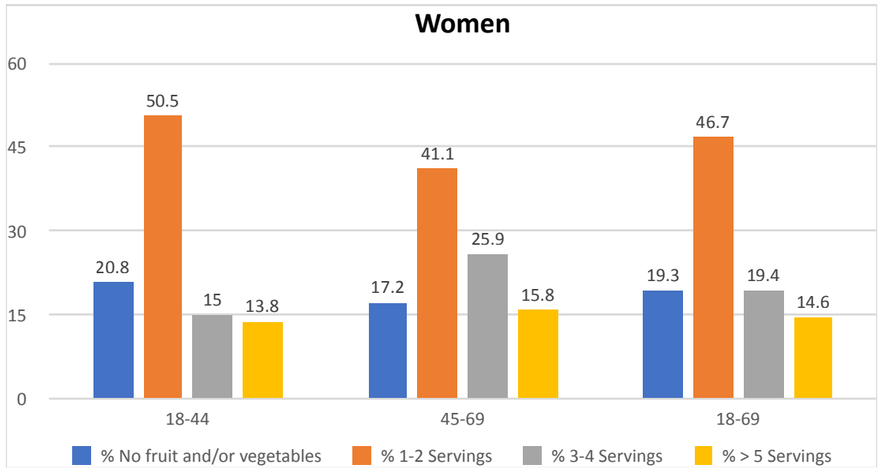


For male respondents (n=888), 27.5% consumed no fruit and/or vegetable on average per day, 44.5% consumed one to two servings on average per day, 13.3% consumed three to four servings on average per day and 14.7% consumed five or more servings on average per day less than five servings of fruit and/or vegetable on average per day.

For male respondents aged 18-44 years (n=437), 28.0% consumed no fruit and/or vegetable on average per day, 49.7% consumed one to two servings on average per day, 12.5% consumed three to four servings on average per day and 9.9% consumed five or more servings on average per day less than five servings of fruit and/or vegetable on average per day.

For male respondents aged 45-69 years (n=451), 26.9% consumed no fruit and/or vegetable on average per day, 36.4% consumed one to two servings on average per day, 14.5% consumed three to four servings on average per day and 22.3% consumed five or more servings on average per day less than five servings of fruit and/or vegetable on average per day.

Figure 23. Number of servings of fruit and/or vegetable on an average per day for female respondents of both ages.

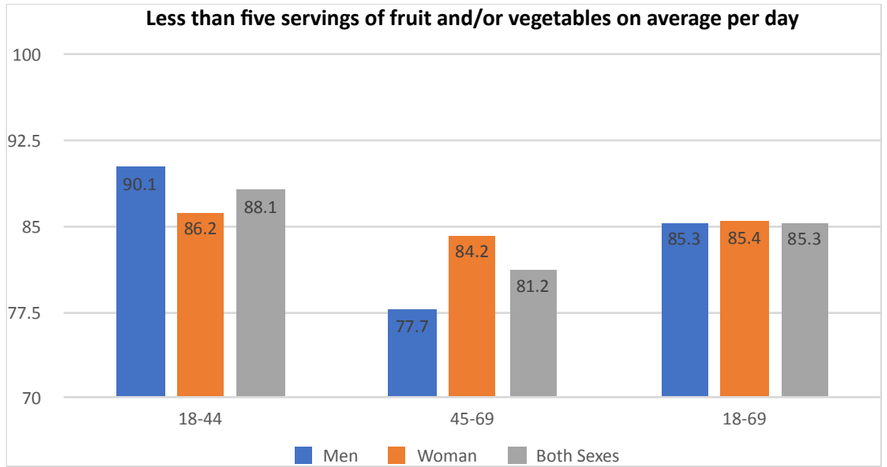


For female respondents (n=2281), 19.3% consumed no fruit and/or vegetable on average per day, 46.7% consumed one to two servings on average per day, 19.4% consumed three to four servings on average per day and 14.6% consumed five or more servings on average per day less than five servings of fruit and/or vegetable on average per day.

For female respondents aged 18-44 years (n=745), 20.8% consumed no fruit and/or vegetable on average per day, 50.5% consumed one to two servings on average per day, 15.0% consumed three to four servings on average per day and 13.8% consumed five or more servings on average per day less than five servings of fruit and/or vegetable on average per day.

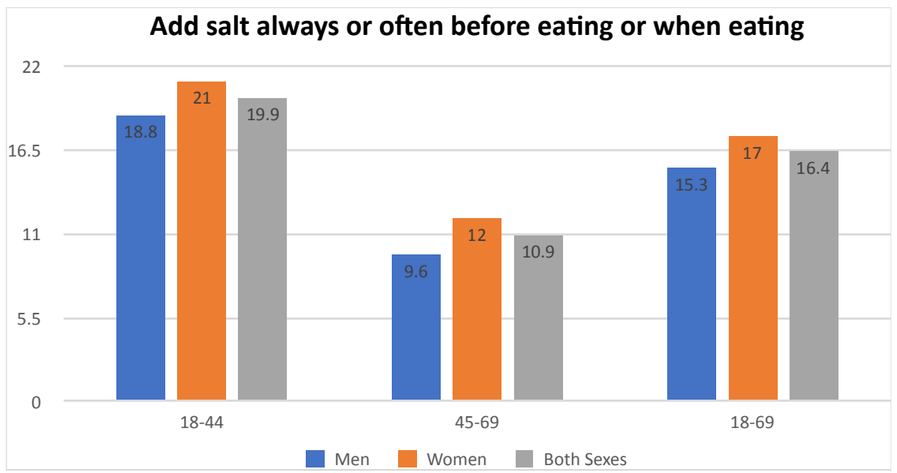
For female respondents aged 45-69 years (n=648), 17.2% consumed no fruit and/or vegetable on average per day, 41.1% consumed one to two servings on average per day, 25.9% consumed three to four servings on average per day and 15.8% consumed five or more servings on average per day less than five servings of fruit and/or vegetable on average per day.

Figure 24. Percentage of all respondents who consumed less than five servings of fruit and/or vegetable on an average per day, for both sexes and ages.



Salt Intake

Figure 64. Percentage of respondents aged 18-69 years who report adding salt while cooking or preparing food at home, by both sexes and age groups.



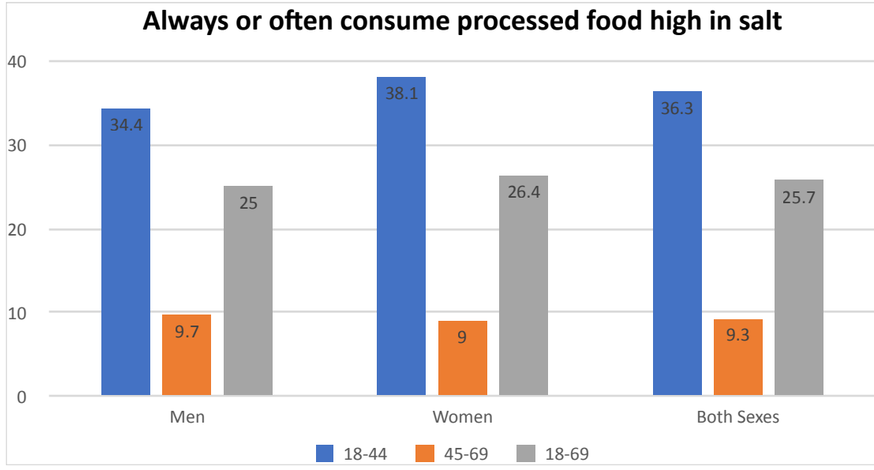
For 2,323 respondents of both sexes and age groups, answers to the question of whether always or often salt was added before or during eating meals were evaluated. The results were that 16.4% of respondents added salt always or often before or during eating a meal. This was further reflected as occurring among 19.9% of respondents aged 18-44 years (n=1214), and among 10.9% of respondents aged 45-69 years (n=1109).

Of male respondents of both age groups (n=915), 15.3% reported that they always or often salt was added before or during eating meals. This was true among 18.8% of male respondents aged 18-44 years (n=456), and among 9.6% of respondents aged 45-69 years (n=459).

Of female respondents of both age groups (n=1408), 17.4% reported that they always or often salt was added before or during eating meals. This was true among 21.0% of female respondents aged 18-44 years (n=758), and among 12.0% of respondents aged 45-69 years (n=650).

A further question on salt consumption practices involved the frequency at which processed foods that are high in salt are consumed.

Figure 65. Percentage of respondents aged 18-69 years who always or often consume processed food high in salt, by both sexes and age groups.



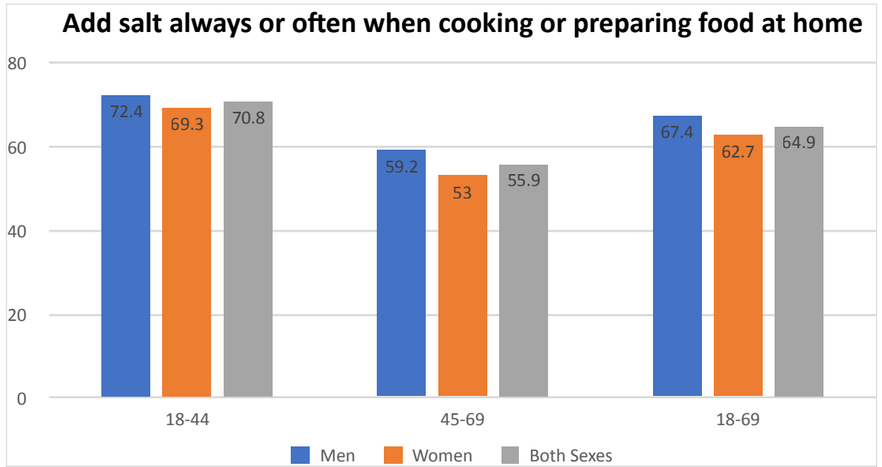
For 2345 respondents of both sexes and age groups, answers to the question of whether they always or often consumed processed food that is high in salt were evaluated. The results were that 25.7% of

respondents always or often consumed processed food that is high in salt. This was further reflected as occurring among 36.3% of respondents aged 18-44 years (n=1228), and among 9.3% of respondents aged 45-69 years (n=1117).

Of male respondents of both age groups (n=923), 25.0% reported that they always or often consumed processed food that is high in salt. This was true among 34.4% of male respondents aged 18-44 years (n=461), and among 9.7% of respondents aged 45-69 years (n=462).

Of female respondents of both age groups (n=1422), 26.4% reported that they always or often consumed processed food that is high in salt. This was true among 38.1% of female respondents aged 18- 44 years (n=767), and among 9.0% of respondents aged 45-69 years (n=655).

Figure 66. Percentage of respondents aged 18-69 years who always or often add salt when cooking or preparing food at home, by both sexes and age groups.

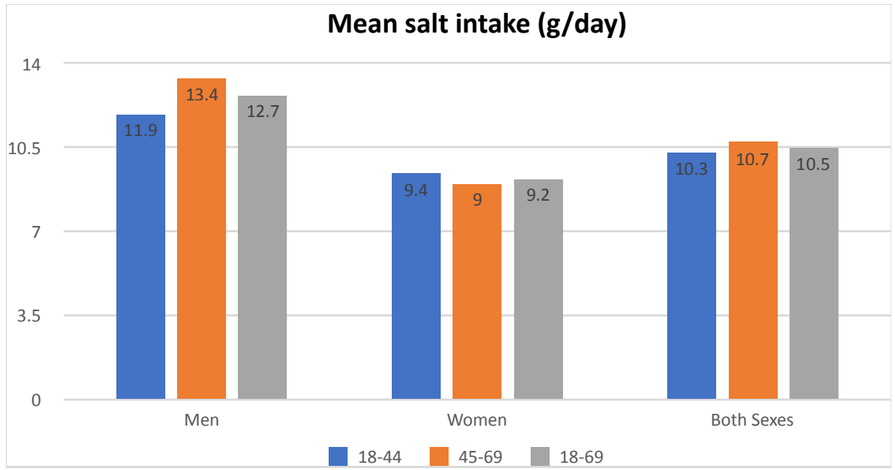


For 2,327 respondents of both sexes and age groups, answers to the question of whether always or often salt was added while cooking or preparing meals at home were evaluated. The results were that 64.9% of respondents added salt always or often while cooking or preparing meals at home. This was further reflected as occurring among 70.8% of respondents aged 18-44 years (n=1213), and among 55.9% of respondents aged 45-69 years (n=1114).

Of male respondents of both age groups (n=909), 67.4% reported that they always or often salt was added while cooking or preparing meals at home. This was true among 72.4% of male respondents aged 18-44 years (n=450), and among 59.2% of respondents aged 45-69 years (n=459).

Of female respondents of both age groups (n=1418), 62.7% reported that they always or often salt was added while cooking or preparing meals at home. This was true among 69.3% of female respondents aged 18-44 years (n=763), and among 53.0% of respondents aged 45-69 years (n=655).

Figure 67. Mean intake of salt in grams per day among all respondents, by both sexes and age groups.

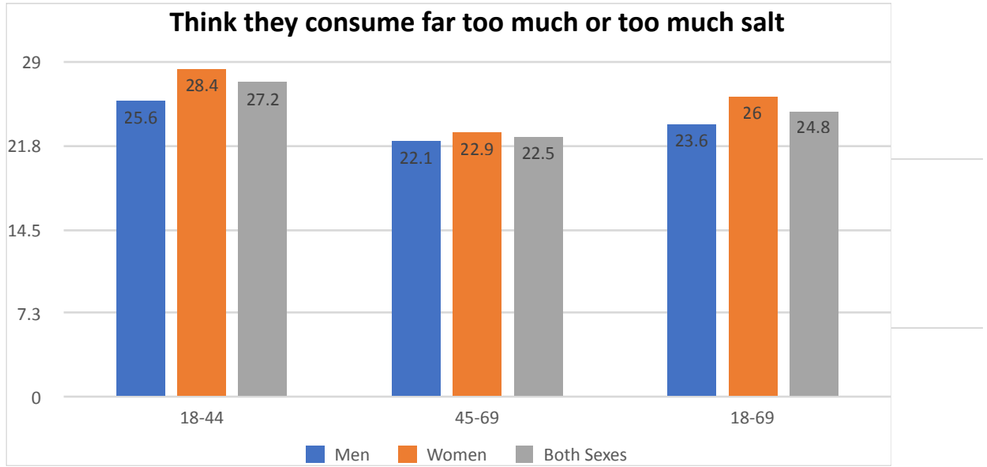


The mean intake of salt in grams per day for all respondents both sexes and age groups (n=820) were determined to be 10.5 g/day. For participants aged 18-44 years (n=418), it was 10.3 g/day and for those aged 45-69 years (n=402), the result was 10.7 g/day.

The mean intake of salt in grams per day for all male respondents of both age groups (n=305) was calculated at 12.7 g/day. For male participants aged 18-44 years (n=151), it was 11.9 g/day and for those aged 45-69 years (n=154), the calculation was 13.4 g/day.

The mean intake of salt in grams per day for all female respondents of both age groups (n=515) was calculated at 9.2 g/day. For female participants aged 18-44 years (n=267), it was 9.4 g/day and for those aged 45-69 years (n=248), the calculation was 9.0 g/day

Figure 25. Percentage of respondents aged 18-69 years with belief that individual consumes too much salt, by both sexes and age groups.

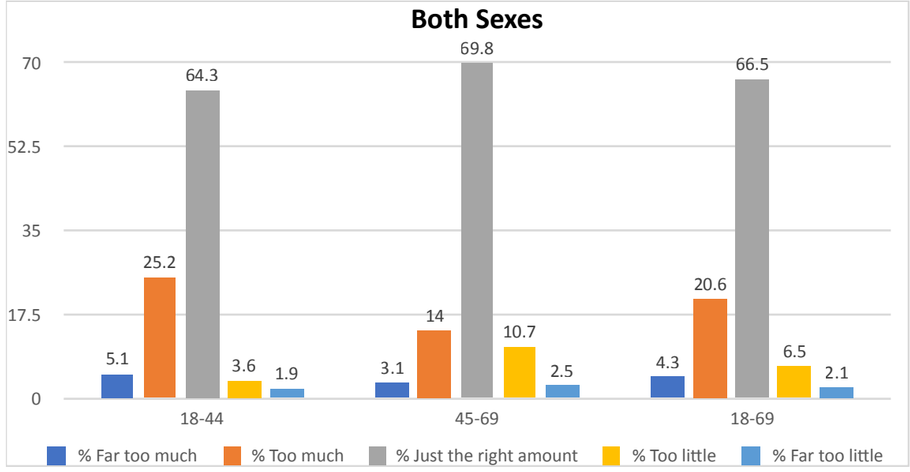


For 2,131 respondents of both sexes and age groups, answers to the question of whether they believed that they consumed too much salt were evaluated. The results were that 24.8% of respondents believed that they consumed too much salt. This was further reflected as occurring among 27.2% of respondents aged 18-44 years (n=1108), and among 22.5% of respondents aged 45-69 years (n=102).

Of male respondents of both age groups (n=834), 23.6% reported that they believed that they consumed too much salt. This was true among 25.6% of male respondents aged 18-44 years (n=405), and among 22.1% of male respondents aged 45-69 years (n=429).

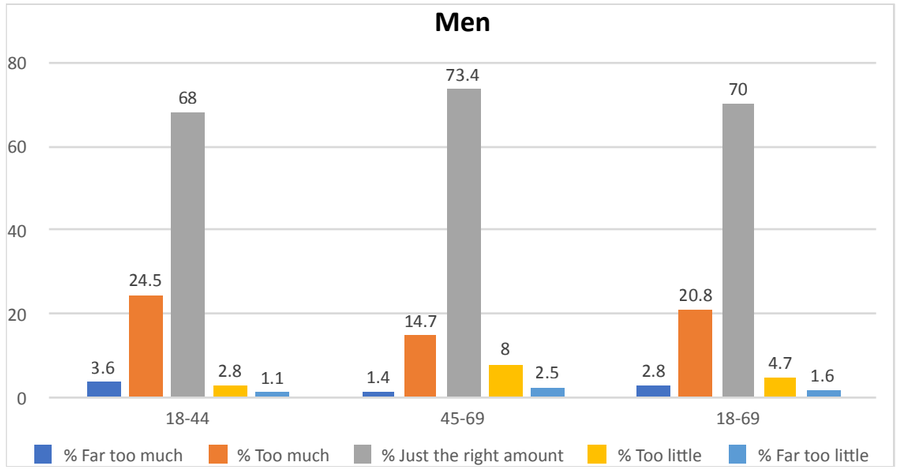
Of female respondents of both age groups (n=1297), 26.0% reported that they believed that they consumed too much salt. This was true among 28.4% of female respondents aged 18- 44 years (n=703), and among 22.9% of female respondents aged 45-69 years (n=594).

Figure 26. Percentage of all respondents aged 18-69 years and self-reported quantity of salt consumed, by both sexes and age groups.



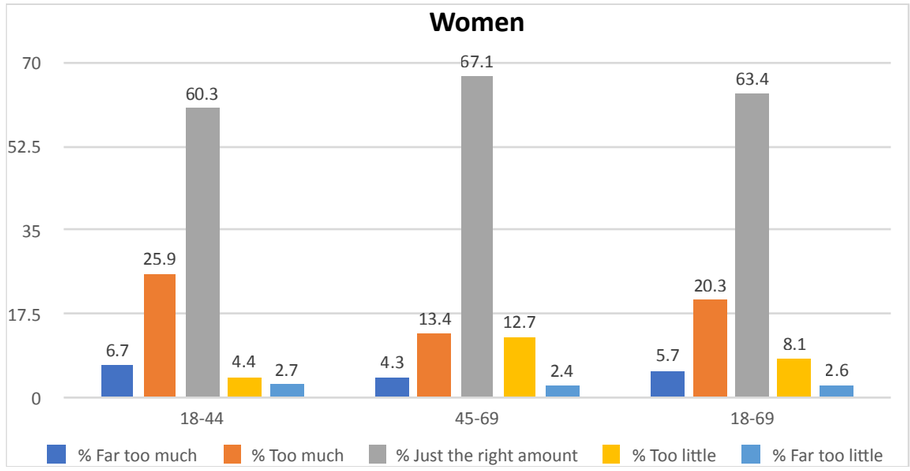
For 2133 respondents of both sexes and age groups, responses to a request to self-report the quantity of salt consumed were recorded. The results were that 4.3% reported far too much, 20.6% said too much, 66.5% said just the right amount, 6.5% said too little and 2.1% said far too little. For all respondents aged 18-44 years (n=1100), the responses were 5.1% reported far too much, 25.2% said too much. For all respondents aged 45-69 years (n=1033), the responses were 3.1% reported far too much, 14.0% said too much, 69.8% said just the right amount, 10.7% said too little and 2.5% said far too little.

Figure 27. Percentage of male respondents aged 18-69 years and self-reported quantity of salt consumed, by both age groups.



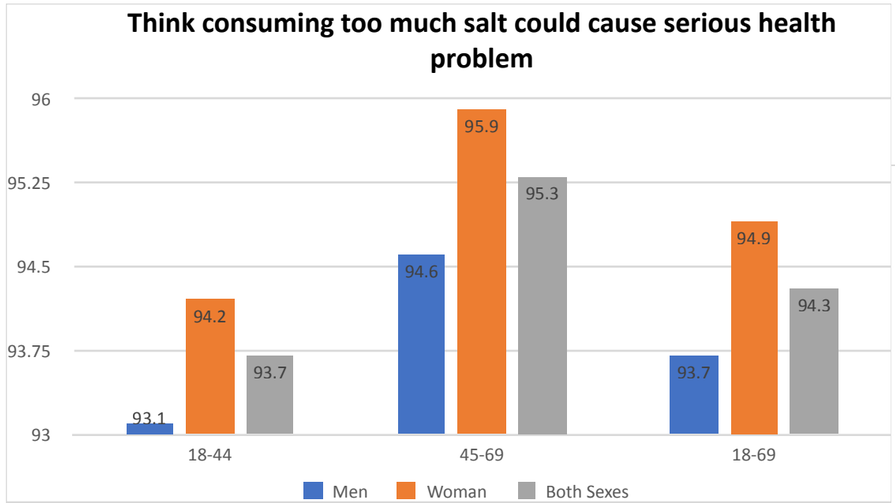
For 835 male respondents of both age groups, responses to a request to self-report the quantity of salt consumed provided the following results. Males at 2.8% reported far too much, 20.8% said too much, 70.0% said just the right amount, 4.7% said too little and 1.6% said far too little. For male respondents aged 18-44 years (n=413), the response was 3.6% reported far too much, 24.5% said too much 68.0% said just the right amount, 2.8% said too little and 1.1% said far too little. For male respondents aged 45-69 years (n=422), the responses were 1.4% reported far too much, 14.7% said too much, 73.4% said just the right amount, 8.0% said too little and 2.5% said far too little.

Figure 28. Percentage of female respondents aged 18-69 years and self-reported quantity of salt consumed, by both age groups.



For 1298 female respondents of both age groups, responses to a request to self-report the quantity of salt consumed provided the following results. Females at 5.7% reported far too much, 20.3% said too much, 63.4% said just the right amount, 8.1% said too little and 2.6% said far too little. For female respondents aged 18-44 years (n=687), the responses were 6.7% reported far too much, 25.9% said too much, 60.3% said just the right amount, 4.4% said too little and 2.7% said far too little. For female respondents aged 45-69 years (n=611), the responses were 4.3% reported far too much, 13.4% said too much, 67.1% said just the right amount, 12.7% said too little and 2.4% said far too little.

Figure 29. Percentage of respondents aged 18-69 years with belief that high salt consumption may cause a serious health problem, by both sexes and age groups.



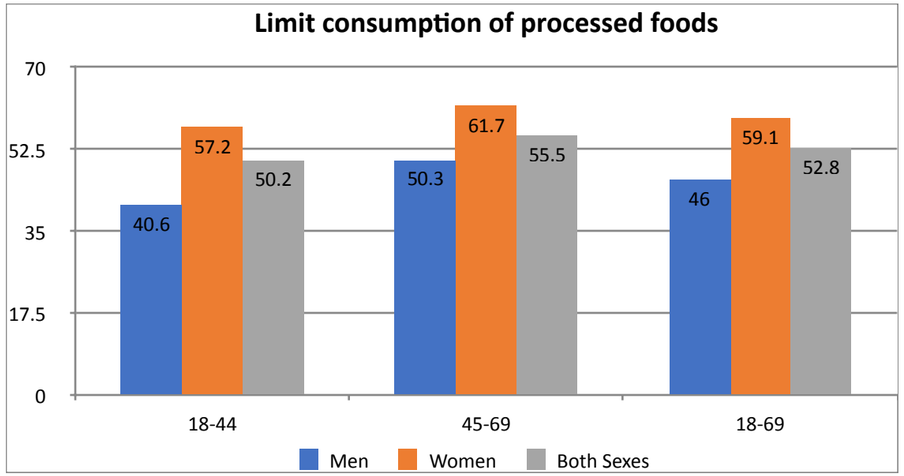
For 2,360 respondents of both sexes and age groups, answers to the question of whether they believed consuming too much salt could cause serious health problems were evaluated. The results were that 94.3% of respondents believed consuming too much salt could cause serious health problems. This was further reflected as occurring among 93.5% of respondents aged 18-44 years (n=1236), and among 95.3% of respondents aged 45-69 years (n=1124).

Of male respondents of both age groups (n=931), 93.7% reported that they believed consuming too much salt could cause serious health problems. This was true among 93.1of male respondents aged 18-44 years (n=463), and among 94.6% of male respondents aged 45-69 years (n=468).

Of female respondents of both age groups (n=1429), 94.9% reported that they believed consuming too much salt could cause serious health problems. This was true among 94.2% of female respondents aged 18-44 years (n=773), and among 95.9% of female respondents aged 45-69 years (n=656).

Questions were asked that reflected whether specific steps were taken to reduce salt intake. Interventions assessed included limiting the consumption of processed foods, examining nutrition labels, purchasing low salt alternatives, and avoiding food purchased outside of the home.

Figure 30. Percentage of respondents aged 18-69 years who limit consumption of processed foods, by both sexes and age groups.

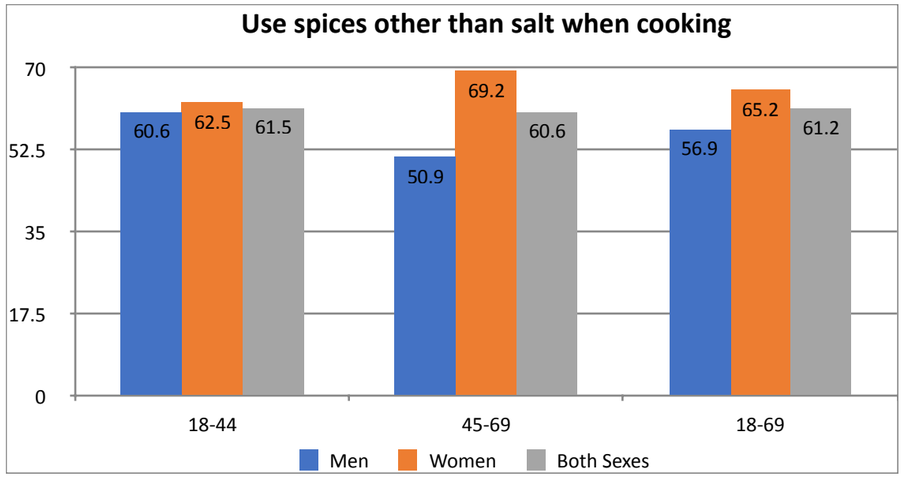


For 2,360 respondents of both sexes and age groups, answers to the question of whether they limited consumption of processed foods to reduce salt intake were evaluated. The results were that 52.8% of respondents reported that they limited consumption of processed foods to reduce salt intake. This was further reflected as occurring among 48.1% of respondents aged 18-44 years (n=1236), and among 60.1% of respondents aged 45-69 years (n=1123).

Of male respondents of both age groups (n=931), 46.0% reported that they limited consumption of processed foods to reduce salt intake. This was true among 43.2% of male respondents aged 18-44 years (n=463), and among 50.5% of male respondents aged 45-69 years (n=468).

Of female respondents of both age groups (n=1429), 59.1% reported that they limited consumption of processed foods to reduce salt intake. This was true among 52.8% of female respondents aged 18-44 years (n=773), and among 68.4% of female respondents aged 45-69 years (n=656).

Figure 31. Percentage of respondents aged 18-69 years who use spices other than salt when cooking, by both sexes and age groups.

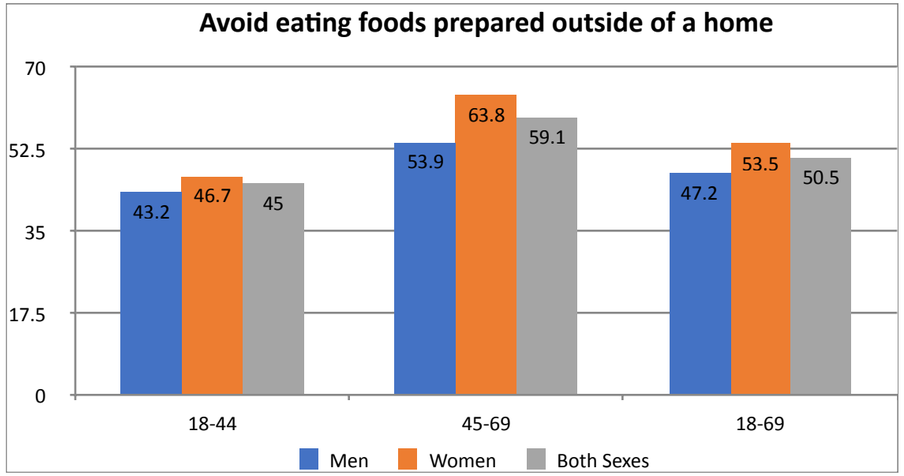


For 2,360 respondents of both sexes and age groups, answers to the question of whether they used spices other than salt to reduce salt intake were evaluated. The results were that 61.2% of respondents used spices other than salt to reduce salt intake. This was further reflected as occurring among 61.5% of respondents aged 18-44 years (n=1236), and among 60.6% of respondents aged 45-69 years (n=1124).

Of male respondents of both age groups (n=931), 56.9% reported that they used spices other than salt to reduce salt intake. This was true among 60.6% of male respondents aged 18-44 years (n=463), and among 50.9% of male respondents aged 45-69 years (n=468).

Of female respondents of both age groups (n=1429), 65.2% reported that they used spices other than salt to reduce salt intake. This was true among 62.5% of female respondents aged 18-44 years (n=773), and among 69.2% of female respondents aged 45-69 years (n=656).

Figure 32. Percentage of respondents aged 18-69 years who avoid eating foods prepared outside of a home to reduce salt intake, by both sexes and age groups.

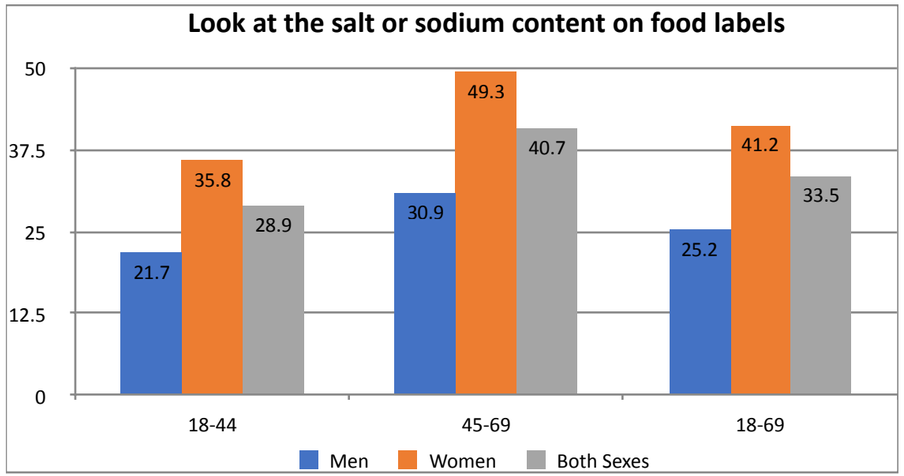


For 2,360 respondents of both sexes and age groups, answers to the question of whether they avoided eating foods prepared outside of a home to reduce salt intake were evaluated. The results were that 50.5% of respondents avoided eating foods prepared outside of a home to reduce salt intake. This was further reflected as occurring among 45.0% of respondents aged 18-44 years (n=1236), and among 59.1% of respondents aged 45-69 years (n=1124).

Of male respondents of both age groups (n=931), 47.2% reported that they avoided eating foods prepared outside of a home to reduce salt intake. This was true among 43.2% of male respondents aged 18-44 years (n=463), and among 53.9% of male respondents aged 45-69 years (n=468).

Of female respondents of both age groups (n=1429), 53.5% reported that they avoided eating foods prepared outside of a home to reduce salt intake. This was true among 46.7% of female respondents aged 18-44 years (n=773), and among 63.8% of female respondents aged 45-69 years (n=656).

Figure 33. Percentage of respondents aged 18-69 years who read food labels, by both sexes and age groups.

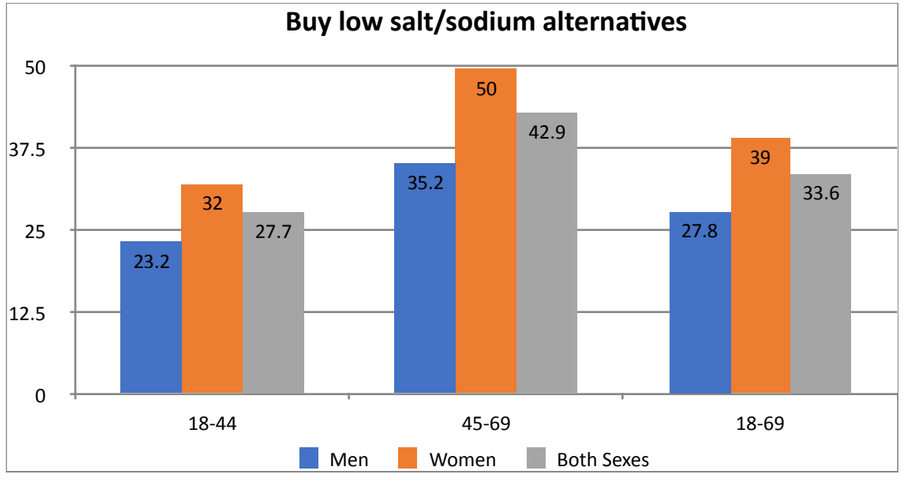


For 2360 respondents of both sexes and age groups, answers to the question of whether they read food labels to reduce salt intake were evaluated. The results were that 33.5% of respondents believed consuming too much salt could cause serious health problems. This was further reflected as occurring among 28.9% of respondents aged 18-44 years (n=1236), and among 40.7% of respondents aged 45-69 years (n=1124).

Of male respondents of both age groups (n=931), 25.2% reported that they read food labels to reduce salt intake. This was true among 21.7% of male respondents aged 18-44 years (n=463), and among 30.9% of male respondents aged 45-69 years (n=468).

Of female respondents of both age groups (n=1429), 41.2% reported that they read food labels to reduce salt intake. This was true among 35.8% of female respondents aged 18-44 years (n=773), and among 49.3% of female respondents aged 45-69 years (n=656).

Figure 34. Percentage of respondents aged 18-69 years who buy low salt/sodium alternatives, by both sexes and age groups.

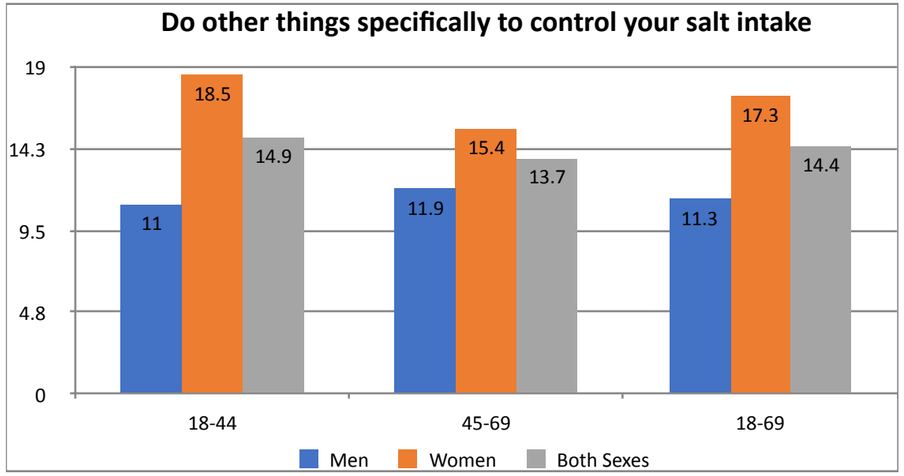


For 2,360 respondents of both sexes and age groups, answers to the question of whether they would buy low salt/sodium alternatives to reduce salt intake were evaluated. The results were that 33.6% of respondents would buy low salt/sodium alternatives to reduce salt intake. This was further reflected as occurring among 27.7% of respondents aged 18-44 years (n=1236), and among 42.9% of respondents aged 45-69 years (n=1124).

Of male respondents of both age groups (n=931), 27.8% reported that they would buy low salt/sodium alternatives to reduce salt intake. This was true among 23.2% of male respondents aged 18-44 years (n=4563), and among 35.2% of male respondents aged 45-69 years (n=468).

Of female respondents of both age groups (n=1429), 39.0% reported that they would buy low salt/sodium alternatives to reduce salt intake. This was true among 32.0% of female respondents aged 18-44 years (n=773), and among 49.5% of female respondents aged 45-69 years (n=656).

Figure 35. Percentage of respondents aged 18-69 years who specifically did other things to control their salt intake, by both sexes and age groups.

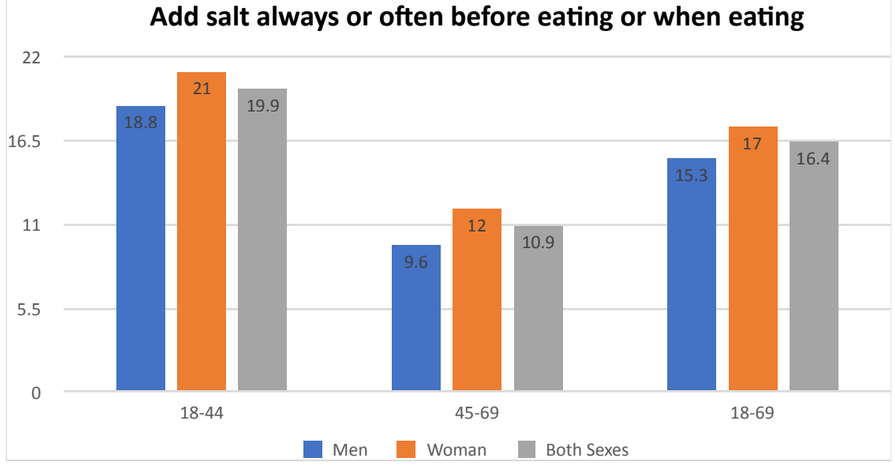


For 2,360 respondents of both sexes and age groups, answers to the question of whether other things were done to specifically control salt intake were evaluated. The results were that 14.4% of respondents did other things to control salt intake. This was further reflected as occurring among 14.9% of respondents aged 18-44 years (n=1236), and among 13.7% of respondents aged 45-69 years (n=1124).

Of male respondents of both age groups (n=931), 11.3% reported that they did other things to control salt intake. This was true among 11.0% of male respondents aged 18-44 years (n=463), and among 11.9% of male respondents aged 45-69 years (n=468).

Of female respondents of both age groups (n=1429), 17.3% reported that they did other things specifically to control salt intake. This was true among 18.5% of female respondents aged 18-44 years (n=773), and among 15.4% of female respondents aged 45-69 years (n=656).

Figure 36. Percentage of respondents aged 18-69 years who always or often added salt before eating or when eating, by both sexes and age groups.

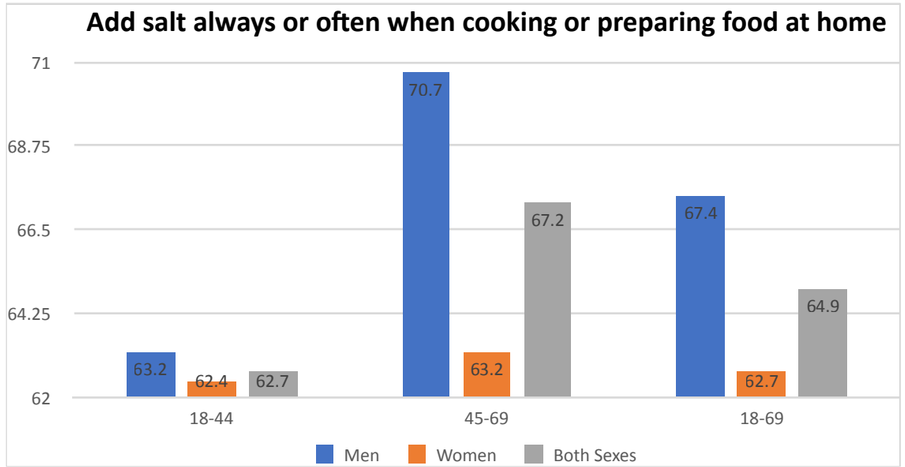


For 2,323 respondents of both sexes and age groups, answers to the question of whether they added salt always or often before eating or when eating were evaluated. The results were that 16.4% of respondents added salt always or often before eating or when eating. This was further reflected as occurring among 19.9% of respondents aged 18-44 years (n=1214), and among 10.9% of respondents aged 45-69 years (n=1109).

Of male respondents of both age groups (n=915), 15.3% reported that they added salt always or often before eating or when eating. This was true among 18.8% of male respondents aged 18-44 years (n=456), and among 9.6% of male respondents aged 45-69 years (n=459).

Of female respondents of both age groups (n=1408), 17.4% reported that they added salt always or often before eating or when eating. This was true among 21.0% of female respondents aged 18-44 years (n=758), and among 12.0% of female respondents aged 45-69 years (n=650).

Figure 37. Percentage of respondents aged 18-69 years who always or often add salt when cooking or preparing food at home, by both sexes and age groups.

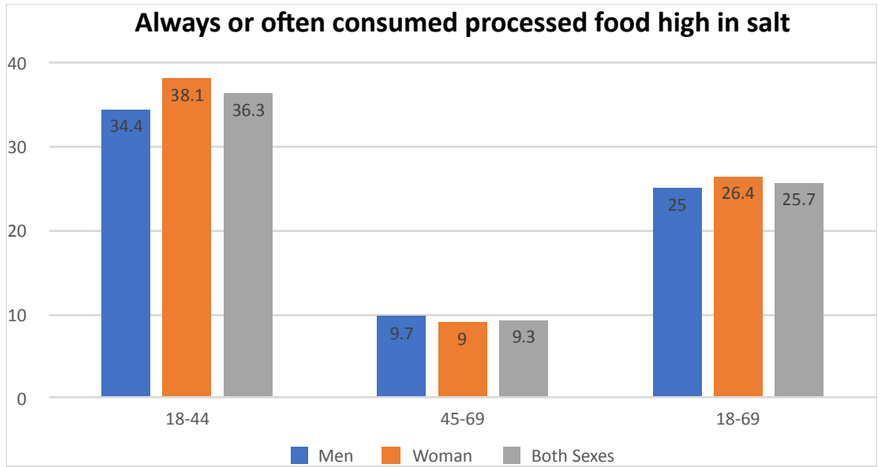


For 2,327 respondents of both sexes and age groups, answers to the question of whether they always or often add salt when cooking or preparing food at home were evaluated. The results were that 64.9% of respondents would always or often add salt when cooking or preparing food at home. This was further reflected as occurring among 62.7% of respondents aged 18-44 years (n=1213), and among 67.2% of respondents aged 45-69 years (n=1114).

Of male respondents of both age groups (n=909), 67.4% reported that they would always or often add salt when cooking or preparing food at home. This was true among 63.2% of male respondents aged 18-44 years (n=4563), and among 70.7% of male respondents aged 45-69 years (n=468).

Of female respondents of both age groups (n=1418), 62.7% reported that they would always or often add salt when cooking or preparing food at home. This was true among 62.4% of female respondents aged 18-44 years (n=763), and among 63.2% of female respondents aged 45-69 years (n=655).

Figure 38. Percentage of respondents aged 18-69 years who always or often consume processed food high in salt, by both sexes and age groups.



For 2345 respondents of both sexes and age groups, answers to the question of whether they would buy low salt/sodium alternatives to reduce salt intake were evaluated. The results were that 25.7% of respondents would buy low salt/sodium alternatives to reduce salt intake. This was further reflected as occurring among 36.3% of respondents aged 18-44 years (n=1228), and among 9.3% of respondents aged 45-69 years (n=1117).

Of male respondents of both age groups (n=923), 25.0% reported that they would buy low salt/sodium alternatives to reduce salt intake. This was true among 34.4% of male respondents aged 18-44 years (n=461), and among 9.7% of male respondents aged 45-69 years (n=462).

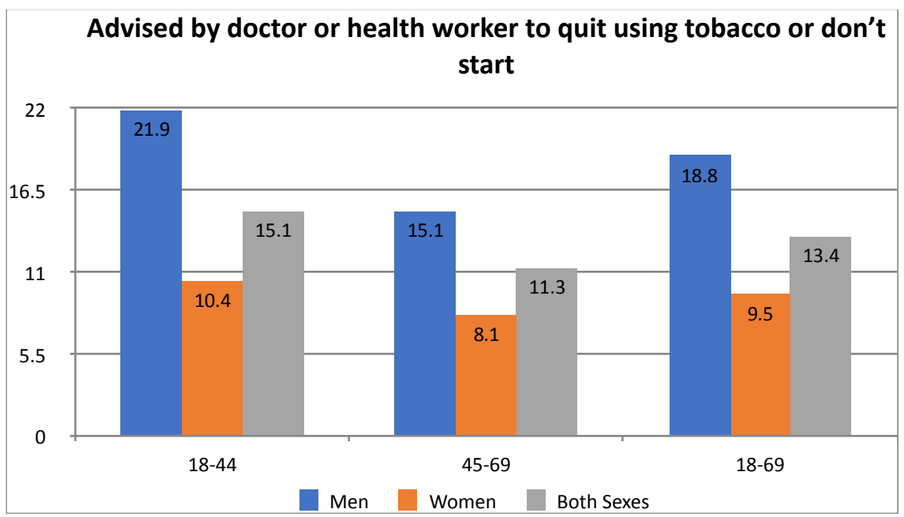
Of female respondents of both age groups (n=1422), 26.4% reported that they would buy low salt/sodium alternatives to reduce salt intake. This was true among 38.1% of female respondents aged 18-44 years (n=767), and among 9.0% of female respondents aged 45-69 years (n=655).

Interactions with Healthcare Providers

This section of the survey questionnaire inquired on the experience of respondents with health care workers on receiving advice on practices and habits that inure to a healthier lifestyle in the past 12 months. Questions specifically inquired on whether advice was provided on use of tobacco, salt content in diet, consumption of fruits and vegetables, reducing fat in diet, physical activity, pursuing a

healthy weight and reducing the consumption of sugary beverages.

Figure 39. Percentage of respondents aged 18-69 years advised on tobacco use by doctor or healthcare worker, by both sexes and age groups.

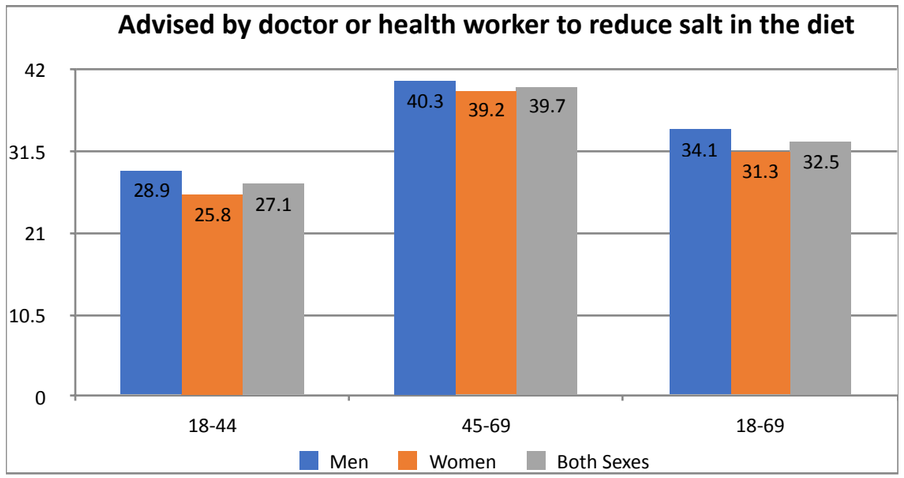


Of respondents of both sexes and age groups who responded to the question (n=1649), 13.4% reported that they were advised by doctor or health worker to quit using tobacco or not to start. For those aged 18-44 years (n=821), the percentage was 15.1% and for those 45-69 years (n=828), 11.3%.

Of male respondents of both age groups who responded to the question (n=561), 18.8% reported that they were advised by doctor or health worker to quit using tobacco or not to start. For those aged 18-44 years (n=254), the percentage was 21.9% and for those 45-69 years (n=307), 15.1%.

Of female respondents of both age groups who responded to the question (n=1088), 9.5% reported that they were advised by doctor or health worker to quit using tobacco or not to start. For those aged 18-44 years (n=567), the percentage was 10.4% and for those 45-69 years (n=521), 8.1%.

Figure 40. Percentage of respondents aged 18-69 years advised to reduce salt consumption by a doctor or healthcare worker, by both sexes and age groups.

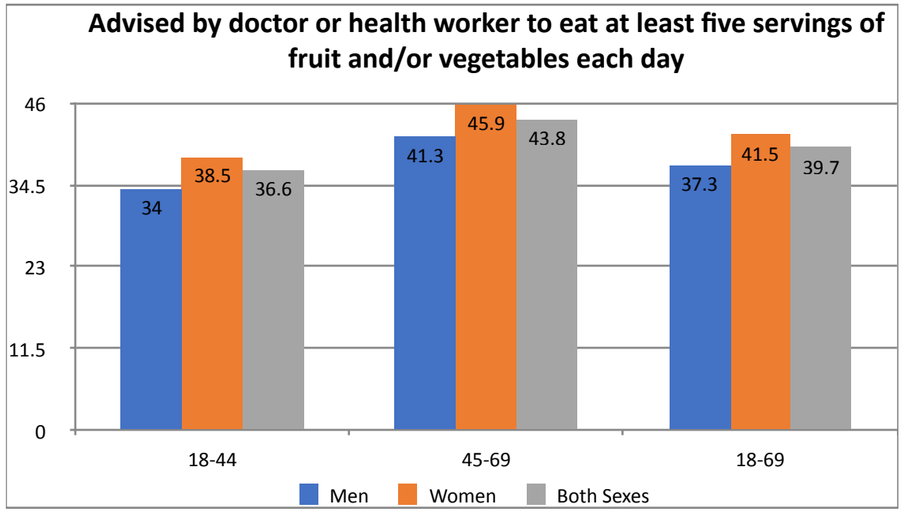


Of respondents of both sexes and age groups who responded to the question (n=1649), 32.5% reported that they were advised by doctor or health worker to reduce salt in their diet. For those aged 18-44 years (n=821), the percentage was 27.1% and for those 45-69 years (n=828), 39.7%.

Of male respondents of both age groups who responded to the question (n=561), 34.1% reported that they were advised by doctor or health worker to reduce salt in their diet. For those aged 18- 44 years (n=254), the percentage was 28.9% and for those 45-69 years (n=307), 40.3%

Of female respondents of both age groups who responded to the question (n=1088), 31.3% reported that they were advised by doctor or health worker to reduce salt in their diet. For those aged 18-44 years (n=671), the percentage was 25.8% and for those 45-69 years (n=521), 39.2%.

Figure 41. Percentage of respondents aged 18-69 years advised by a doctor or healthcare worker to eat at least five servings of fruit and/or vegetables each day, by both sexes and age groups.

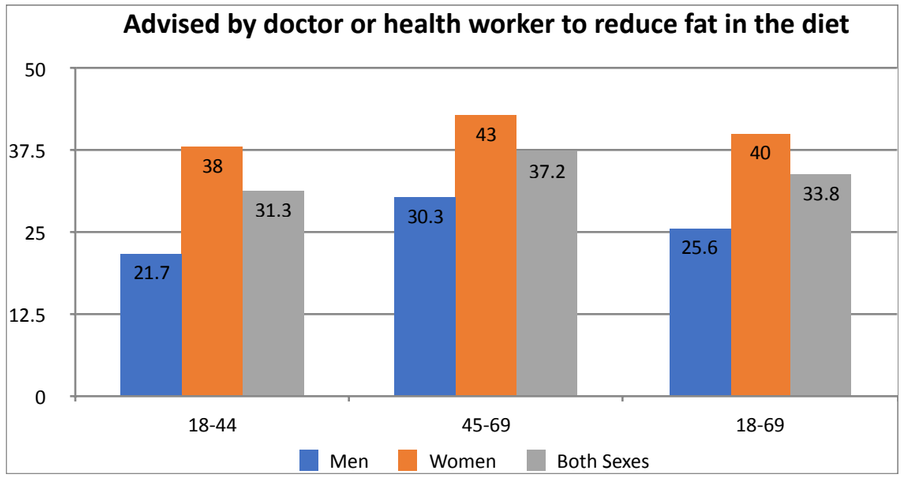


Of respondents of both sexes and age groups who responded to the question (n=1649), 39.7% reported that they were advised by doctor or health worker to eat at least five servings of fruit and/or vegetables each day. For those aged 18-44 years (n=821), the percentage was 36.6% and for those 45-69 years (n=828), 43.8%.

Of male respondents of both age groups who responded to the question (n=561), 37.3% reported that they were advised by doctor or health worker to eat at least five servings of fruit and/or vegetables each day. For those aged 18-44 years (n=254), the percentage was 34.0% and for those 45-69 years (n=307), 41.3%.

Of female respondents of both age groups who responded to the question (n=1088), 41.5% reported that they were advised by doctor or health worker to eat at least five servings of fruit and/or vegetables each day. For those aged 18-44 years (n=567), the percentage was 38.5% and for those 45-69 years (n=521), 45.9 %.

Figure 42. Percentage of respondents aged 18-69 years advised by a doctor or healthcare worker to reduce fat in their diet, by both sexes and age groups.

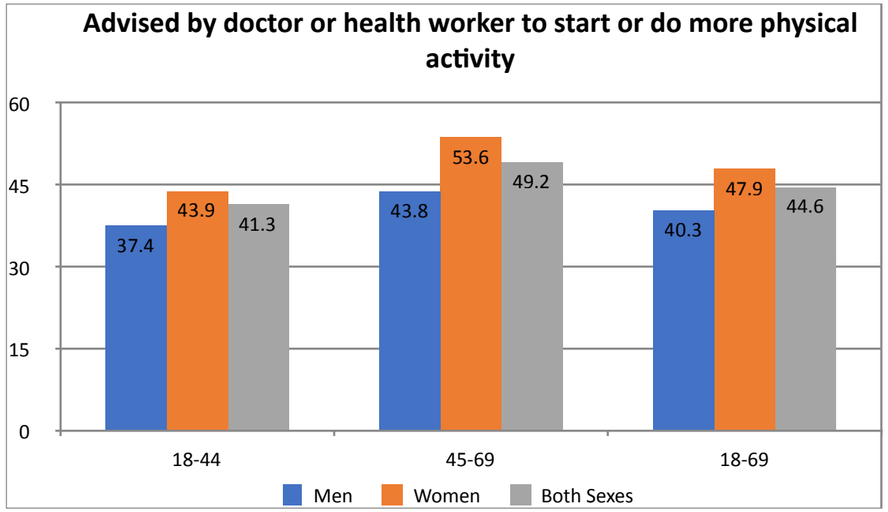


Of respondents of both sexes and age groups who responded to the question (n=1649), 33.8% reported that they were advised by doctor or health worker to reduce fat in the diet. For those aged 18-44 years (n=821), the percentage was 31.3% and for those 45-69 years (n=828), 37.2%.

Of male respondents of both age groups who responded to the question (n=561), 25.6% reported that they were advised by doctor or health worker to reduce fat in the diet. For those aged 18- 44 years (n=254), the percentage was 21.7% and for those 45-69 years (n=307), 30.3%.

Of female respondents of both age groups who responded to the question (n=1088), 40.0% reported that they were advised by doctor or health worker to reduce fat in the diet. For those aged 18-44 years (n=567), the percentage was 38.0% and for those 45-69 years (n=521), 42.8%.

Figure 43. Percentage of respondents aged 18-69 years advised by a doctor or healthcare worker to start or do more physical activity, by both sexes and age groups.

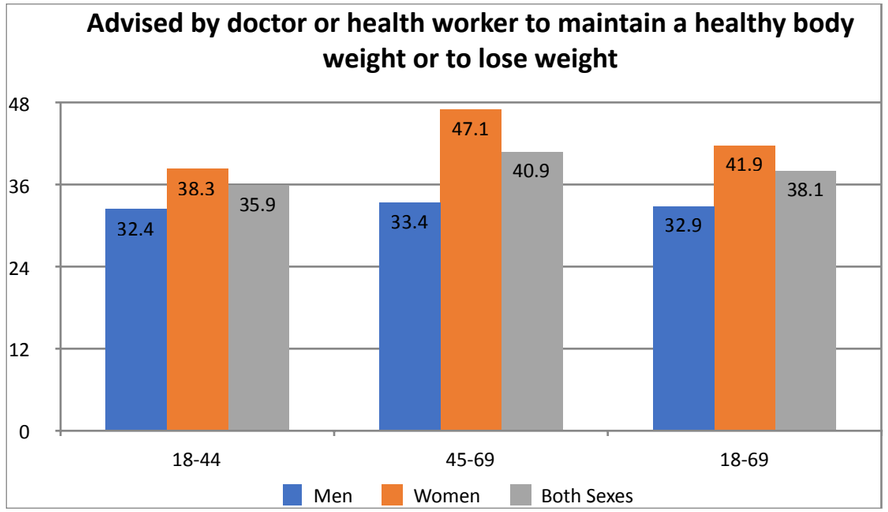


Of respondents of both sexes and age groups who responded to the question (n=1649), 44.6% reported that they were advised by doctor or health worker to start or do more physical activity. For those aged 18-44 years (n=821), the percentage was 41.3% and for those 45-69 years (n=828), 49.2%.

Of male respondents of both age groups who responded to the question (n=561), 40.3% reported that they were advised by doctor or health worker to start or do more physical activity. For those aged 18-44 years (n=254), the percentage was 37.4% and for those 45-69 years (n=307), 43.8%.

Of female respondents of both age groups who responded to the question (n=1088), 47.9% reported that they were advised by doctor or health worker to start or do more physical activity. For those aged 18-44 years (n=567), the percentage was 43.9% and for those 45-69 years (n=521), 53.6%.

Figure 44. Percentage of respondents aged 18-69 years advised by a doctor or healthcare worker to maintain a healthy body weight or to lose weight, by both sexes and age groups.

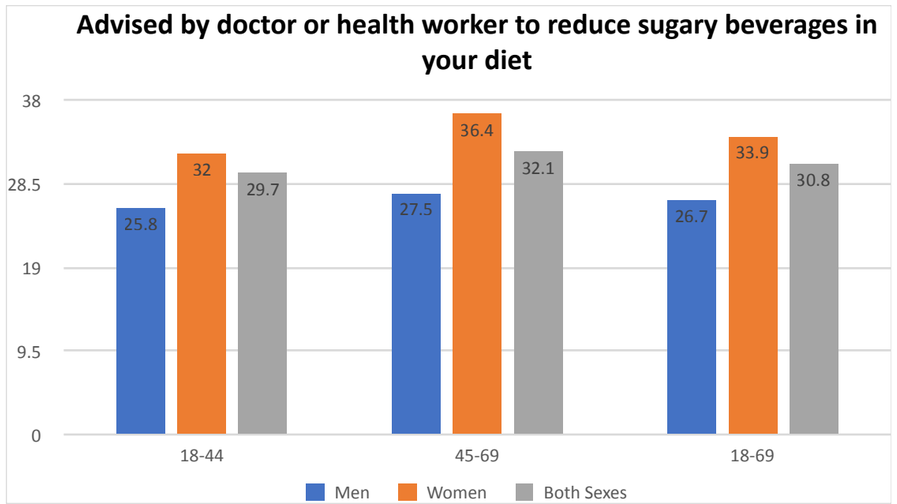


Of respondents of both sexes and age groups who responded to the question (n=1649), 38.1% reported that they were advised by doctor or health worker to maintain a healthy body weight or to lose weight. For those aged 18-44 years (n=821), the percentage was 35.9% and for those 45-69 years (n=828), 40.9%.

Of male respondents of both age groups who responded to the question (n=561), 32.9% reported that they were advised by doctor or health worker to maintain a healthy body weight or to lose weight. For those aged 18-44 years (n=254), the percentage was 32.4% and for those 45-69 years (n=307), 33.4%.

Of female respondents of both age groups who responded to the question (n=1088), 41.9% reported that they were advised by doctor or health worker to maintain a healthy body weight or to lose weight. For those aged 18-44 years (n=567), the percentage was 38.3% and for those 45-69 years (n=521), 47.1%.

Figure 45. Percentage of respondents aged 18-69 years advised by a doctor or healthcare worker to reduce consumption of sugary beverages, by both sexes and age groups.



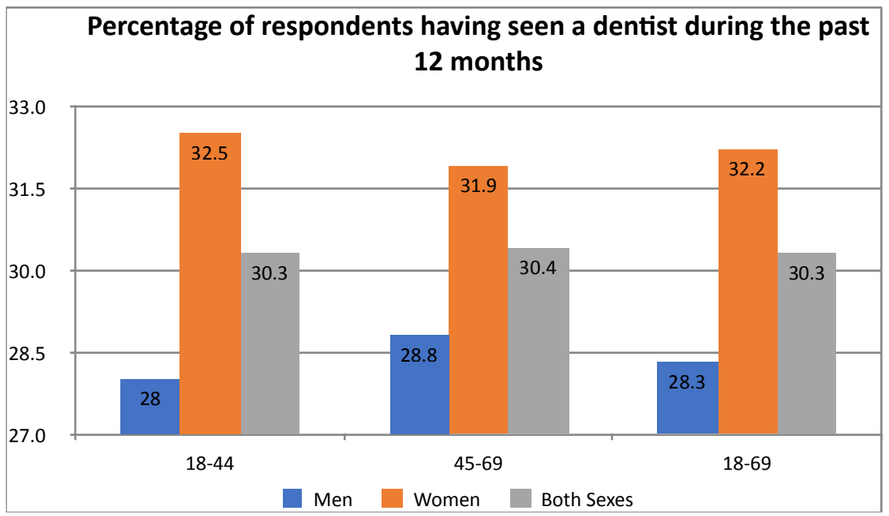
Of respondents of both sexes and age groups who responded to the question (n=1649), 30.8% reported that they were advised by doctor or health worker to reduce sugary beverages in your diet. For those aged 18-44 years (n=863), the percentage was 29.7% and for those 45-69 years (n=786), 32.1%.

Of male respondents of both age groups who responded to the question (n=560), 26.7% reported that they were advised by doctor or health worker to reduce sugary beverages in your diet. For those aged 18-44 years (n=270), the percentage was 20.5% and for those 45-69 years (n=290), 27.5%.

Of female respondents of both age groups who responded to the question (n=1089), 33.9% reported that they were advised by doctor or health worker to reduce sugary beverages in your diet. For those aged 18-44 years (n=593), the percentage was 32.0% and for those 45-69 years (n=496), 36.4%.

Oral Health

Figure 46. Percentage of respondents aged 18-69 years who has seen a dentist during the past 12 months, both sexes and age groups.

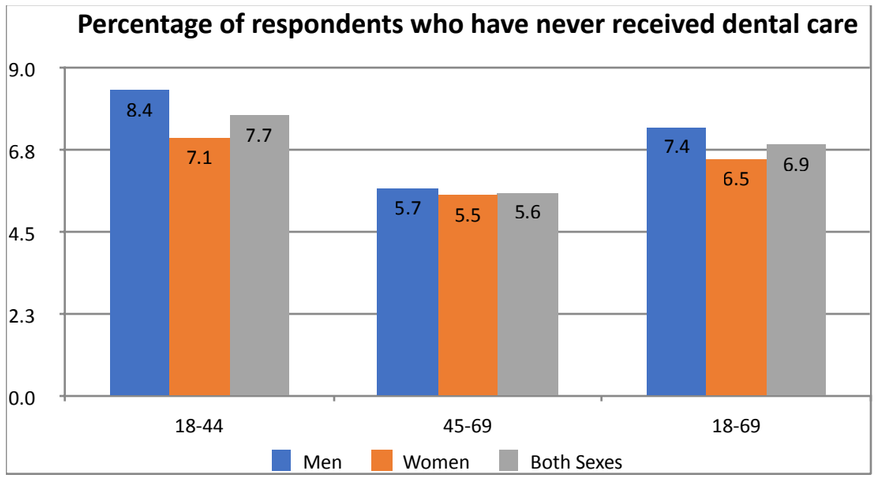


The percentage of respondents of both sexes and age groups having seen a dentist in the past 12 months (n=2360) was 30.3%. The percentage of respondents aged 18-44 years (n=1236) was 30.3% with 30.4% of respondents aged 45-69 years (n=1124) reported having seen a dentist during the past 12 months.

The percentage of male respondents of both age groups having seen a dentist in the past 12 months (n=931) was 28.3%. The percentage of male respondents aged 18-44 years (n=463) was 28.0% with 28.8% of male respondents aged 45-69 years (n=468) reported having seen a dentist during the past 12 months.

The percentage of female respondents of both age groups having seen a dentist in the past 12 months (n=1429) was 32.2%. The percentage of female respondents aged 18-44 years (n=773) was 32.5% with 31.9% of female respondents aged 45-69 years (n=656) reported having seen a dentist during the past 12 months.

Figure 47. Percentage of respondents aged 18-69 years who have never received dental care, by both sexes and age groups.

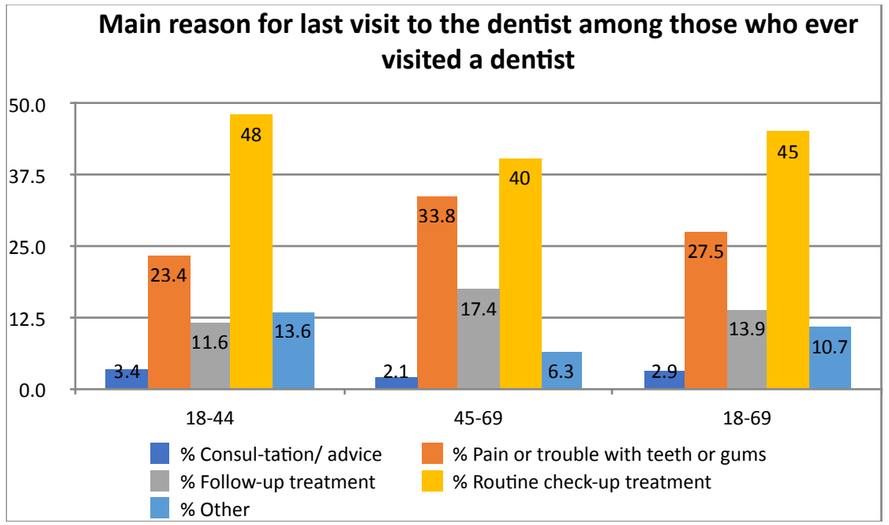


A question on the survey questionnaire inquired whether the respondent had ever received dental care. For 2360 respondents of both sexes and age groups, 6.9% reported having never received dental care. Of respondents aged 18-44 years (n=1236), 7.7% had never received dental care and for those aged 45-69 years (n-1124), 5.6 %reported having never received dental care.

Of male respondents of both age groups (n=931), 7.4% reported having never received dental care. Of male respondents aged 18-44 years (n=463), 8.4% reported never receiving dental care while the percentage of male respondents aged 45-69 years (n=468) was 5.7%.

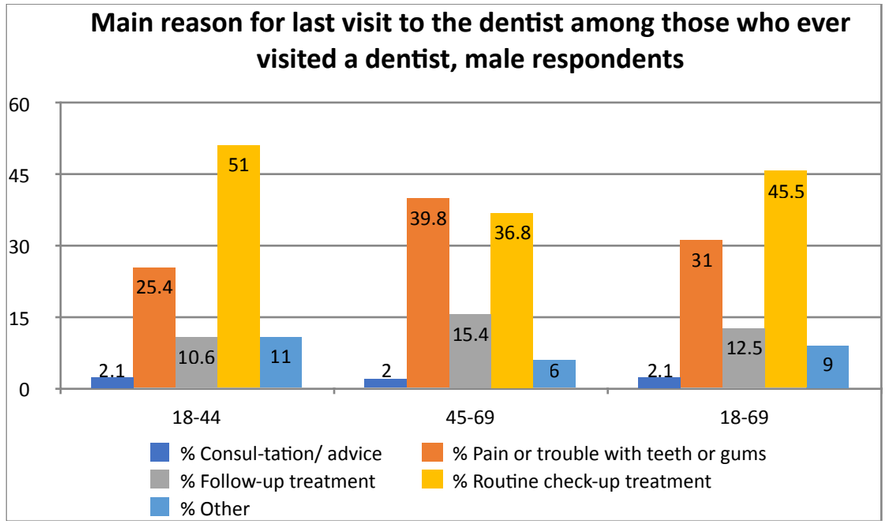
Of female respondents of both age groups (n=1429), 6.5% reported having never received dental care. Of female respondents aged 18-44 years (n=773), 7.1% reported never receiving dental care while the percentage of female respondents aged 45-69 years (n=656) was 5.5%.

Figure 48. Percentage by type of reason for most recent visit to dentist for respondents aged 18- 69 years, by both sexes and age groups.



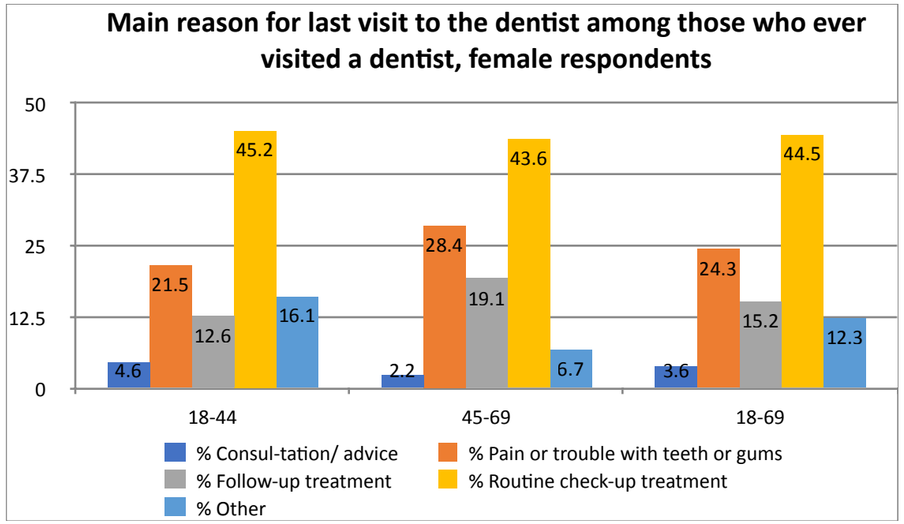
When asked the purpose of the most recent visit to the dentist, the responses received by 2240 respondents of both sexes and age groups reported that 2.9% visited a dentist for a consultation, 27.5% for pain or trouble with teeth and gums, 13.9% for follow-up treatment, 45.0% for routine check-up treatment and 10.7% for other. Of respondents aged 18-44 years (n=1158), the purpose for the most visit to the dentist was reported by 3.4% for a consultation, 23.4% for pain or trouble with teeth and gums, 11.6% for follow-up treatment, 48.0% for routine check-up treatment and 13.6% for other. Of respondents aged 45-69 years (n=1082), 2.1% reported visiting a dentist for a consultation, 33.8% for pain or trouble with teeth and gums, 17.4% for follow-up treatment, 40.4% for routine check-up treatment and 6.3% for other.

Figure 49. Percentage by type of reason for most recent visit to dentist for male respondents aged 18-69 years, by both sexes and age groups.



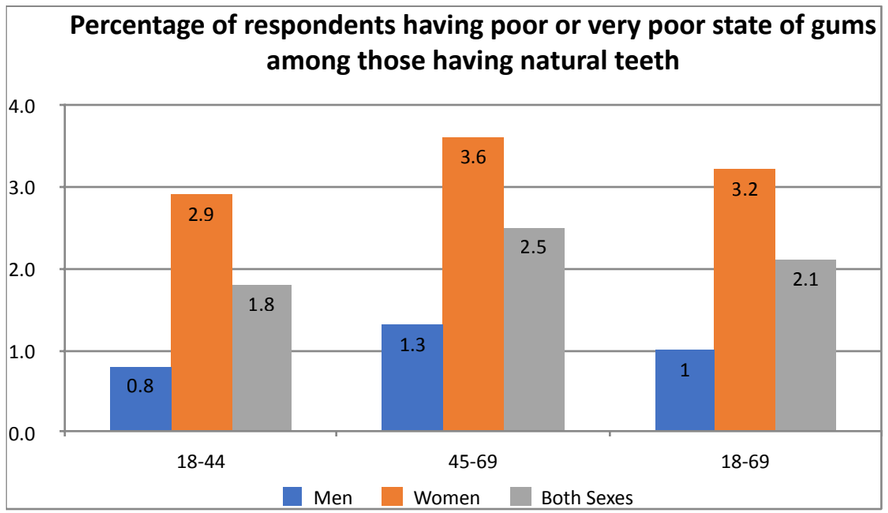
When asked the purpose of the most visit to the dentist, the responses received by 877 male respondents of both age groups reported that 2.1% visited a dentist for a consultation, 31.0% for pain or trouble with teeth and gums, 12.5% for follow-up treatment, 45.5% for routine check-up treatment and 9.0% for other. Of male respondents aged 18-44 years (n=426), the purpose for the most visit to the dentist was reported by 2.1% for a consultation, 25.4% for pain or trouble with teeth and gums, 10.6% for follow-up treatment, 51.0% for routine check-up treatment and 10. 8% for other. Of male respondents aged 45-69 years (n=450), 2.0% reported visiting a dentist for a consultation, 39.8% for pain or trouble with teeth and gums, 15.4% for follow-up treatment, 36.8% for routine check-up treatment and 6.0% for other.

Figure 50. Percentage by type of reason for most recent visit to dentist for female respondents aged 18-69 years, by both sexes and age groups.



When asked the purpose of the most visit to the dentist, the responses received by 1363 female respondents of both age groups reported that 3.6% visited a dentist for a consultation, 24.3% for pain or trouble with teeth and gums, 15.2% for follow-up treatment, 44.5% for routine check-up treatment and 12.3% for other. Of female respondents aged 18-44 years (n=732), the purpose for the most visit to the dentist was reported by 4.6% for a consultation, 21.5% for pain or trouble with teeth and gums, 12.6% for follow-up treatment, 45.2% for routine check-up treatment and 16.1% for other. Of female respondents aged 45-69 years (n=631), 3.6% reported visiting a dentist for a consultation, 28.4% for pain or trouble with teeth and gums, 19.1% for follow-up treatment, 44.5% for routine check-up treatment and 6.7% for other.

Figure 51. Percentage of respondents having poor or very poor state of gums among those having natural teeth, by both and age groups.



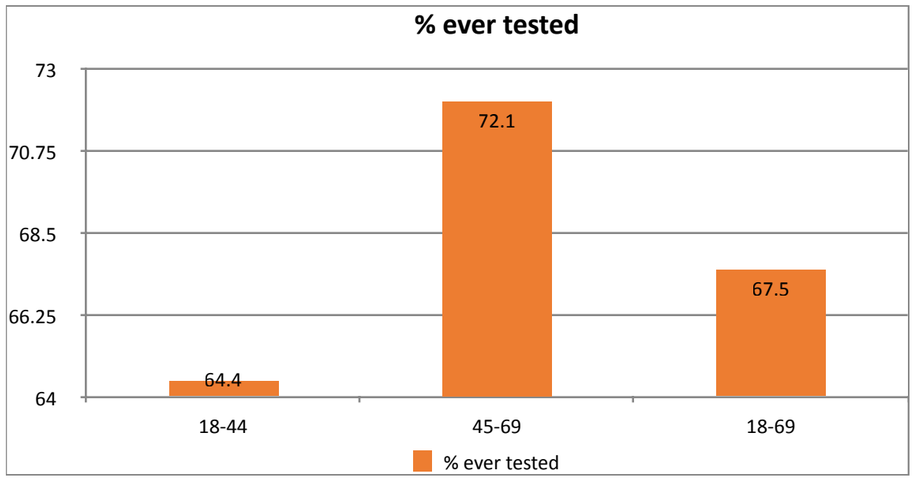
For 2360 respondents of both sexes and age groups, 2.1% reported having poor or very poor state of gums among those having natural teeth. Of respondents aged 18-44 years (n=1236), 1.8% reported this perception of themselves while the percentage was 2.5% for those aged 45-69 years (n=1124).

There were 1.0% of male respondents of both age groups who reported having poor or very poor state of gums (n=931). Of respondents aged 18-44 years (n=463), 0.8% reported this practice while the percentage was 1.3% for those aged 45-69 years (n=468).

There were 3.2% of female respondents of both age groups who reported using dental floss every day. (n=1429). Of respondents aged 18-44 years (n=773), 2.9% reported this practice while the percentage was 3.6% for those aged 45-69 years (n=656).

Cancer Screening

Figure 52. Percentage of female respondents aged 18-69 years who has ever been screened for cervical cancer, by age groups.



Results from the survey revealed that 67.5% of female respondents of both age groups (n=1403) reported having ever had a screening test for cervical cancer. The rate of screening reported of female respondents aged 18-44 years was 64.4% and 72.1% of female respondents aged 45-69 years.

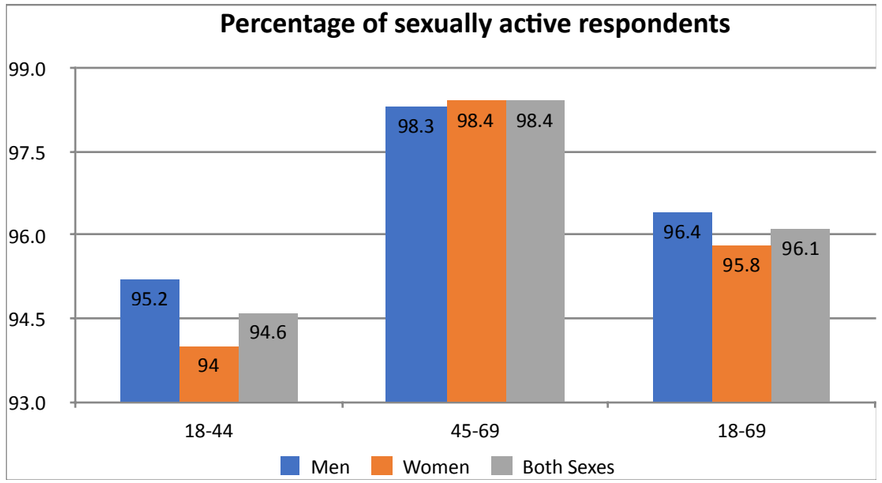
Figure 53. Percentage of female respondents aged 30-49 years who has ever been screened for cervical cancer.

Age Group (years)	Women		
	n	% ever tested	95% CI
30-49	**632**	**76.6**	**69.9-83.3**

Additional results from the survey revealed that 76.6% of female respondents aged 30-49 years (n=632) reported having ever had a screening test for cervical cancer.

Sexual Health

Figure 54. Percentage of respondents aged 18-69 years who have ever had sex, by both sexesand age groups.

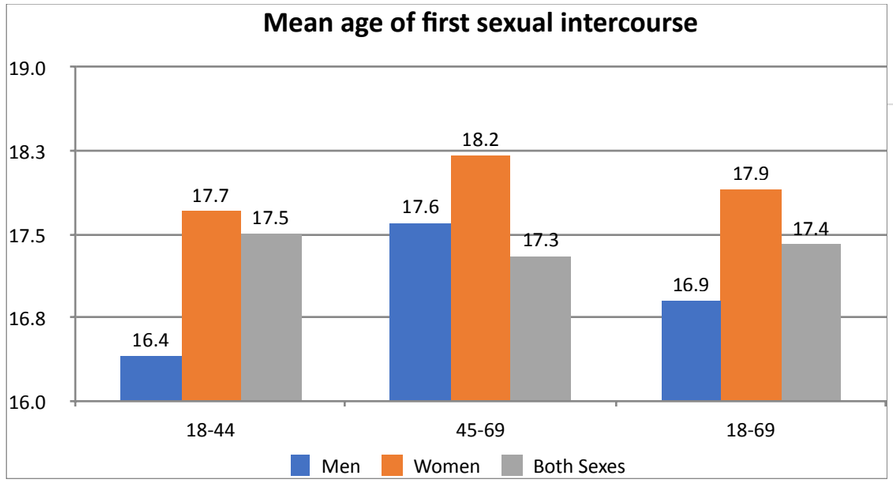


A question on the survey questionnaire inquired whether the respondent had ever had sexual intercourse. For 2315 respondents of both sexes and age groups, 96.1% reported ever having had sexual intercourse. Of respondents aged 18-44 years (n=1211), 94.6% reported ever having hadsexual intercourse and for those aged 45-69 years (n=1104), 98.4% reported ever having had sexual intercourse.

Of male respondents of both age groups (n=912), 96.4% reported ever having had sexual intercourse. Of male respondents aged 18-44 years (n=455), 95.2% reported ever having had sexual intercourse while the percentage of male respondents aged 45-69 years (n=457) was 98.3%.

Of female respondents of both age groups (n=1403), 95.8% reported ever having had sexual intercourse. Of female respondents aged 18-44 years (n=756), 94.0% reported ever having had sexual intercourse while the percentage of male respondents aged 45-69 years (n=647) was 98.4%.

Figure 55. Mean age of first sexual intercourse of respondents aged 18-69 years, by both sexes and age groups.

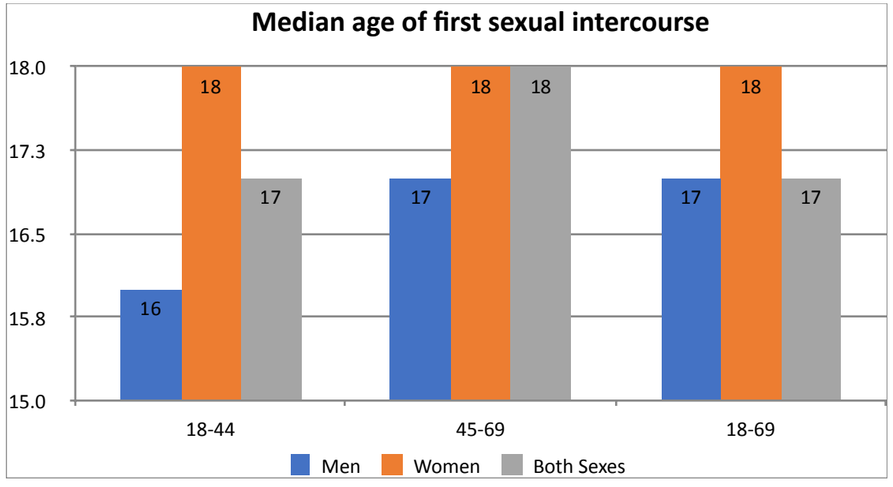


A question on the survey questionnaire further inquired the age of first sexual encounter for those respondents that had ever had sexual intercourse. For 2117 respondents of both sexes and age groups, the mean age of first sexual intercourse of respondents was 17.4 years. Of respondents aged 18-44 years (n=1087), the mean age of first sexual intercourse was 17.5 yearsand of respondents aged 45-69 years (n-1030), the mean age of first sexual intercourse was 17.3 years.

Of male respondents of both age groups (n=842), the mean age of first sexual intercourse was 16.9 years. Of male respondents aged 18-44 years (n=410), the mean age of first sexual intercourse was 16.4 years while the mean age of first sexual intercourse was 17.6 years for male respondents aged 45-69 years (n=432).

Of female respondents of both age groups (n=1275), the mean age of first sexual intercourse was 17.9 years. Of female respondents aged 18-44 years (n=677), the mean age of first sexual intercourse was 17.7 years while the mean age of first sexual intercourse was 18.2 years of female respondents aged 45-69 years (n=598).

Figure 56. Median age of first sexual intercourse of respondents aged 18-69 years, by both sexes and age groups.

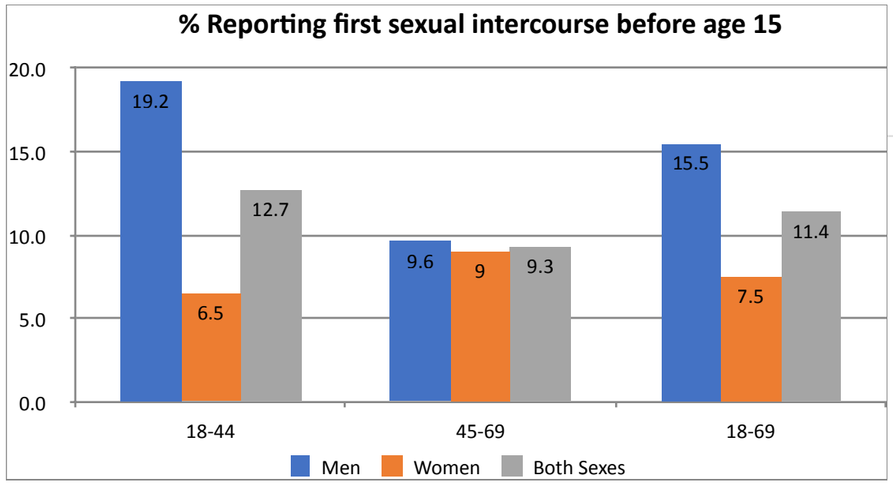


A question on the survey questionnaire further inquired the age of first sexual encounter for those respondents that had ever had sexual intercourse. For 2117 respondents of both sexes and age groups, the median age of first sexual intercourse of respondents was 17.0 years. Of respondents aged 18-44 years (n=1087), the median age of first sexual intercourse was 17.0 yearsand of respondents aged 45-69 years (n=1030), the median age of first sexual intercourse was 18.0 years.

Of male respondents of both age groups (n=842), the median age of first sexual intercourse was 17.0 years. Of male respondents aged 18-44 years (n=410), the median age of first sexual intercourse was 16.0 years while the median age of first sexual intercourse was 17.0 years for male respondents aged 45-69 years (n=432).

Of female respondents of both age groups (n=1275), the median age of first sexual intercourse was 18.0 years. Of female respondents aged 18-44 years (n=677), the median age of first sexual intercourse was 18.0 years while the median age of first sexual intercourse was 18.0 years of female respondents aged 45-69 years (n=598).

Figure 57. Percentage of respondents aged 18-69 years reporting first sexual intercourse beforeage 15 years, by both sexes and age groups.

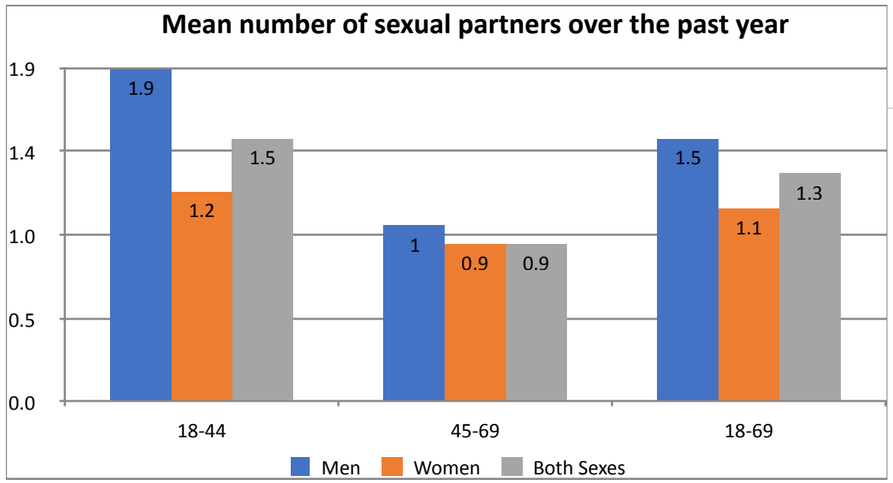


A further analysis of the question on the age of first sexual encounter for those respondents thathad ever had sexual intercourse to determine the percentage reporting sexual intercourse before age15 years. For 2117 respondents of both sexes and age groups, 11.4% reported having sexual intercourse before 15 years. Of respondents aged 18-44 years (n=1087), 12.7% reported havingsexual intercourse before 15 years and for those aged 45-69 years (n=1030), 9.3% reported having sexual intercourse before 15 years.

Of male respondents of both age groups (n=842), 15.5% reported having sexual intercourse before 15 years. Of male respondents aged 18-44 years (n=410), 19.2% reported having sexual intercourse before 15 years while the percentage of male respondents aged 45-69 years (n=432)was 9.6%.

Of female respondents of both age groups (n=1275), 7.5% reported having sexual intercourse before 15 years. Of female respondents aged 18-44 years (n=677), 6.5% reported having sexualintercourse before 15 years while the percentage of female respondents aged 45-69 years (n=598) was 9.0%.

Figure 58. Mean number of sexual partners over the past year of respondents aged 18-69 years, by both sexes and age groups.

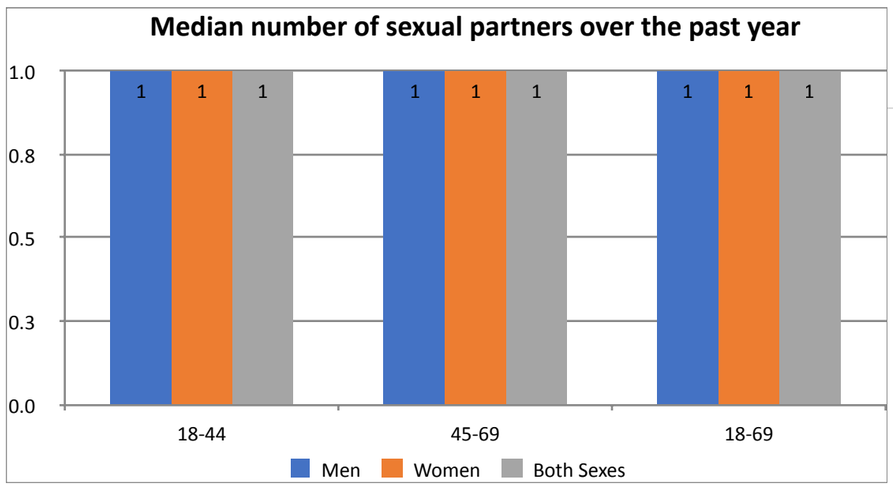


A question on the survey questionnaire further inquired the number of sexual partners over thepast year. For 2175 respondents of both sexes and age groups, the mean number of sexual partners over the past year was 1.3. Of respondents aged 18-44 years (n=1109), the mean number of sexual partners over the past year was 1.5 and of respondents aged 45-69 years (n=1066), the mean number of sexual partners over the past year was 0.9.

Of male respondents of both age groups (n=862), the mean number of sexual partners over the past year was 1.5. Of male respondents aged 18-44 years (n=418), the mean number of sexual partners over the past year was 1.9 while the mean number of sexual partners over the past yearwas 1.0 of male respondents aged 45-69 years (n=444).

Of female respondents of both age groups (n=1313), the mean number of sexual partners over the past year was 1.1. Of female respondents aged 18-44 years (n=691), the mean number of sexual partners over the past year was 1.2 while the mean number of sexual partners over the past year was 0.9 of female respondents aged 45-69 years (n=622).

Figure 59. Median number of sexual partners over the past year of respondents aged 18-69 years, by both sexes and age groups

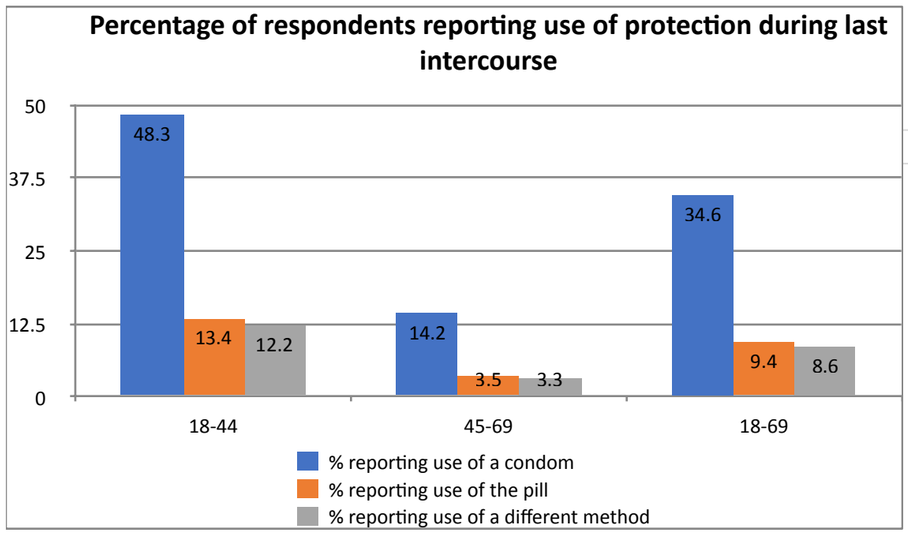


A question on the survey questionnaire further inquired the number of sexual partners over thepast year. For 2175 respondents of both sexes and age groups, the median number of sexual partners over the past year was 1.0. Of respondents aged 18-44 years (n=1109), the median number of sexual partners over the past year was 1.0 and of respondents aged 45-69 years (n=1066), the median number of sexual partners over the past year was 1.0.

Of male respondents of both age groups (n=862), the median number of sexual partners over the past year was 1.0. Of male respondents aged 18-44 years (n=418), the number of sexual partners over the past year was 1.0 while the median number of sexual partners over the past year was 1.0 of male respondents aged 45-69 years (n=444).

Of female respondents of both age groups (n=1313), the median number of sexual partners over the past year was 1.0. Of female respondents aged 18-44 years (n=691), the median number of sexual partners over the past year was 1.0 while the median number of sexual partners over the past year was 1.0 of female respondents aged 45-69 years (n=622).

Figure 60. Percentage and type of contraceptive device used during last intercourse used by respondents aged 18-69 years, by both sexes and age groups.

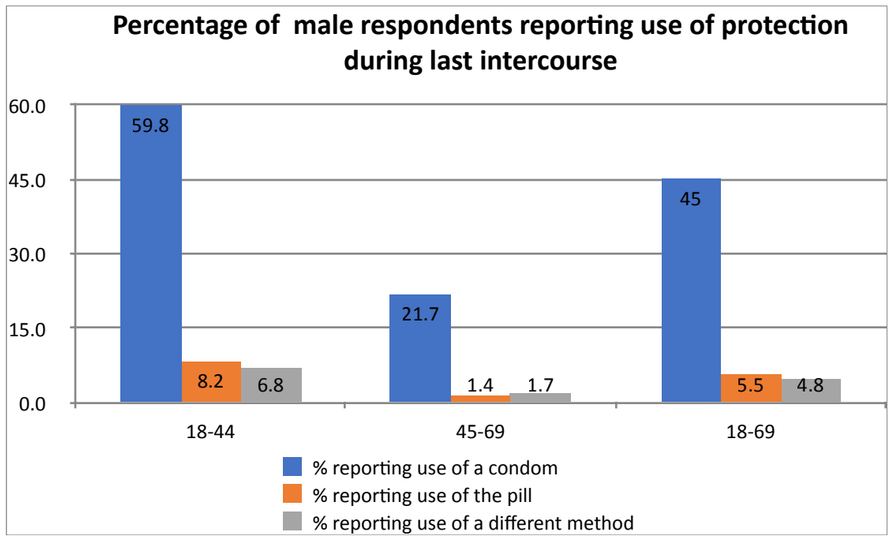


A question on the survey questionnaire further inquired on whether protection against pregnancy or infection was used during last sexual intercourse. For 2096 responses of both sexesand age groups analyzed, 34.6% reported the use of condoms. Of respondents aged 18-44 years(n=1075), 48.3% reported condom use and of respondents aged 45-69 years (n=996), 14.2% reported the use of condoms.

For 2096 responses analyzed, 9.4% reported the use of the pill. Of respondents aged 18-44 years (n=1075), 13.4% reported the use of the pill and of respondents aged 45-69 years (n=1021), 3.5% reported the use of the pill.

For 2119 responses analyzed, 8.6% reported the use of a different method. Of respondents aged18-44 years (n=1084), 12.2% reported the use of a different method and of respondents aged 45-69 years (n=1035), 3.3% reported the use of a different method.

Figure 61. Percentage and type of contraceptive device used during last intercourse used by male respondents aged 18-69 years, by both sexes and age groups.

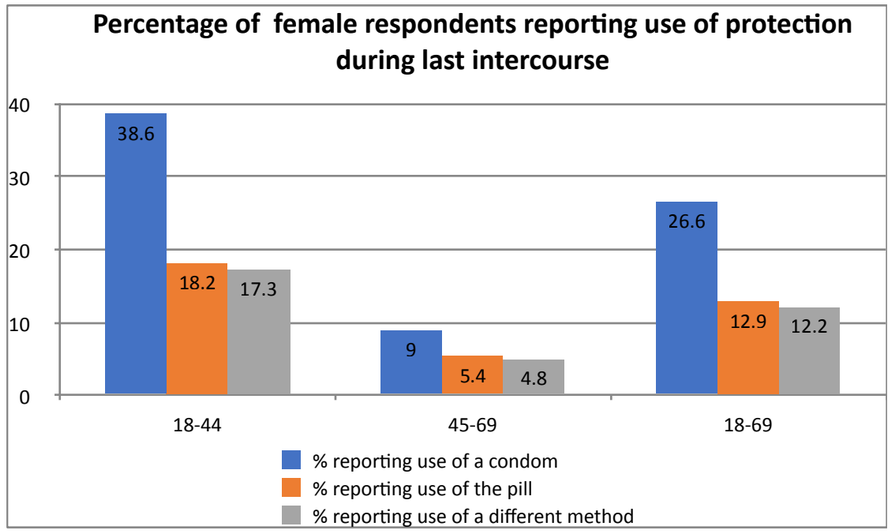


For 857 responses from male respondents of both age groups analyzed, 45.0% reported the useof condoms. Of male respondents aged 18-44 years (n=418), 59.9% reported condom use and of male respondents aged 45-69 years (n=439), 21.7% reported the use of condoms.

For 804 responses from male respondents of both age groups analyzed, 5.5% reported the use of the pill. Of male respondents aged 18-44 years (n=388), 8.2% reported the use of the pill and of male respondents aged 45-69 years (n=416), 1.4% reported the use of the pill.

For 825 responses from male respondents of both age groups analyzed, 4.8% reported the use of a different method. Of male respondents aged 18-44 years (n=397), 6.8% reported the use ofadifferent method and of male respondents aged 45-69 years (n=428), 1.7% reported the use of a different method.

Figure 62. Percentage and type of contraceptive device used during last intercourse used by female respondents aged 18-69 years, by both sexes and age groups.

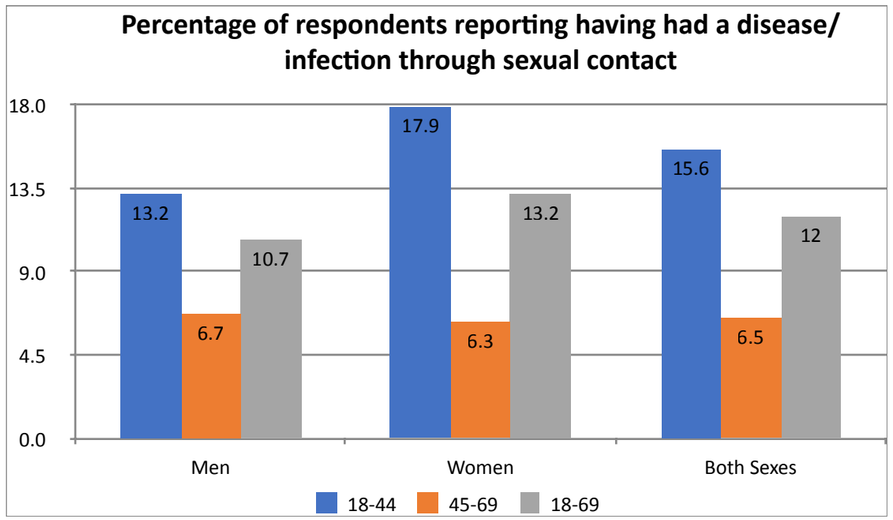


For 1291 responses from female respondents of both age groups analyzed, 26.6% reported the use of condoms. Of female respondents aged 18-44 years (n=686), 38.6% reported condom use and of female respondents aged 45-69 years (n=605), 9.0% reported the use of condoms.

For 1292 responses from female respondents of both age groups analyzed, 12.9% reported the use of the pill. Of female respondents aged 18-44 years (n=687), 18.2% reported the use of the pill and of female respondents aged 45-69 years (n=605), 5.4% reported the use of the pill.

For 1294 responses from female respondents of both age groups analyzed, 12.2% reported the use of a different method. Of female respondents aged 18-44 years (n=687), 17.3% reported theuse of a different method and of female respondents aged 45-69 years (n=605), 4.8% reported the use of a different method.

Figure 63. Percentage respondents aged 18-69 years that report having had a disease/infection through sexual contact, by both sexes and age groups.



A question on the survey questionnaire further inquired whether the respondent had ever reported having had a disease/infection through sexual contact. For 2146 respondents of both sexes and age groups, 12.0% reported having had a disease/infection through sexual contact. Of respondents aged 18-44 years (n=1100), hypercholesterol 15.6% reported having had a disease/infection through sexual contact and of respondents aged 45-69 years (n=1046), 6.5% reported having had a disease/infection through sexual contact

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Of male respondents of both age groups (n=846), 10.7% reported having had a disease/infection through sexual contact. Of male respondents aged 18-44 years (n=414), 13.2% reported having had a disease/infection through sexual contact while 6.7% of male respondents aged 45-69 years (n=432) reported having had a disease/infection through sexual contact.

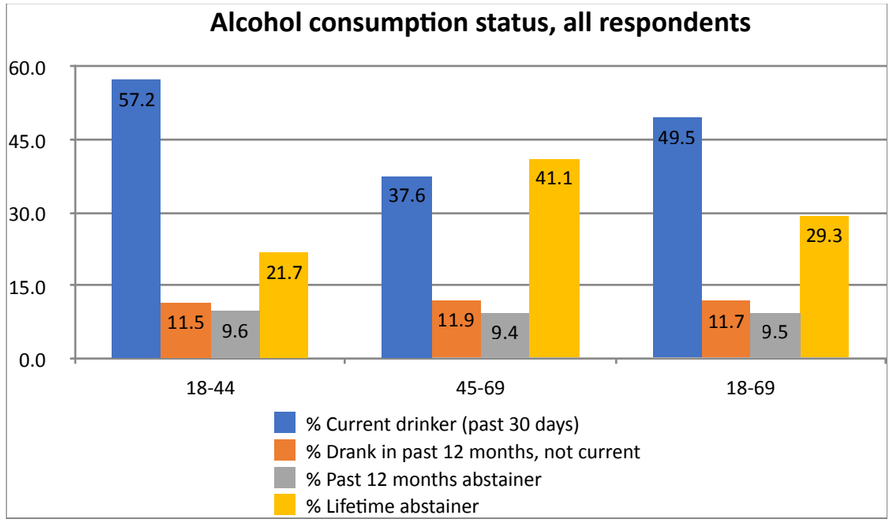
Of female respondents of both age groups (n=1300), 13.2% reported having had a disease/infection through sexual contact. Of female respondents aged 18-44 years (n=686), 17.9% reported having had a disease/infection through sexual contact while 6.3% of female respondents aged 45-69 years (n=614) reported having had a disease/infection through sexual contact.

Alcohol

In examining the results for alcohol consumption status, categories of whether an individual wasa current drinker (within the past 30 days), drank within the past 12 months, abstained from drink in the last 12 months or was a lifetime abstainer were evaluated by sex and age group.

A current drinker was defined as having drank more than 3 drinks but no more than 7 drinks perweek for women and more than 3 drinks but no more than 14 drinks per week for men, on average over the past 30 days. A not current drinker, or person that drank in the past 12 months,not current, had a consumption pattern less that a current drinker, but regularly consumed alcohol with the past 12 months. The past 12 months abstainer would have not consumed alcohol in the past 12 months and the lifetime abstainer would not have ever had a regular pattern of alcohol consumption in his or her lifetime.

Figure 68. Alcohol consumption status of respondents aged 18-69 years, by both sexes and age groups.

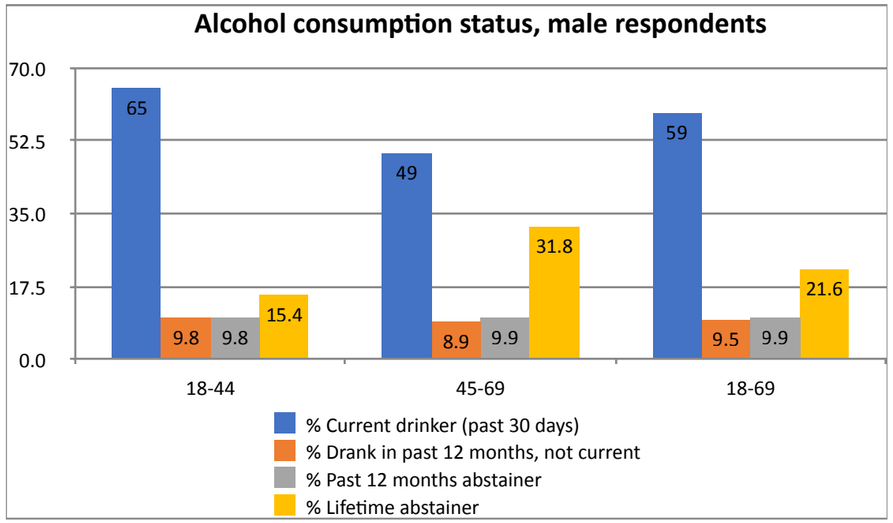


The results from the survey reflect that in considering by both sexes and age groups (n=2360), the prevalence of current drinkers was reported to be 49.5%, individuals who were classified as having drank within the past 12 months, not current reflected 11.7% of all respondents, individuals who reportedly abstained from drinking for 12 months reflected 9.5% and 29.3% reported that they were lifetime abstainers.

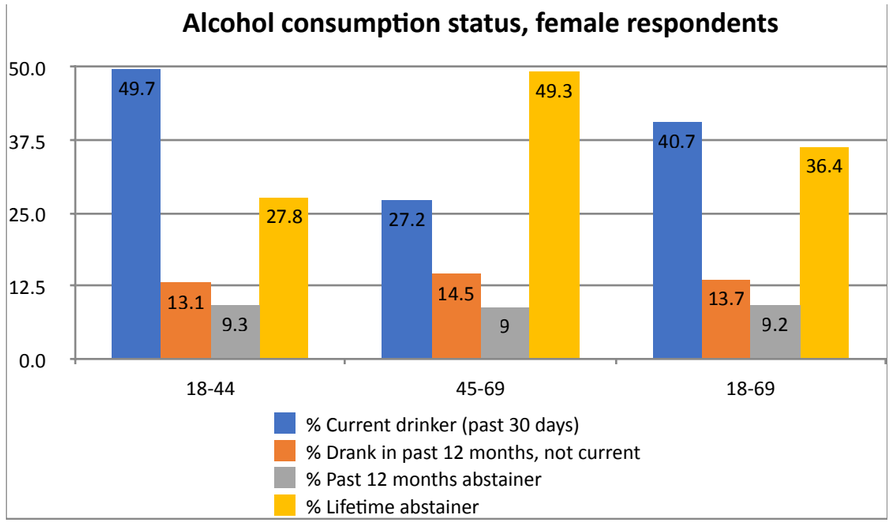
For all respondents aged 18-44 years (n=1236), current drinkers had a prevalence rate of 57.2%, persons who drank in the past 12 months had a prevalence of 11.5%, past 12 months abstainers 9.6% and lifetime abstainers 21.7%.

Among respondents of both sexes between the ages of 45-69 years (n=1124), current drinkers reflected 37.6%, persons that drank in the past 12 months, not current – 11.9%, past 12 months abstainers – 9.4% and lifetime abstainers 41.1%.

Figure 69. Alcohol consumption status of male respondents aged 18-69 years, by both sexes andage groups.



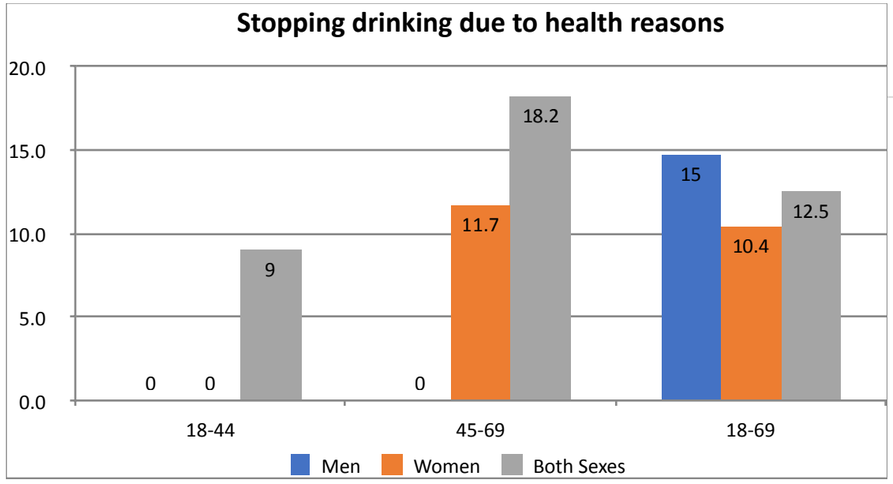
The results from the survey reflect that in considering males of both age groups (n=930), the prevalence of current drinkers was reported to be 59.0%, individuals who were classified as having drank within the past 12 months, not current reflected 9.5% of all respondents, individualswho reportedly abstained from drinking for 12 months reflected 9.9% and 21.6% reported that they were lifetime abstainers. Of male respondents aged 18-44 years (n=463), current drinkers had a prevalence rate of 65.0%, persons who drank in the past 12 months had a prevalence of 9.8%, past 12 months abstainers – 9.8% and lifetime abstainers 15.4%. Among male respondents between the ages of 45-69 years (n=468), current drinkers reflected 49.4%, persons that drank in the past12 months, not current – 8.9%, past 12 months abstainers – 9.9% and lifetime abstainers 31.8%.



The results from the survey reflect that in considering females of both age groups (n=1429), the prevalence of current drinkers was reported to be 40.7%, individuals who were classified as having drank within the past 12 months, not current reflected 13.7% of all respondents, individuals who reportedly abstained from drinking for 12 months reflected 9.2% and 36.4% reported that they were lifetime abstainers. Of female respondents aged 18-44 years (n=773), current drinkers had a prevalence rate of 49.7%, persons who drank in the past 12 months had a prevalence of 13.1%, past 12 months abstainers – 9.3% and lifetime abstainers 27.8%. Among female respondents between the ages of 45-69 years (n=656), current drinkers reflected 27.2%, personsthat drank in the past 12 months, not current – 14.5%, past 12 months abstainers - 9.0% and lifetime abstainers 49.3%.

Data was also obtained on individuals who were current drinkers and reported having stopped drinking due to health reasons, such as a negative impact of drinking on your health or as per advice of a doctor or other health worker among those respondents who drank in their lifetime,but not in the last 12 months.

Figure 70. Percentage of respondents aged 18-69 years who stopped drinking due to health reasons, by both sexes and age groups.



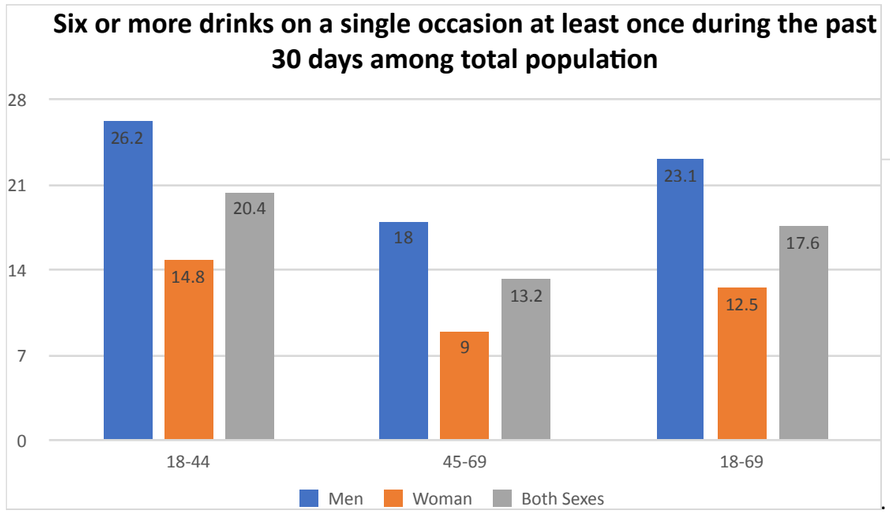
For all responses of both sexes and age groups received on this question (n=191), 12.5% reportedhaving tried to stop drinking due to health reasons. For those aged 18-44 years (n=62), the rate was 9.0% and for those that are 45-69 years (n=129), the rate was 18.2%.

Of male respondents of both age groups (n=76), 14.7% reported having stopped drinking due tohealth reasons. Validity for description by age groups for males who stopped drinking due to health reasons could not be assured.

Data from female respondents of both age groups (n=115) reflect that 10.4% stopped drinking due to health reasons. Of females that stopped drinking due to health reasons, 11.7% were between 45-69 years. Validity for description for females aged 18-44 years who stopped drinking due to health reasons could not be assured.

The following section described the experience of heavy episodic drinking which is defined as sixor more standard drinks on a single occasion in the past 30 days.

Figure 71. Percentage of respondents aged 18-69 years with history of heavy episodic drinking of respondents, by both sexes and age groups.



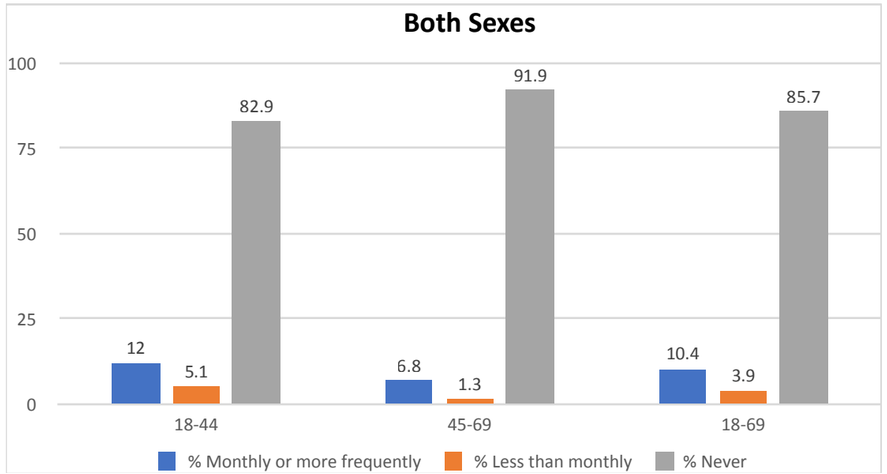
The occurrence of heavy episode drinking was queried during the survey exercise and the following results were revealed. For all respondents of both sexes and age groups (n-2360), 17.6% reported having had an episode of heavy drinking in the past 30 days. For those 18-44 years (n=1236) this percentage was 20.4% and for those aged 45-69 years (n=1124), 13.2%.

Of male respondents of both age groups (n=931), 23.1% reported heavy episodic drinking in thepast 30 days with 26.2% of males 18-44 years (n=463) reporting same and 18.0% among males 45-69 years (n=468).

Of female respondents of both age groups (n=1429), 12.5% reported heavy episodic drinking in the past 30 days with 14.8% of females 18-44 years (n=773) reporting same and 9.0% among males 45- 69 years (n=656).

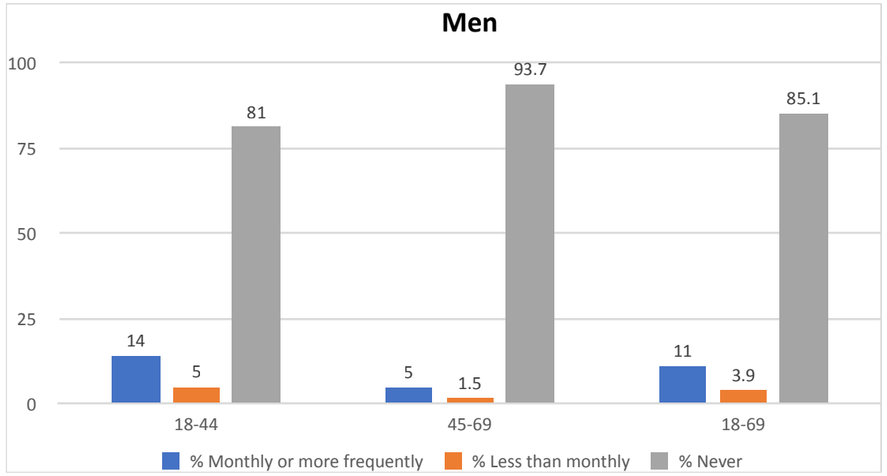
Results were obtained of respondents on the question of how many times the respondent was unable to stop drinking once started during the past 12 months. This is described as impaired control over drinking.

Figure 72. Frequency of episodes with declared impaired control over drinking by respondentsaged 18-69 years, by both sexes and age groups.



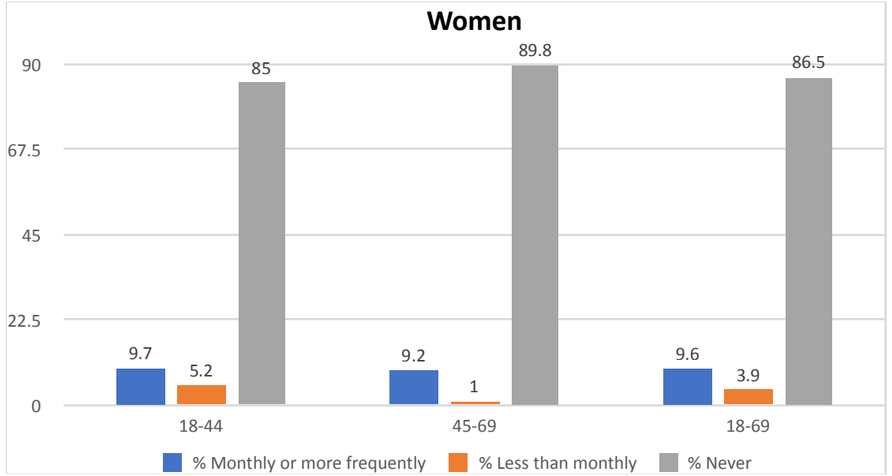
For all respondents of both sexes and age groups for this question (n=1312), the rate of impairedcontrol over drinking was reported among 10.4% of respondents at least once a month, among 3.9% for a frequency less than monthly, and among 85.7% for a frequency of never. Of respondents aged 18-44 years (n=792), this was reflected as occurring among 12.0% more than once a month, among 5.1% less than monthly and never among 82.9% never. Of respondents aged 45-69 years (n=520), this was reflected as occurring among 6.8% for more than once a month, among 1.3% for less than monthly and as never among 91.9%.

Figure 73. Frequency of episodes of declared impaired control over drinking of maleresponden ts aged 18-69 years, by age groups.



Of male respondents of both age groups for this question (n=613), the rate of impaired control over drinking was reported among 11.0% of respondents at least once a month, among 3.9% fora frequency less than monthly, and among 85.1% for a frequency of never. Of male respondentsaged 18-44 years (n=349), this was reflected as occurring among 14.0% more than once a month,among 5.0% less than monthly and never among 81.0% never. Of male respondents aged 45-69years (n=264), this was reflected as occurring among 4.8% for more than once a month, among1.5% for less than monthly and as never among 93.7%.

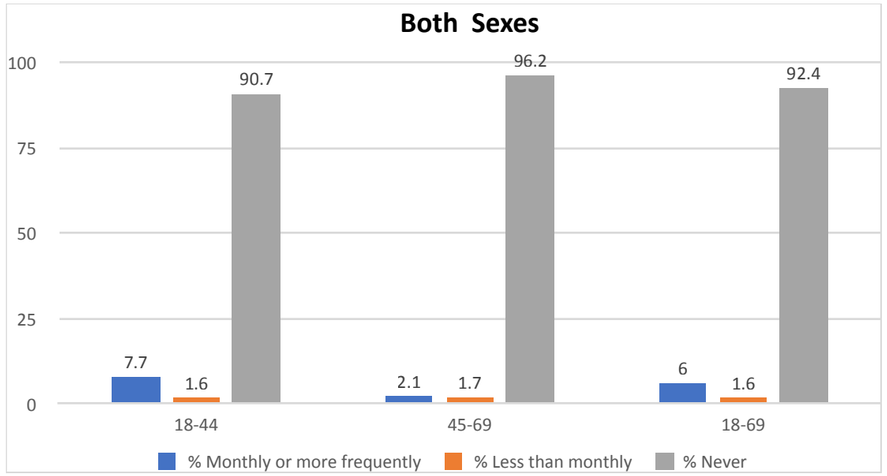
Figure 74. Frequency of episodes of declared impaired control over drinking of femalerespondents aged 18-69 years, by age groups.



Of female respondents of both age groups for this question (n=699), the rate of impaired controlover drinking was reported among 9.6% of respondents at least once a month, among 3.9% for a frequency less than monthly, and among 86.5% for a frequency of never. Of female respondents aged 18-44 years (n=443), this was reflected as occurring among 9.7% more than once a month, among 5.2% less than monthly and never among 85.0% never. Of female respondents aged 45-69 years (n=256), this was reflected as occurring among 9.2% for more thanonce a month, among 1.0% for less than monthly and as never among 89.8%.

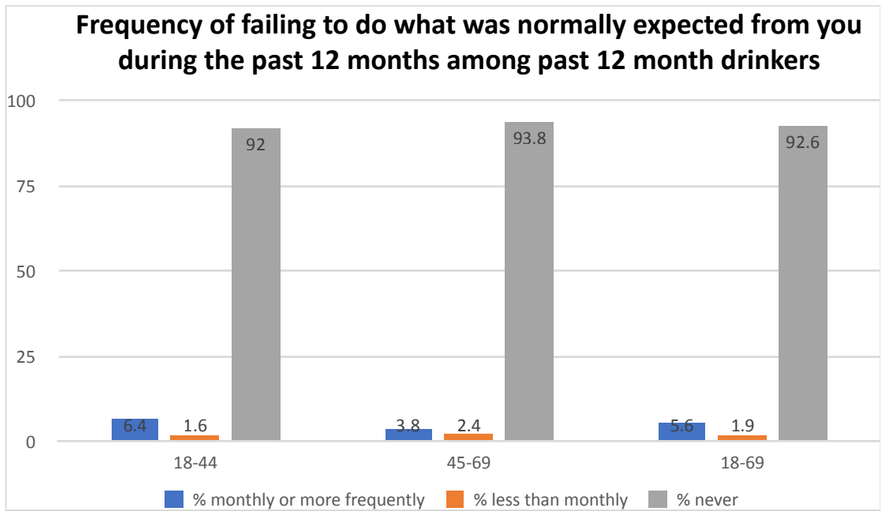
A question was also asked about the frequency that for in the past 12 months individuals who drank failed to do what was normally expected because of drinking in the past 12 months.

Figure 75. Frequency of respondents aged 18-69 years failing to do what was normally expected in the past month because of drinking, by both sexes and age groups.



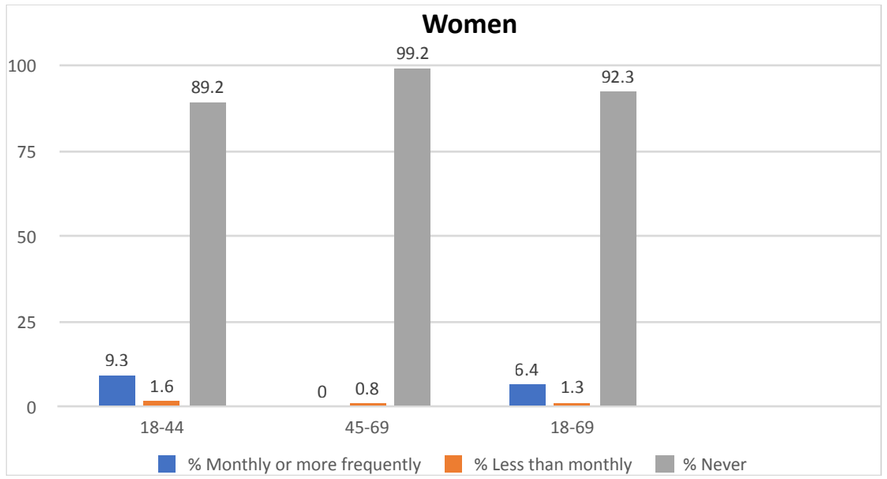
For all respondents of both sexes and age groups (n=699), the frequency of failure to do what was normally expected due to drinking occurred with a frequency of more than once a month among6.4% of respondents, less than monthly among 1.3% or respondents and never among 92.3% ofrespondents. When examining the experience of those aged 18-44 years (n=443), the results were among 9.8% of male respondents for more than once a month, among 1.6% for less than once a month, and never for 89.2%. When examining the experience of those aged 45-69 years (n=256), the results were among 0.0% for more than once a month, among 0.8% for less than once a month, and never for 99.2%.

Figure 76. Frequency of male respondents aged 18-69 years failing to do what was normallyexpected in the past month because of drinking, by age groups.



Of male respondents of both age groups (n=613), the frequency of failure to do what was normally expected due to drinking occurred with a frequency of more than once a month among5.6% of respondents, less than monthly among 1.9% or respondents and never among 92.6% ofrespondents. When examining the experience of male respondents aged 18-44 years (n=349), the results were among 6.4% for more than once a month, among 1.6% for less than once a month, and never for 92.0%. When examining the experience of male respondents aged 45-69 years (n=264), the results were among 3.8% for more than once a month, among 2.4% for less than once a month, and never for 93.8%.

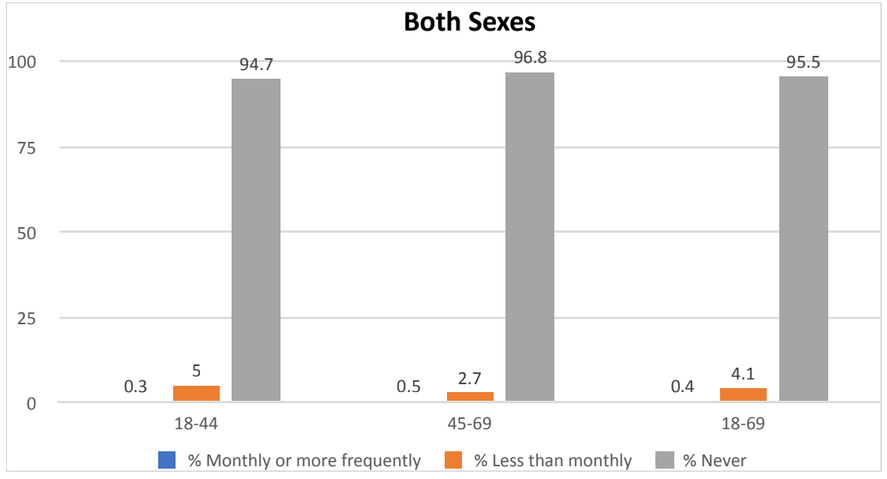
Figure 77. Frequency of female respondents aged 18-69 years failing to do what was normallyexpected in the past month because of drinking, by age groups.



Of female respondents of both age groups (n=699), the frequency of failure to do what was normally expected due to drinking occurred with a frequency of more than once a month among6.4% of respondents, less than monthly among 1.3% or respondents and never among 92.3% ofrespondents. When examining the experience of female respondents aged 18-44 years (n=443),the results were among 9.3% for more than once a month, among 1.6% for less than once a month, and never for 89.2%. When examining the experience of female respondents aged 45-69years (n=256), the results were among 0.0% for more than once a month, among 0.8% for less than once a month, and never for 99.2%.

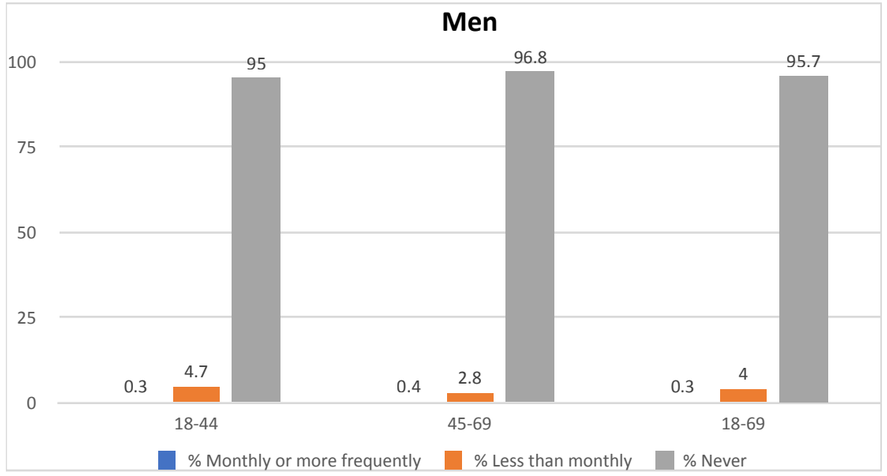
A question on the survey instrument explored whether the respondent had had a problem with family or partner due to someone else's drinking in the past 12 months among all respondents.

Figure 78. Frequency of problems of respondents aged 18-69 years with family or partner due to someone else's drinking in the past 12 months, by both sexes and age groups.



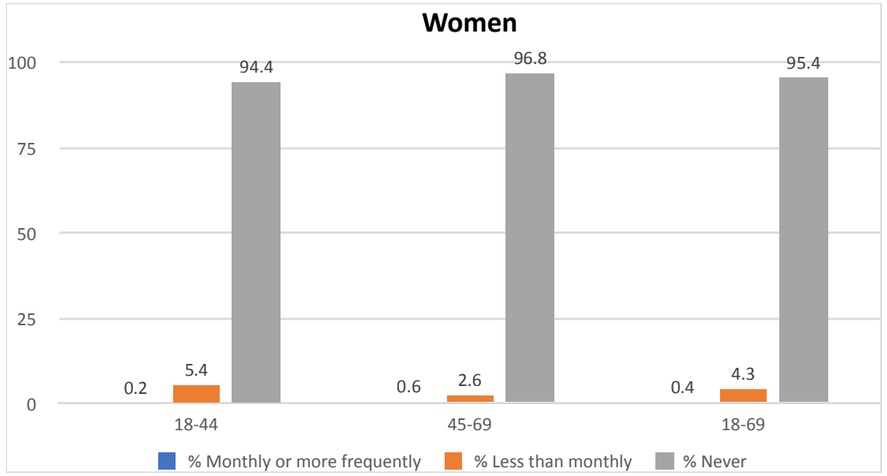
The frequency of having problems due to someone else's drinking during the past 12 months among all respondents of both sexes and age groups (n=2360) was more than once a month among 0.4% of respondents, less than monthly among 4.1% of respondents, and never among 95.5% of respondents. Of respondents aged 18-44 years (n=1236), the results were more than once a month among0.3% of respondents, less than monthly among 5.0% of respondents, and never among 94.7% ofrespondents. Of respondents aged 45-69 years (n=1124), the results were more than once a month among0.5% of respondents, less than monthly among 2.7% of respondents, and never among 96.8% ofrespondents.

Figure 79. Frequency of problems of male respondents aged 18-69 years with family or partner due to someone else's drinking in the past 12 months, by age groups.



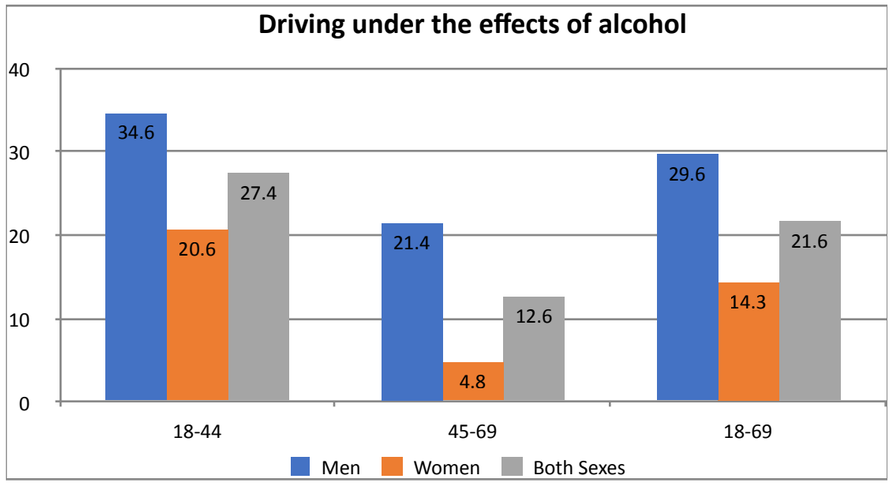
The frequency of having problems due to someone else's drinking during the past 12 months among male respondents of both age groups (n=931) was more than once a month among 0.3%of male respondents, less than monthly among 4.0% of male respondents, and never among 95.7% of male respondents. Of male respondents aged 18-44 years (n=463), the results were more than once a month among 0.3% of male respondents, less than monthly among 4.7% of male respondents, and never among 95.0% of male respondents. Of male respondents aged 45-69 years (n=468), the results were more than once a month among 0.4% of male respondents, less than monthly among 2.8% of male respondents, and never among 96.8% of male respondents.

Figure 80. Frequency of problems of female respondents aged 18-69 years with family or partner due to someone else's drinking in the past 12 months, by age groups.



The frequency of having problems due to someone else's drinking during the past 12 months among female respondents of both age groups (n=1429) was more than once a month among 0.4% of female respondents, less than monthly among 4.3% of female respondents, and never among 95.4% of female respondents. Of female respondents aged 18-44 years (n=773), the results were more than once a month among 0.2% of female respondents, less than monthly among 5.4% of female respondents, and never among 94.4% of female respondents. Of femalerespondents aged 45-69 years (n=656), the results were more than once a month among 0.6% offemale respondents, less than monthly among 2.6% of female respondents, and never among 96.8% of female respondents.

Figure 81. Percentage of respondents aged 18-69 years who reported having driven a motorized vehicle after having consumed 2 or more alcoholic drinks, by both sexes and agegroups.



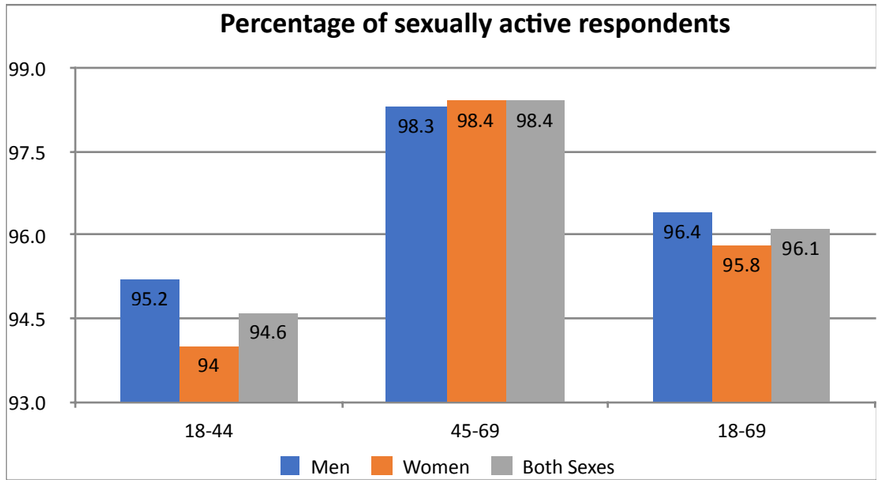
A question inquired on the frequency with which a respondent drove a motorizedvehicle with a after having consumed 2 or more alcoholic drinks in the past 30 days. For 2347respondents, 21.6% reported that this occurred. The percentage of respondents aged 18-44 years (n=1227) that reported having drove a motorizedvehicle with a after having consumed 2 or more alcoholic drinks in the past 30 days was 27.4% and 12.6% of respondents aged 45-69 years(n=1120).

Of male respondents (n=921), 29.6% reported having drove a motorizedvehicle with a after having consumed 2 or more alcoholic drinks in the past 30 days. The percentage of male respondentsaged 18-44 years (n=457) that reported having drove a motorizedvehicle with a after having consumed 2 or more alcoholic drinks in the past 30 days was 34.6% and 21.4% of male respondentsaged 45-69 years (n=464).

For female respondents (n=1426), 14.3% reported having drove a motorizedvehicle with a after having consumed 2 or more alcoholic drinks in the past 30 days. The percentage of female respondentsaged 18-44 years (n=770) that reported having drove a motorizedvehicle with a after having consumed 2 or more alcoholic drinks in the past 30 days was 20.6% and 4.8% of female respondentsaged 45-69 years (n=656).

Sexual Health

Figure 54. Percentage of respondents aged 18-69 years who have ever had sex, by both sexesand age groups.



A question on the survey questionnaire inquired whether the respondent had ever had sexual intercourse. For 2315 respondents of both sexes and age groups, 96.1% reported ever having had sexual intercourse. Of respondents aged 18-44 years (n=1211), 94.6% reported ever having hadsexual intercourse and for those aged 45-69 years (n=1104), 98.4% reported ever having had sexual intercourse.

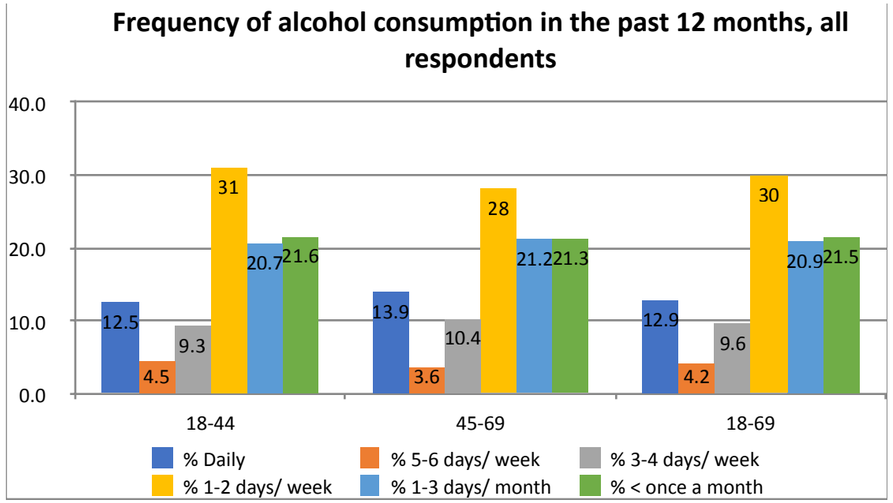
Of male respondents of both age groups (n=912), 96.4% reported ever having had sexual intercourse. Of male respondents aged 18-44 years (n=455), 95.2% reported ever having had sexual intercourse while the percentage of male respondents aged 45-69 years (n=457) was 98.3%.

Of female respondents of both age groups (n=1403), 95.8% reported ever having had sexual intercourse. Of female respondents aged 18-44 years (n=756), 94.0% reported ever having had sexual intercourse while the percentage of male respondents aged 45-69 years (n=647) was 98.4%.

Frequency of alcohol consumption in the past 12 months

The following results were obtained when evaluating the responses to the survey instrument and assessing the frequency of alcohol consumption among those respondents who drank at least one alcoholic drink in the last 12 months.

Figure 82. Frequency of Alcohol Consumption in the past 12 months for both sexes and age groups.

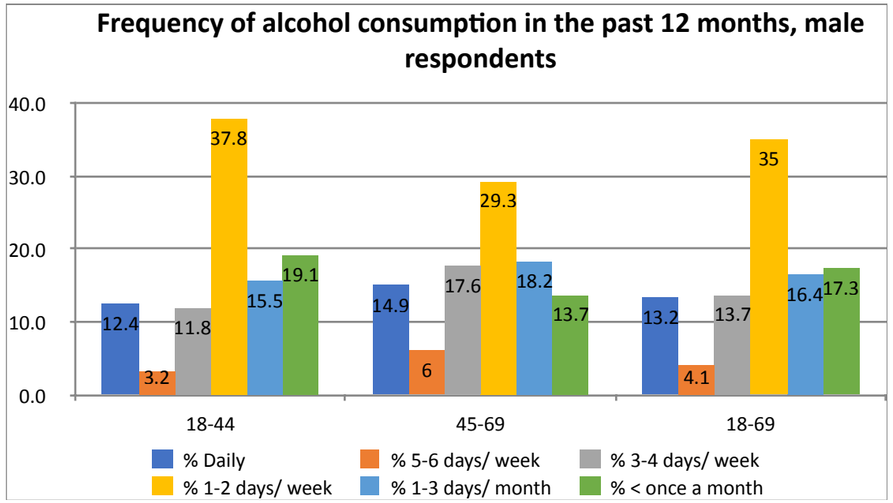


In response to the survey question on the frequency of alcohol consumption among drinkers in the past 12 months among all respondents (n=1312), 12.9% consumed an alcoholic beverage daily, 4.2% consumed an alcoholic beverage five to six times a week, 9.6% consumed an alcoholic beverage three to four times a week, 30.0% consumed an alcoholic beverage one to two days per week, 20.9% reported consuming an alcoholic beverage one the three times a month and 21.5% reported having consumed an alcoholic beverage less than once a month.

Of all respondents aged 18-44 years (n=792), 12.5% consumed an alcoholic beverage daily, 4.5% consumed an alcoholic beverage five to six times a week, 9.3% consumed an alcoholic beverage three to four times a week, 31.0% consumed an alcoholic beverage one to two days per week, 20.7% reported consuming an alcoholic beverage one the three times a month and 21.6% reported having consumed an alcoholic beverage less than once a month.

Of all respondents aged 45-69 years (n=520) 13.9% consumed an alcoholic beverage daily, 3.6% consumed an alcoholic beverage five to six times a week, 10.4% consumed an alcoholic beverage three to four times a week, 28.1% consumed an alcoholic beverage one to two days per week, 21.2% reported consuming an alcoholic beverage one the three times a month and 21.3% reported having consumed an alcoholic beverage less than once a month.

Figure 83. Frequency of Alcohol Consumption in male respondents during the past 12 months for both age groups

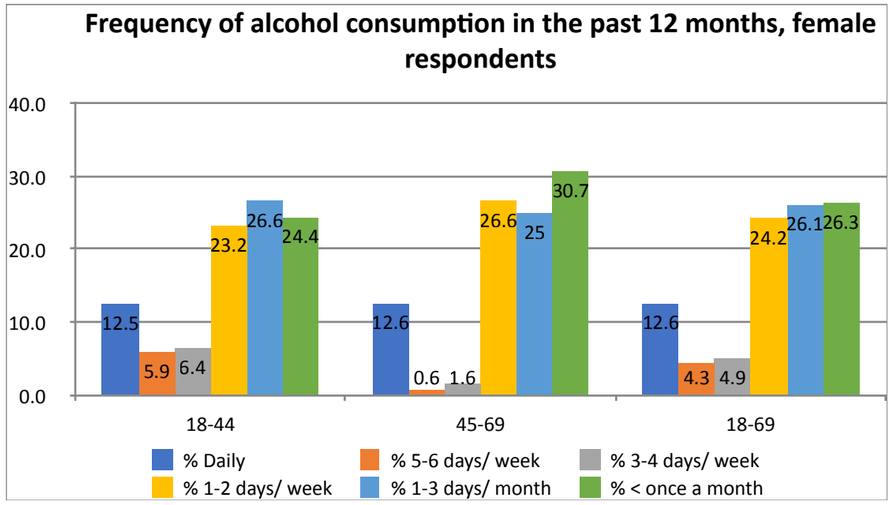


In response to the survey question on the frequency of alcohol consumption among drinkers in the past 12 months among male respondents (n=613), 13.2% consumed an alcoholic beverage daily, 4.1% consumed an alcoholic beverage five to six times a week, 13.7% consumed an alcoholic beverage three to four times a week, 35.0% consumed an alcoholic beverage one to two days per week, 16.4% reported consuming an alcoholic beverage one the three times a month and 17.3% reported having consumed an alcoholic beverage less than once a month.

Of male respondents aged 18-44 years (n=349), 12.4% consumed an alcoholic beverage daily, 3.2% consumed an alcoholic beverage five to six times a week, 11.8% consumed an alcoholic beverage three to four times a week, 37.8% consumed an alcoholic beverage one to two days per week, 15.5% reported consuming an alcoholic beverage one the three times a month and 19.1% reported having consumed an alcoholic beverage less than once a month.

Of male respondents aged 45-69 years (n=264), 14.9% consumed an alcoholic beverage daily, 6.0% consumed an alcoholic beverage five to six times a week, 17.6% consumed an alcoholic beverage three to four times a week, 29.3% consumed an alcoholic beverage one to two days per week, 18.2% reported consuming an alcoholic beverage one the three times a month and 13.7% reported having consumed an alcoholic beverage less than once a month.

Figure 84. Frequency of Alcohol Consumption in female respondents during the past 12 months for both age groups

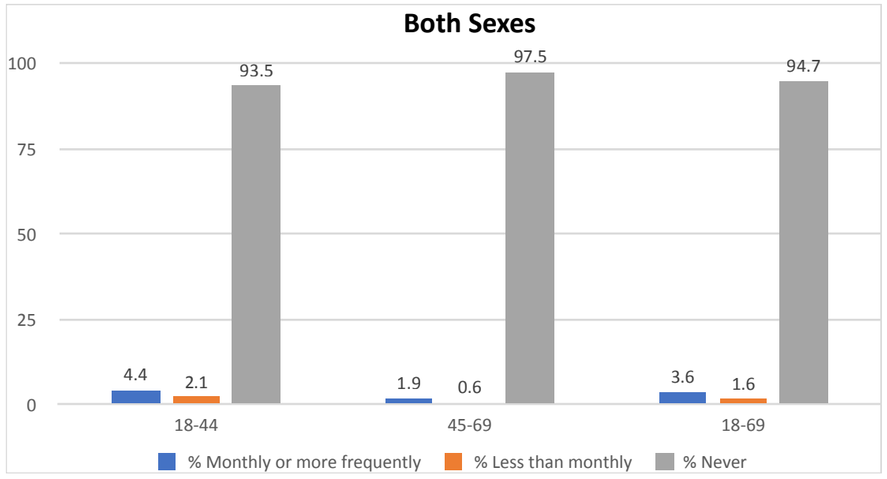


In response to the survey question on the frequency of alcohol consumption among drinkers in the past 12 months among female respondents (n=699), 12.6% consumed an alcoholic beverage daily, 4.3% consumed an alcoholic beverage five to six times a week, 4.9% consumed an alcoholic beverage three to four times a week, 24.2% consumed an alcoholic beverage one to two days per week, 26.1% reported consuming an alcoholic beverage one the three times a month and 26.3% reported having consumed an alcoholic beverage less than once a month.

Of female respondents aged 18-44 years (n=443), 12.5% consumed an alcoholic beverage daily, 5.9% consumed an alcoholic beverage five to six times a week, 6.4% consumed an alcoholic beverage three to four times a week, 23.2% consumed an alcoholic beverage one to two days per week, 26.6% reported consuming an alcoholic beverage one the three times a month and 24.4% reported having consumed an alcoholic beverage less than once a month.

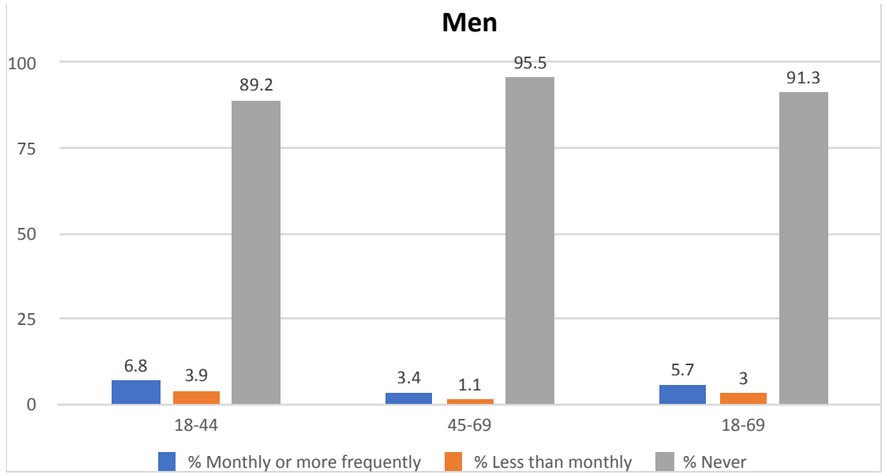
Of female respondents aged 45-69 years (n=256), 12.6% consumed an alcoholic beverage daily, 0.6% consumed an alcoholic beverage five to six times a week, 1.6% consumed an alcoholic beverage three to four times a week, 26.6% consumed an alcoholic beverage one to two days per week, 25.0% reported consuming an alcoholic beverage one the three times a month and 30.7% reported having consumed an alcoholic beverage less than once a month.

Figure 85. Frequency of Needing a First drink in the Morning to Get Going Among All Respondents of Both Sexes and Age Groups.



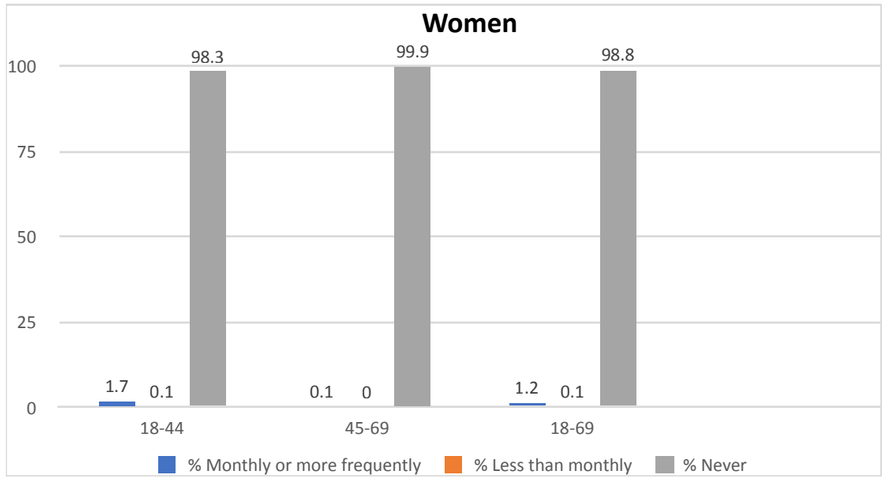
In response to the survey question to how often a first drink was required to 'get going' in the morning in the past 12 months, among all respondents (n=1312), 3.6% said monthly, 1.6% said less than monthly and 94.7% said never. Of all respondents aged 18-44 years (n=792), 4.4% said monthly, 2.1% said less than monthly and 93.5% said never was a first drink required in the morning to 'get going' in the past 12 months. Of all respondents aged 45-69 years (n=520) 1.9% said monthly, 0.6% said less than monthly and 97.5% said never was a first drink required in the morning to 'get going' in the past 12 months.

Figure 86. Frequency of Needing a First drink in the Morning to Get Going Among Male Respondents of Both Age Groups.



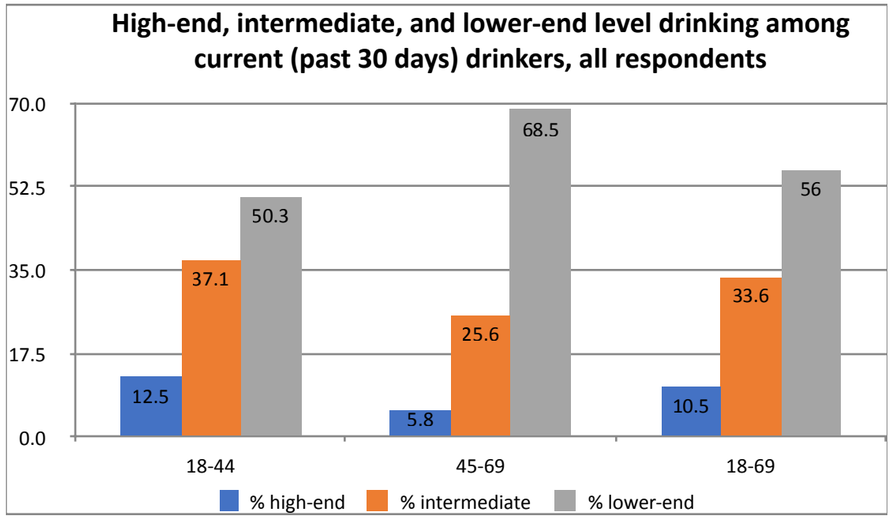
In response to the survey question to how often a first drink was required to 'get going' in the morning in the past 12 months, among male respondents (n=613), 5.7% said monthly, 3.0% said less than monthly and 91.3% said never. Of male respondents aged 18-44 years (n=349), 6.8% said monthly, 3.9% said less than monthly and 89.2% said never was a first drink required in the morning to 'get going' in the past 12 months. Of male respondents aged 45-69 years (n=264) 3.4% said monthly, 1.1% said less than monthly and 95.5% said never was a first drink required in the morning to 'get going' in the past 12 months.

Figure 87. Frequency of Needing a First drink in the Morning to Get Going Among Female Respondents of Age Groups.



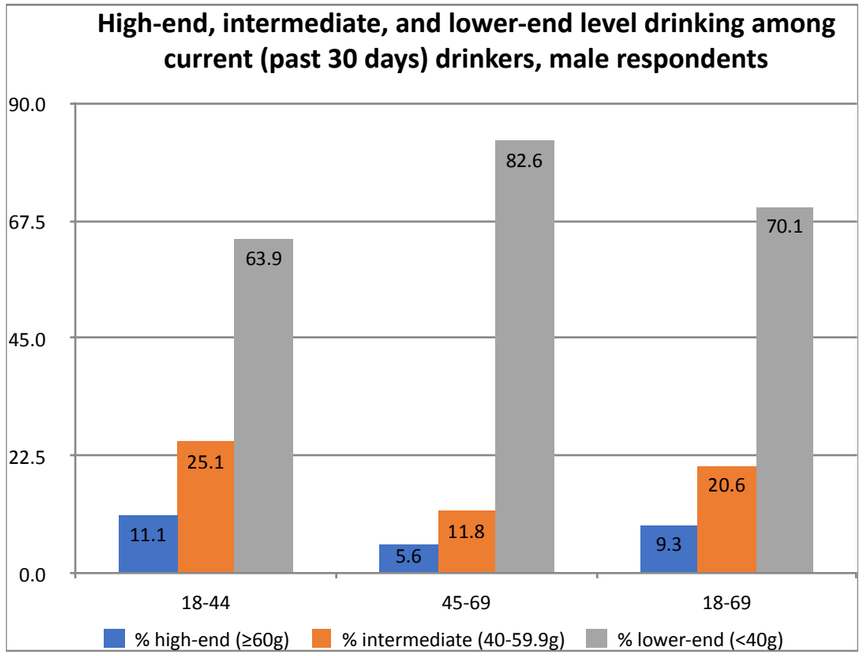
In response to the survey question to how often a first drink was required to 'get going' in the morning in the past 12 months, among female respondents (n=699), 1.2% said monthly, 0.1% said less than monthly and 98.8% said never. Of female respondents aged 18-44 years (n=443), 1.7% said monthly, 0.1% said less than monthly and 98.3% said never was a first drink required in the morning to 'get going' in the past 12 months. Of female respondents aged 45-69 years (n=256) 0.1% said monthly, 0.1% said less than monthly and 99.9% said never was a first drink required in the morning to 'get going' in the past 12 months.

Figure 88. Frequency of 'Quality' of Alcoholic Beverage Consumed Among Drinkers in the last 30 days Among All Respondents of Both Sexes and Age Groups.



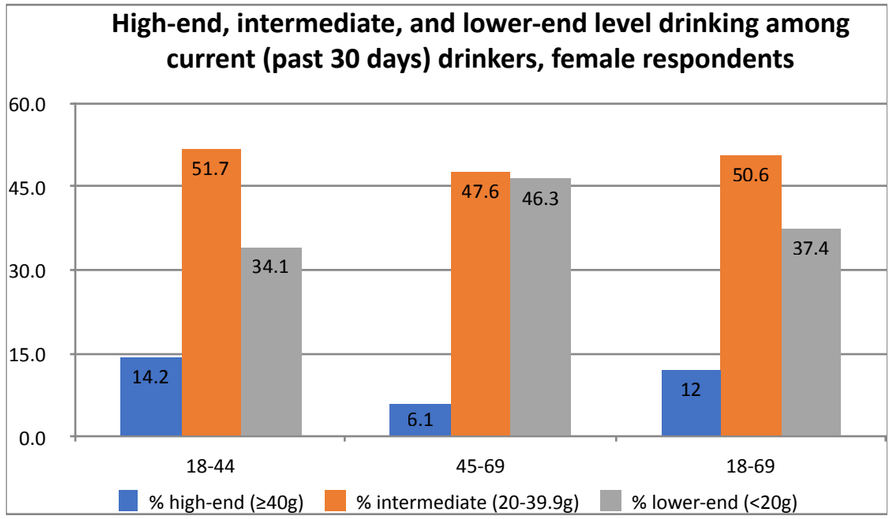
In response to the survey question of the 'quality' of drink that was consumed among drinkers in the last 30 days, among all respondents (n=969), 10.5% responded with a drink that was considered "high-end", 33.6% "intermediate" and 56.0% "lower-end". Of all respondents aged 18-44 years (n=583), 12.5% responded with a drink that was considered "high-end", 37.1% "intermediate" and 50.3% "lower-end". Of all respondents aged 45-69 years (n=386) 5.8% responded with a drink that was considered "high-end", 25.6% "intermediate" and 68.5% "lower-end".

Figure 89. Frequency of 'Quality' of Alcoholic Beverage Consumed Among Drinkers in the last 30 days Among Male Respondents of Both Age Groups.



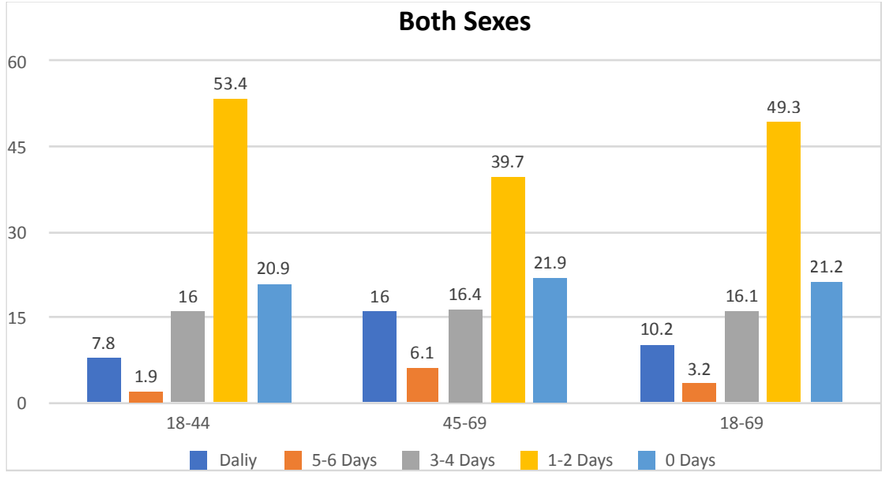
In response to the survey question of the 'quality' of drink that was consumed among drinkers in the last 30 days, among male respondents (n=493), 9.3% responded with a drink that was considered "high-end", 20.6% "intermediate" and 70.1% "lower-end". Of male respondents aged 18-44 years (n=271), 11.1% responded with a drink that was considered "high-end", 25.1% "intermediate" and 63.9% "lower-end". Of male respondents aged 45-69 years (n=222) 5.6% responded with a drink that was considered "high-end", 11.8% "intermediate" and 82.6% "lower-end".

Figure 90. Frequency of 'Quality' of Alcoholic Beverage Consumed Among Drinkers in the last 30 days Among Female Respondents of Both Age Groups.



In response to the survey question of the 'quality' of drink that was consumed among drinkers in the last 30 days, among female respondents (n=493), 12.0% responded with a drink that was considered "high-end", 50.6% "intermediate" and 37.4% "lower-end". Of female respondents aged 18-44 years (n=271), 14.2% responded with a drink that was considered "high-end", 51.7% "intermediate" and 34.1% "lower-end". Of female respondents aged 45-69 years (n=222) 6.1% responded with a drink that was considered "high-end", 47.6% "intermediate" and 46.3% "lower-end".

Figure 91. Frequency of Alcohol Consumption in the past seven days for both sexes and age groups.

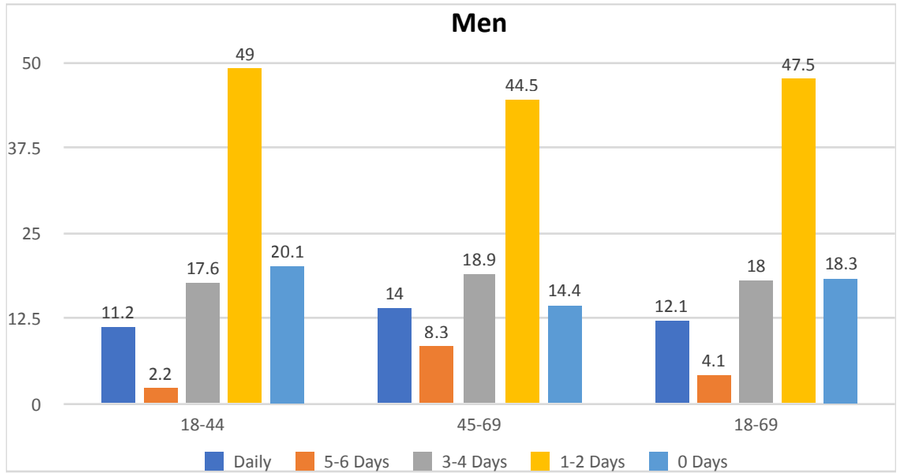


In response to the survey question on the frequency of alcohol consumption among current drinkers in the past seven days among all respondents (n=537), 10.2% consumed an alcoholic beverage daily, 3.2% consumed an alcoholic beverage on five to six days during the last seven days, 16.1% consumed an alcoholic beverage on three to four days of the last seven days, 49.3% consumed an alcoholic beverage on one to two days during the last seven days and 21.2% reported having never consumed an alcoholic beverage in the past seven days.

The frequency of alcohol consumption among current drinkers in the past seven days among all respondents aged 18-44 years (n=638), 7.8% consumed an alcoholic beverage daily, 1.9% consumed an alcoholic beverage on five to six days during the last seven days, 16.0% consumed an alcoholic beverage on three to four days of the last seven days, 53.4% consumed an alcoholic beverage on one to two days during the last seven days, and 20.9% reported having never consumed an alcoholic beverage in the past seven days.

The frequency of alcohol consumption among current drinkers in the past seven days among all respondents aged 45-69 years (n=411), 16.0% consumed an alcoholic beverage daily, 6.1% consumed an alcoholic beverage on five to six days during the last seven days, 16.4% consumed an alcoholic beverage on three to four days of the last seven days, 39.7% consumed an alcoholic beverage on one to two days during the last seven days, and 21.9% reported having never consumed an alcoholic beverage in the past seven days.

Figure 92. Frequency of Alcohol Consumption in male respondents during the past seven days for both age groups.

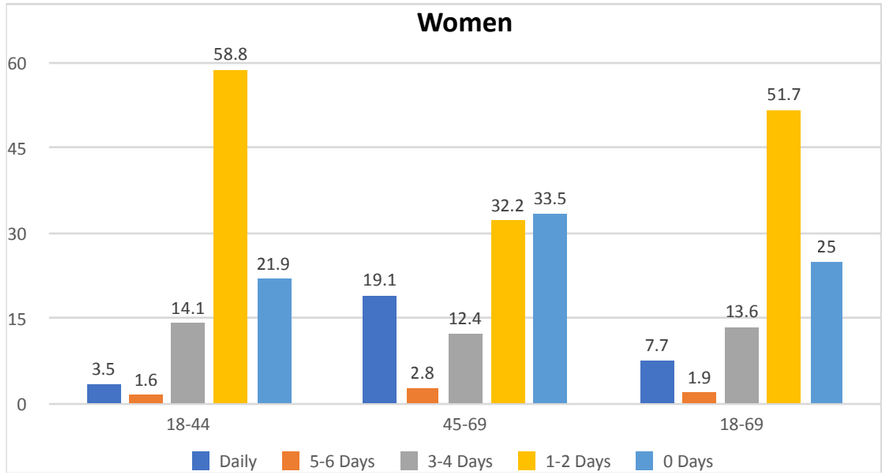


In response to the survey question on the frequency of alcohol consumption among current drinkers in the past seven days among male respondents (n=537), 12.1% consumed an alcoholic beverage daily, 4.11% consumed an alcoholic beverage on five to six days during the last seven days, 18.0% consumed an alcoholic beverage on three to four days of the last seven days, 47.5% consumed an alcoholic beverage on one to two days during the last seven days and 18.3% reported having never consumed an alcoholic beverage in the past seven days.

The frequency of alcohol consumption among current drinkers in the past seven days among male respondents aged 18-44 years (n=300), 11.2% consumed an alcoholic beverage daily, 2.2% consumed an alcoholic beverage on five to six days during the last seven days, 17.6% consumed an alcoholic beverage on three to four days of the last seven days, 49.0% consumed an alcoholic beverage on one to two days during the last seven days, and 20.1% reported having never consumed an alcoholic beverage in the past seven days.

The frequency of alcohol consumption among current drinkers in the past seven days among male respondents aged 45-69 years (n=174), 14.0% consumed an alcoholic beverage daily, 8.3% consumed an alcoholic beverage on five to six days during the last seven days, 18.9% consumed an alcoholic beverage on three to four days of the last seven days, 44.5% consumed an alcoholic beverage on one to two days during the last seven days, and 14.4% reported having never consumed an alcoholic beverage in the past seven days.

Figure 93. Frequency of Alcohol Consumption in female respondents during the past seven days for both age groups.

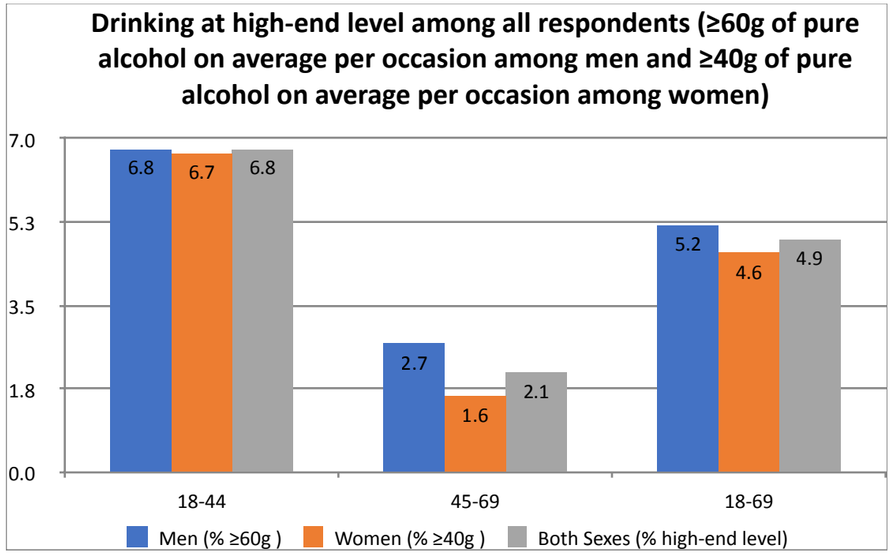


In response to the survey question on the frequency of alcohol consumption among current drinkers in the past seven days among female respondents (n=512), 7.7% consumed an alcoholic beverage daily, 1.9% consumed an alcoholic beverage on five to six days during the last seven days, 13.6% consumed an alcoholic beverage on three to four days of the last seven days, 51.7% consumed an alcoholic beverage on one to two days during the last seven days, and 25.0% reported having never consumed an alcoholic beverage in the past seven days.

The frequency of alcohol consumption among current drinkers in the past seven days among female respondents aged 18-44 years (n=338), 3.5% consumed an alcoholic beverage daily, 1.6% consumed an alcoholic beverage on five to six days during the last seven days, 14.1% consumed an alcoholic beverage on three to four days of the last seven days, 58.8% consumed an alcoholic beverage on one to two days during the last seven days, and 21.9% reported having never consumed an alcoholic beverage in the past seven days.

The frequency of alcohol consumption among current drinkers in the past seven days among female respondents aged 45-69 years (n=174), 19.1% consumed an alcoholic beverage daily, 2.8% consumed an alcoholic beverage on five to six days during the last seven days, 12.4% consumed an alcoholic beverage on three to four days of the last seven days, 58.8% consumed an alcoholic beverage on one to two days during the last seven days, and 33.5% reported having never consumed an alcoholic beverage in the past seven days.

Figure 94. Frequency of Drinking at high-end level among all respondents.

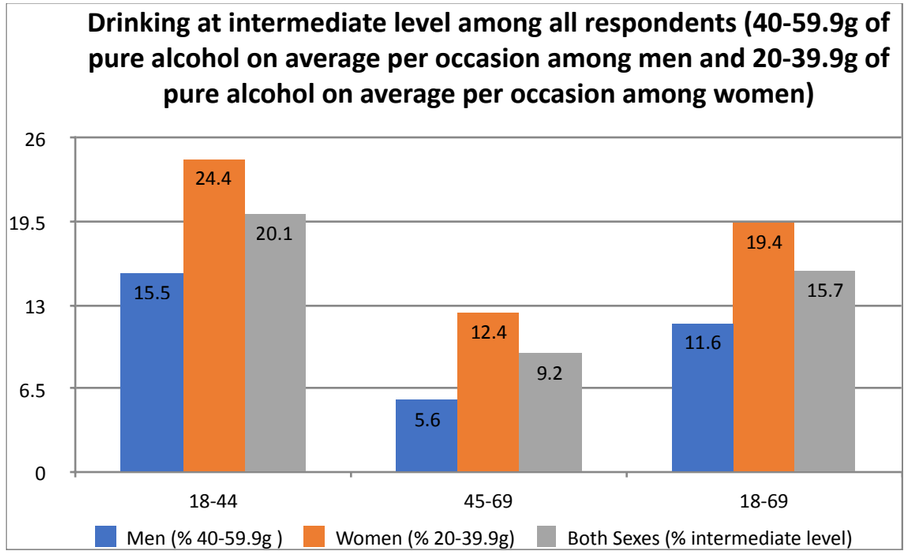


The frequency of drinking at high-end level is defined as ≥60g of pure alcohol on average per occasion among men and ≥40g of pure alcohol on average per occasion among women. The occurrence of this in the last 30 days was included in a question in the survey instrument and the following results were observed. For all respondents of both sexes and age groups (n=2270), 4.9% reported having had an episode of 'high-end level' drinking in the past 30 days. For those 18-44 years (n=1176) this percentage was 6.8% and for those aged 45-69 years (n=1094), 2.1%.

Among male respondents of both age groups (n=881), 5.2% reported drinking ≥60g of pure alcohol on average per occasion in the past 30 days. For those 18-44 years (n=432) this percentage was 6.8% and for those aged 45-69 years (n=449), 2.7%.

Among female respondents of both age groups (n=1389), 4.6% reported drinking ≥40g of pure alcohol on average per occasion in the past 30 days. For those 18-44 years (n=744) this percentage was 6.7% and for those aged 45-69 years (n=645), 1.6%.

Figure 95. Frequency of Drinking at high-end level among all respondents.

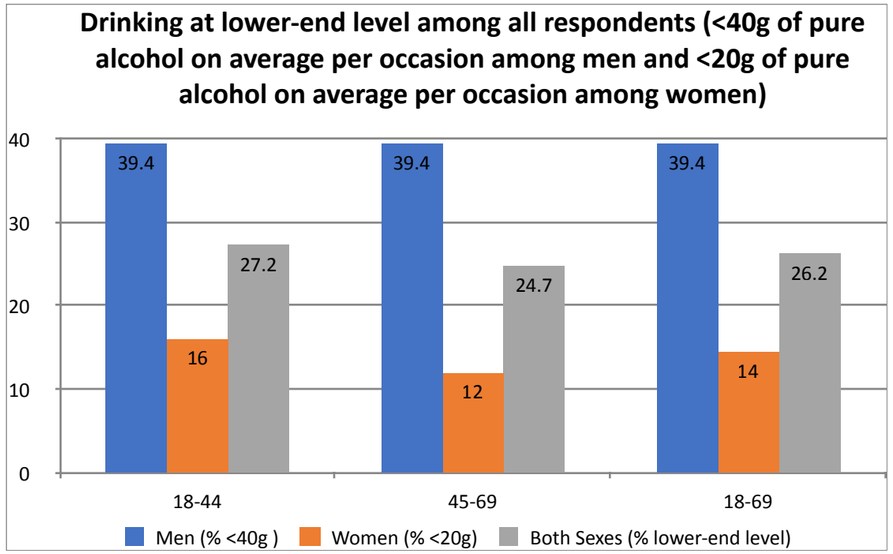


The frequency of drinking at intermediate level is defined as 40-59.9g of pure alcohol on average per occasion among men and 20-39.9g of pure alcohol on average per occasion among women. The occurrence of this in the last 30 days was included in a question in the survey instrument and the following results were observed. For all respondents of both sexes and age groups (n=2270), 15.7% reported having had an episode of 'intermediate level' drinking in the past 30 days. For those 18-44 years (n=1176) this percentage was 20.1% and for those aged 45-69 years (n=1094), 9.2%.

Among male respondents of both age groups (n=881), 11.6% reported drinking 40-59.9g of pure alcohol on average per occasion in the past 30 days. For those 18-44 years (n=432) this percentage was 15.5% and for those aged 45-69 years (n=449), 5.6%.

Among female respondents of both age groups (n=1389), 19.4% reported drinking 20-39.9g of pure alcohol on average per occasion in the past 30 days. For those 18-44 years (n=744) this percentage was 24.4% and for those aged 45-69 years (n=645), 12.4%.

Figure 96. Frequency of Drinking at lower-end level among all respondents.



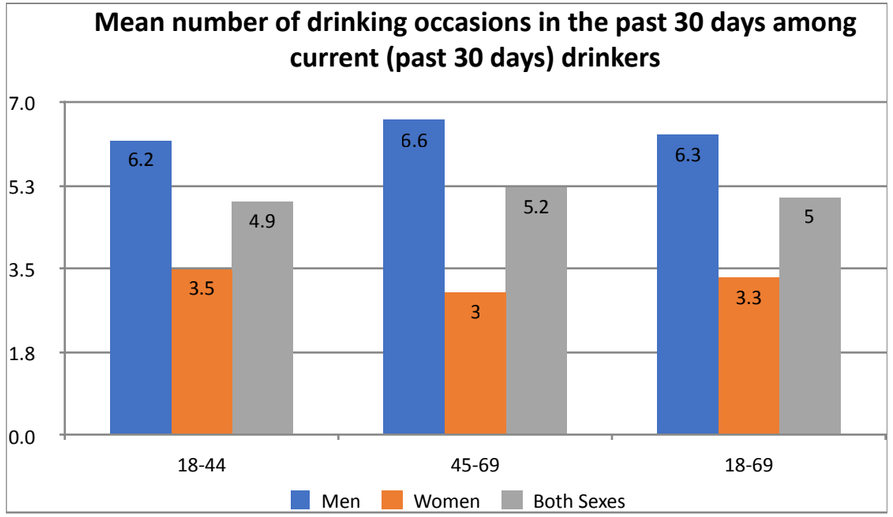
The frequency of drinking at 'lower-end level' is defined as <40g of pure alcohol on average per occasion among men and <20g of pure alcohol on average per occasion among women. The occurrence of this in the last 30 days was included in a question in the survey instrument and the following results were observed. For all respondents of both sexes and age groups (n=2270), 26.2% reported having had an episode of 'intermediate level' drinking in the past 30 days. For those 18-44 years (n=1176) this percentage was 27.2% and for those aged 45-69 years (n=1094), 24.7%.

Among male respondents of both age groups (n=881), 39.4% reported drinking <40g of pure alcohol on average per occasion in the past 30 days. For those 18-44 years (n=432) this percentage was 39.4% and for those aged 45-69 years (n=449), 39.4%.

Among female respondents of both age groups (n=1389), 14.4% reported drinking <20g of pure alcohol on

average per occasion in the past 30 days. For those 18-44 years (n=744) this percentage was 16.0% and for those aged 45-69 years (n=645), 12.0%.

Figure 97. Mean number of drinking occasions in the past 30 days among current (past 30 days) drinkers.

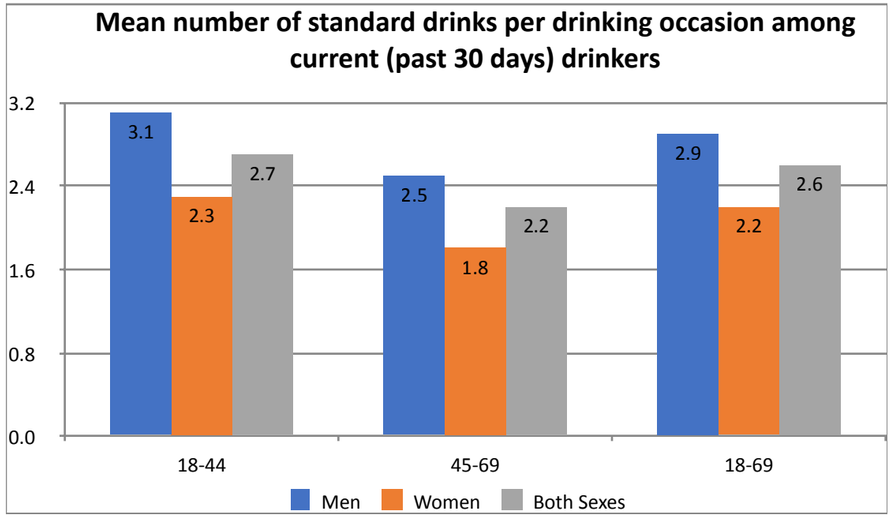


The mean number of drinking occasions among drinkers in the past 30 days was included in a question on the survey instrument. The following responses were observed. Among all respondents across both sexes and age groups (n=966) the mean number was 5.0 drinking occasions among drinkers in the past 30 days. For all respondents aged 18-44 years (n=582), the mean number of drinking occasions among drinkers in the past 30 days was reported as 4.9 and 5.2 for all respondents aged 45-69 years (n=384).

The mean number of drinking occasions among drinkers in the past 30 days for all male respondents (n=492) was 6.3 standard drinks. For male respondents aged 18-44 years (n=271), the mean number of drinking occasions among drinkers in the past 30 days was reported as 6.2 and 6.6 for male respondents aged 45-69 years (n=221).

The mean number of drinking occasions among drinkers in the past 30 days for all female respondents (n=474) was 3.3 standard drinks. For female respondents aged 18-44 years (n=311), the mean number of drinking occasions among drinkers in the past 30 days was reported as 3.5 and 3.0 for female respondents aged 45-69 years (n=163).

Figure 98. Mean number of standard drinks per drinking occasion among current (past 30 days) drinkers.

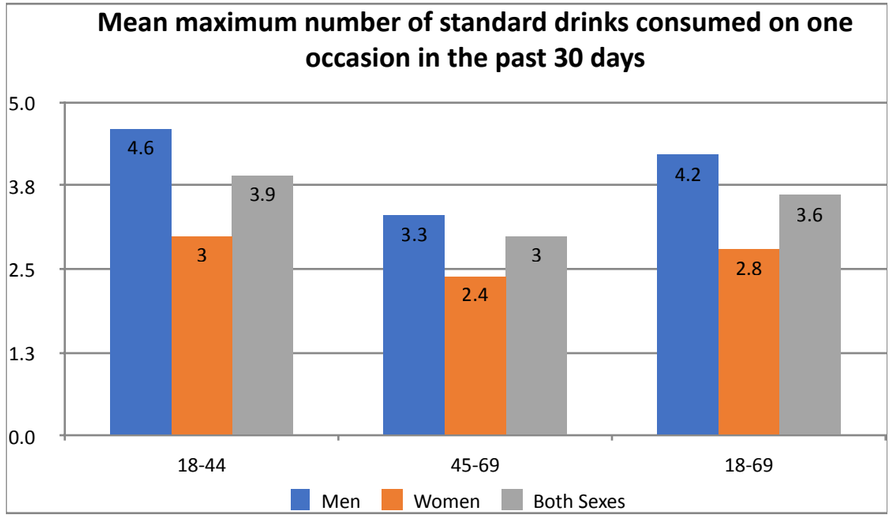


The mean number of standard drinks per drinking occasion among drinkers in the past 30 days was included in a question on the survey instrument. The following responses were observed. Among all respondents across both sexes and age groups (n=969) the mean number was 2.6 standard drinks. For all respondents aged 18-44 years (n=583), the mean number of standard drinks was reported as 2.7 and 2.2 for all respondents aged 45-69 years (n=386).

The mean number of standard drinks among all male respondents (n=493) was 2.9 standard drinks. For male respondents aged 18-44 years (n=271), the mean number of standard drinks was reported as 3.1 and 2.5 for male respondents aged 45-69 years (n=222).

The mean number of standard drinks among all female respondents (n=476) was 2.9 standard drinks. For female respondents aged 18-44 years (n=312), the mean number of standard drinks was reported as 2.3 and 1.8 for female respondents aged 45-69 years (n=164).

Figure 99. The Mean Maximum Number of Standard Drinks consumed on one occasion among drinkers in the past 30 days.

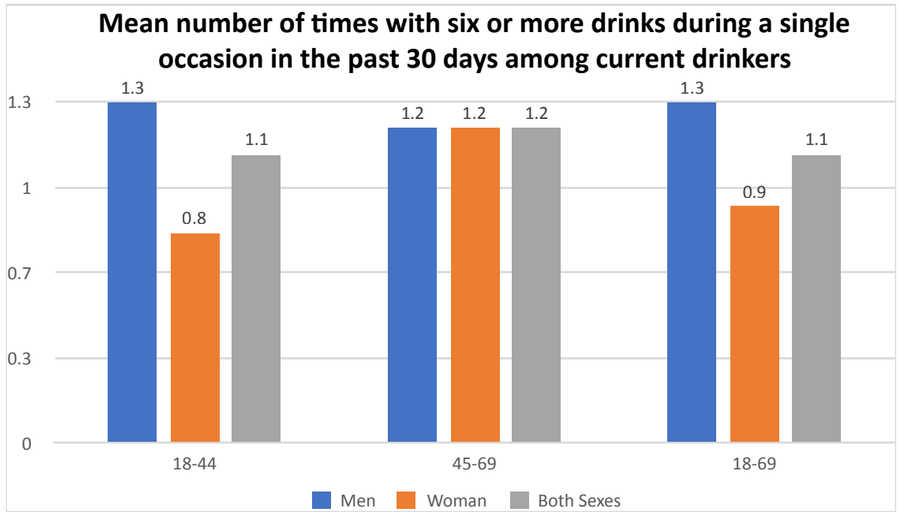


The mean maximum number of standard drinks consumed on one occasion among drinkers in the past 30 days was included in a question on the survey instrument. The following responses were observed. Among all respondents across both sexes and age groups (n=1005) the mean maximum number was 3.6 standard drinks. For all respondents aged 18-44 years (n=607), the mean maximum number of standard drinks consumed on one occasion among drinkers in the past 30 days was reported as 3.9 and 3.0 for all respondents aged 45-69 years (n=398).

The mean maximum number of standard drinks consumed on one occasion among drinkers in the past 30 days for all male respondents (n=513) was 4.2 standard drinks. For male respondents aged 18-44 years (n=284), the mean maximum number of standard drinks consumed on one occasion among drinkers in the past 30 days was reported as 4.6 and 3.3 for all respondents aged 45-69 years (n=229).

The mean maximum number of standard drinks consumed on one occasion among drinkers in the past 30 days for all female respondents (n=492) was 2.8 standard drinks. For female respondents aged 18-44 years (n=323), the mean maximum number of standard drinks consumed on one occasion among drinkers in the past 30 days was reported as 3.0 and 2.4 for all respondents aged 45-69 years (n=169).

Figure 100. Mean number of times with six or more drinks during a single occasion in the past 30 days among current drinkers.



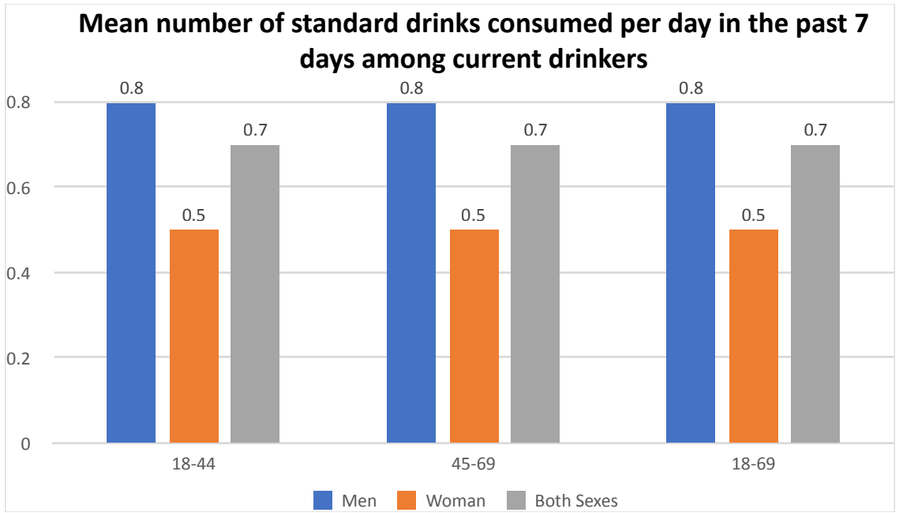
The mean number of times where six or more standard alcoholic drinks were consumed during a single drinking occasion in the past 30 days among current drinkers was included in a question on the survey instrument. The following responses were observed. Among all respondents across both sexes and age groups (n=1008) the mean number of times where six or more standard alcoholic drinks were consumed during a single drinking occasion in the past 30 days among current drinkers was 1.1. For all respondents aged 18-44 years (n=605), the mean number of times where six or more standard alcoholic drinks were consumed during a single drinking occasion in the past 30 days among current drinkers was reported as 1.1 and 1.2 for all respondents aged 45-69 years (n=403).

The mean number of times where six or more standard alcoholic drinks were consumed during a single drinking occasion in the past 30 days among current drinkers for all male respondents (n=515) was 1.3. For male respondents aged 18-44 years (n=283), the mean number of times where six or more standard alcoholic drinks were consumed during a single drinking occasion in the past 30 days among current drinkers was reported as 1.3 and 1.2 for all respondents aged 45-69 years (n=232).

The mean number of times where six or more standard alcoholic drinks were consumed during a single drinking occasion in the past 30 days among current drinkers for all female respondents (n=493) was 0.9.

For female respondents aged 18-44 years (n=322), mean number of times where six or more standard alcoholic drinks were consumed during a single drinking occasion in the past 30 days among current drinkers was reported as 0.8 and 1.2 for all respondents aged 45-69 years (n=171).

Figure 101. Mean number of standard drinks consumed on average per day in the past 7 days among current drinkers

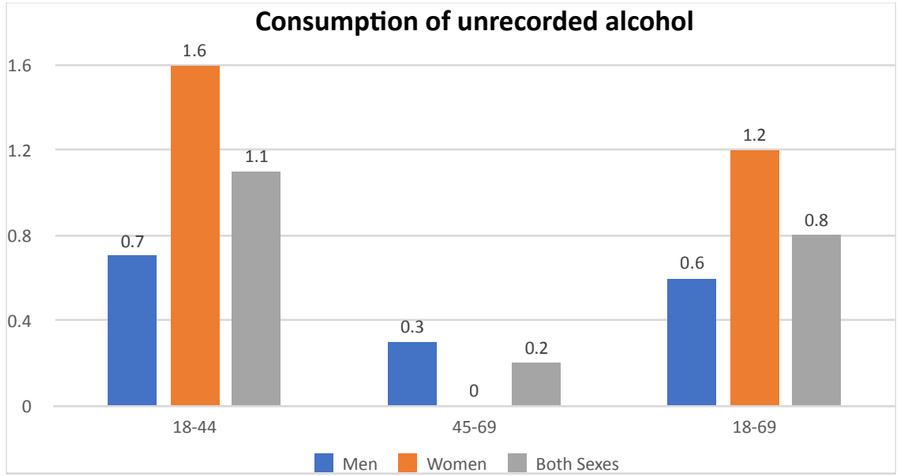


The survey questionnaire recorded responses to the question on the number of standard alcoholic drinks that the respondent had consumed, if he/she was a drinker, on average per day during the past seven days. The following responses were observed. Among all respondents across both sexes and age groups (n=1049) the mean number of standard alcoholic drinks consumed on average per day among current drinkers during the past seven days was 0.7. For all respondents aged 18-44 years (n=638), the mean number of standard alcoholic drinks that the respondent had consumed on average per day among current drinkers was reported as 0.7 and 0.7 for all respondents aged 45-69 years (n=411).

The mean number of standard alcoholic drinks consumed on average per day among current drinkers during the past seven days for all male respondents (n=537) was 0.8. For male respondents aged 18-44 years (n=300), the mean number of standard alcoholic drinks consumed on average per day among current drinkers during the past seven days was reported as 0.8 and 0.8 for all respondents aged 45-69 years (n=237).

The mean number of standard alcoholic drinks consumed on average per day among current drinkers during the past seven days for all female respondents (n=512) was 0.5. For female respondents aged 18-44 years (n=338), mean number of standard alcoholic drinks consumed on average per day among current drinkers during the past seven days was reported as 0.5 and 0.5 for all respondents aged 45-69 years (n=174).

Figure 102. Percentage of All Respondents that consumed 'Unrecorded Alcohol' during the past 30 days among current drinkers.



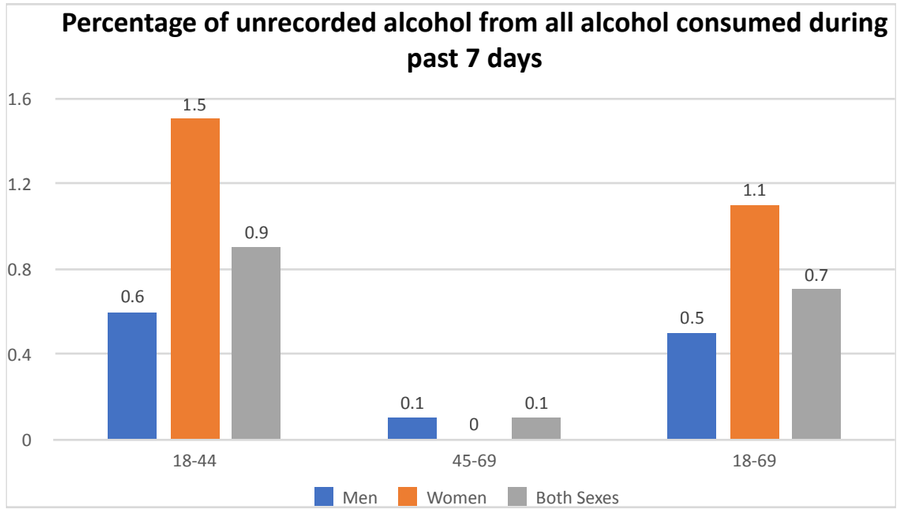
'Unrecorded Alcohol' is defined as any homebrewed alcohol, any alcohol brought over the border, not intended for drinking or other untaxed alcohol. The survey questionnaire probed respondents on whether they had consumed any alcohol so characterized. The following responses were observed. Among all respondents across both sexes and age groups (n=1059) the percentage of respondents that included the consumption of 'unrecorded alcohol' in their consumption of alcohol during the past 30 days was 0.8%. For all respondents aged 18-44 years (n=643), the percentage of respondents that included the consumption of 'unrecorded alcohol' in their consumption of alcohol during the past 30 days was reported as 1.1% and 0.2% for all respondents aged 45-69 years (n=416).

The percentage of respondents that included the consumption of 'unrecorded alcohol' in their consumption of alcohol during the past 30 days for all male respondents (n=543) was 0.6%. For male respondents aged 18-44 years (n=302), the percentage of respondents that included the consumption of

'unrecorded alcohol' in their consumption of alcohol during the past 30 days was reported as 0.7% and 0.3% for all respondents aged 45-69 years (n=241).

The percentage of respondents that included the consumption of 'unrecorded alcohol' in their consumption of alcohol during the past 30 days for all female respondents (n=516) was 1.2%. For female respondents aged 18-44 years (n=341), percentage of respondents that included the consumption of 'unrecorded alcohol' in their consumption of alcohol during the past 30 days was reported as 1.6% and 0.0% for all respondents aged 45-69 years (n=175).

Figure 103. Percentage of unrecorded alcohol from all alcohol consumed during past 7 days.



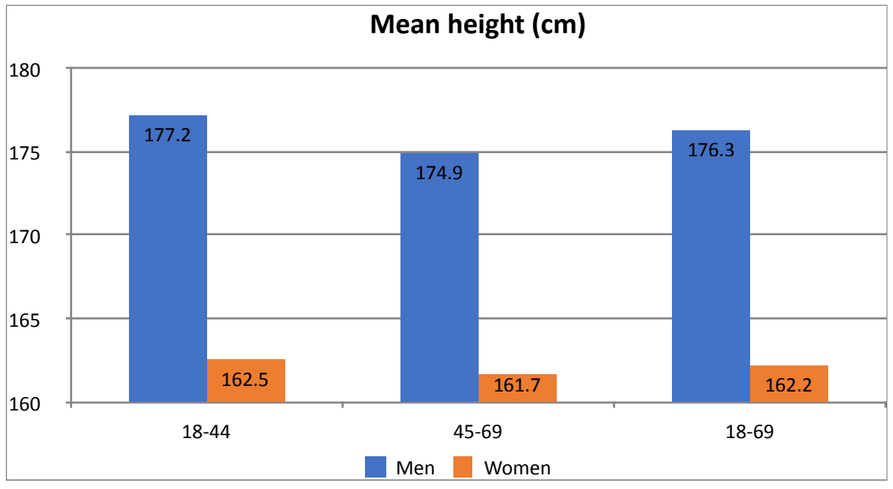
'Unrecorded Alcohol' is defined as any homebrewed alcohol, any alcohol brought over the border, not intended for drinking or other untaxed alcohol. The analysis of the responses to whether respondents had consumed any alcohol so characterized as a percentage of standard alcoholic drinks consumed was conducted. The following rates were observed. Among all respondents across both sexes and age groups (n=787) the percentage of alcohol consumed during the past seven days by respondents who were drinkers that included 'unrecorded alcohol' was 0.7%. For all respondents aged 18-44 years (n=477), the percentage of respondents that included the consumption of 'unrecorded alcohol' in their consumption of alcohol during the past 30 days was reported as 0.9% and 0.1% for all respondents aged 45-69 years (n=310).

The percentage of alcohol consumed during the past seven days by all male respondents who were drinkers that included 'unrecorded alcohol' (n=444) was 0.5%. For male respondents aged 18-44 years (n=238), the percentage of respondents that included the consumption of 'unrecorded alcohol' in their consumption of alcohol during the past 30 days was reported as 0.6% and 0.1% for all respondents aged 45-69 years (n=206).

The percentage of alcohol consumed during the past seven days by all female respondents who were drinkers that included 'unrecorded alcohol' (n=343) was 1.1%. For female respondents aged 18-44 years (n=239), the percentage of respondents that included the consumption of 'unrecorded alcohol' in their consumption of alcohol during the past 30 days was reported as 1.5% and 0.0% for all respondents aged 45-69 years (n=104).

Body Mass Index (BMI)

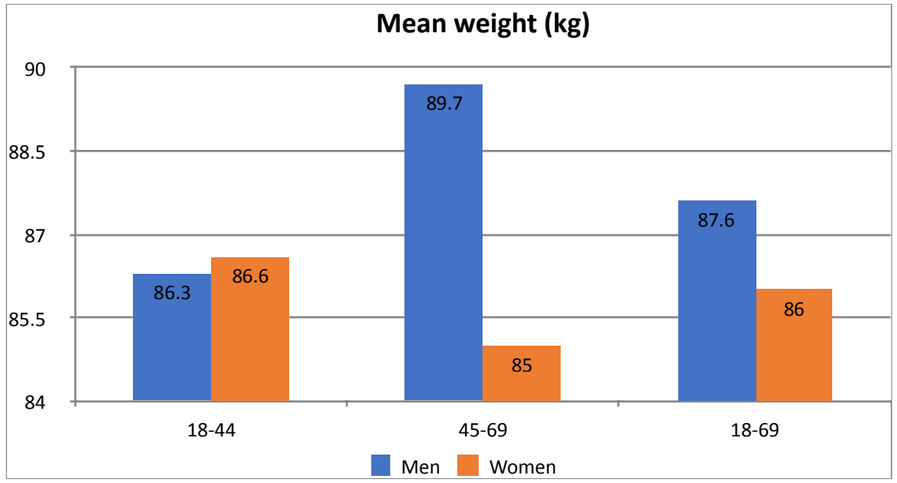
Figure 104. Mean height (cm) of respondents aged 18-69, both sexes and age groups.



The mean height for all male respondents of both age groups (n=873) was calculated at 176.3 cm. For participants aged 18-44 years (n=433), it was 177.2 cm and for those aged 45-69 years (n=440), the calculation was 174.9 cm.

The mean height for all female respondents of both age groups (n=1340) was calculated at 162.2 cm. For participants aged 18-44 years (n=721), it was 162.5 cm and for those aged 45-69 years (n=619), the calculation was 161.7 cm.

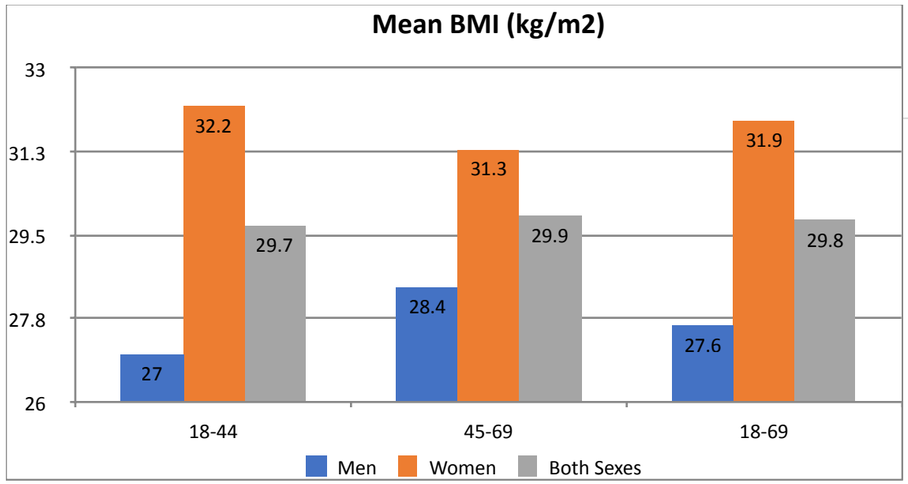
Figure 105. Mean weight (kg) of respondents aged 18-69 years, both sexes and age groups.



The mean height for all male respondents of both age groups (n=873) was calculated at 87.6 kg. For participants aged 18-44 years (n=433), it was 86.3 kg and for those aged 45-69 years (n=437), the calculation was 89.7 kg.

The mean height for all female respondents of both age groups (n=1335) was calculated at 86.0 kg. For participants aged 18-44 years (n=719), it was 86.6 kg and for those aged 45-69 years (n=616), the calculation was 85.0 kg.

Figure 106. Mean BMI of respondents aged 18-69 years, both sexes and age groups.

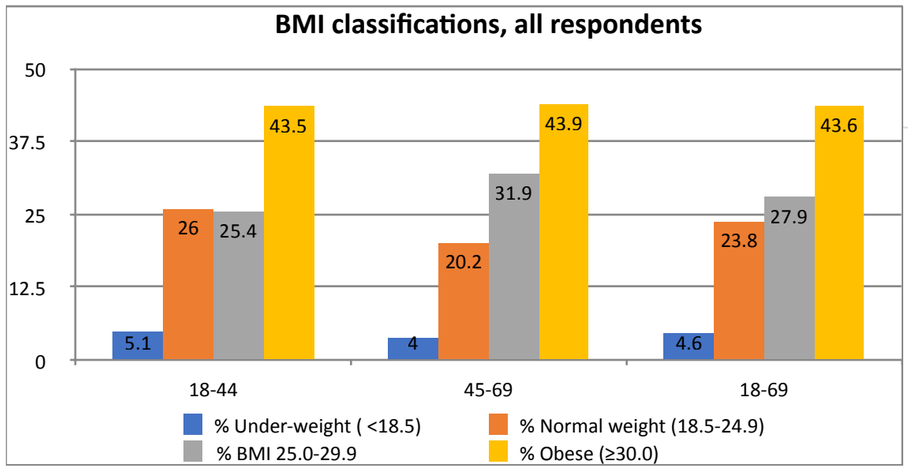


The mean body-mass index for all respondents both sexes and age groups (n=2140) were calculated at 29.8. For participants aged 18-44 years (n=1117), it was 29.7 and for those aged 45-69 years (n=1023), the calculation was 29.9.

The mean body-mass index for all male respondents of both age groups (n=849) was calculated at 27.6. For participants aged 18-44 years (n=422), it was 27.0 and for those aged 45-69 years (n=427), the calculation was 28.4.

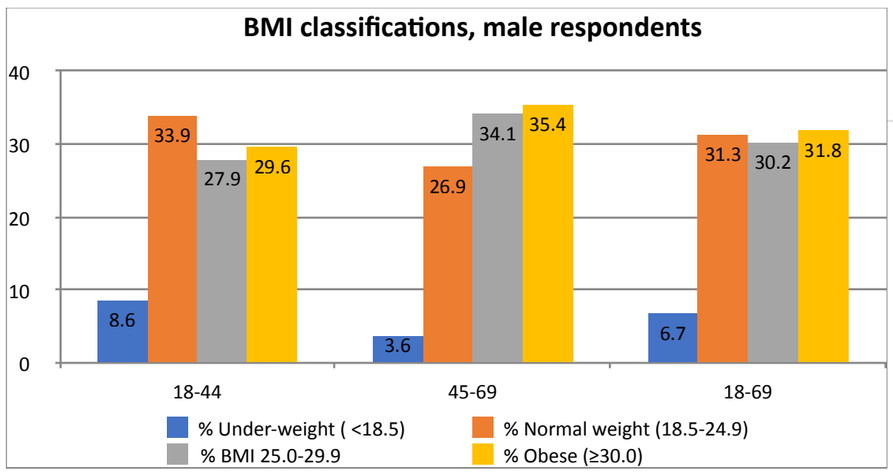
The mean body-mass index for all female respondents of both age groups (n=1291) was calculated at 31.9. For participants aged 18-44 years (n=695), it was 32.2 and for those aged 45-69 years (n=596), the calculation was 31.5.

Figure 107. BMI classifications of respondents aged 18-69 years, by both sexes and age groups.



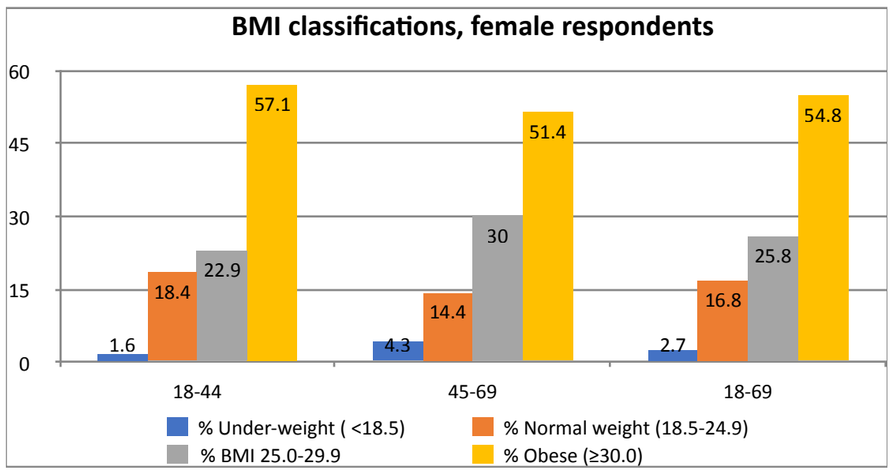
Using the BMI classifications for all participants both sexes and age groups (n=2140), there were4.6% persons who were underweight, 23.8% with normal weight, 27.9% who were overweight and 43.6% whose BMI calculation placed them in the obese category. For those aged 18-44 years(n=1117), 5.1% were underweight, 26.0% of normal weight, 25.4% overweight and 43.5% obese. In the 45-69 years age group (n=1023), 4.0% were underweight, 20.2% within the normal weightclassification, 31.9% overweight and 43.9% obese.

Figure 108. BMI classifications of male respondents aged 18-69 years, by age groups.



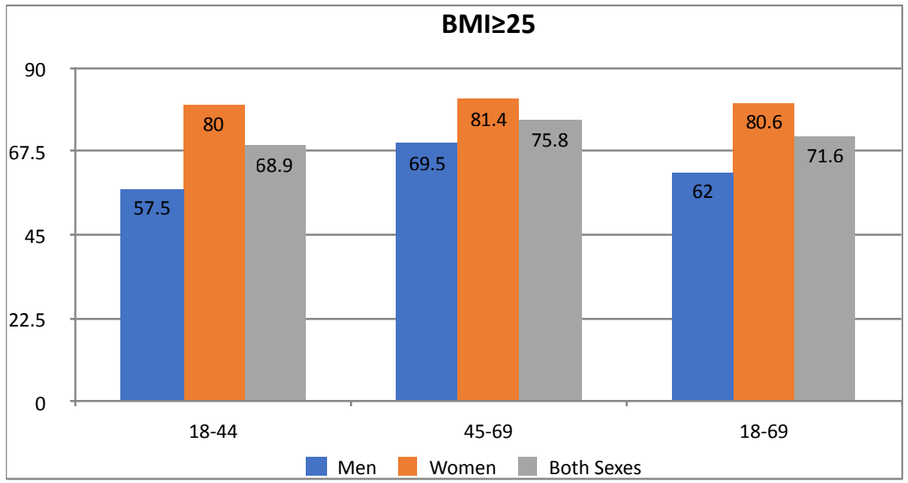
Using the BMI classifications for male participants of both age groups (n=849), there were 6.7% males who were underweight, 31.3% with normal weight, 30.2% who were overweight and 31.8% whose BMI calculation placed them in the obese category. For males aged 18-44 years (n=422), 8.6% were underweight, 33.9% of normal weight, 27.9% overweight and 29.6% obese. In the 45-69 years age group for males (n=427), 3.6% were underweight, 26.9% within the normal weight classification, 34.1% overweight and 35.4% obese.

Figure 109. BMI classifications of female respondents aged 18-69 years, by age groups.



Using the BMI classifications for female participants of both age groups (n=1291), there were 2.7% females who were underweight, 16.7% with normal weight, 25.8% who were overweight and 54.8% whose BMI calculation placed them in the obese category. For females aged 18-44 years (n=695), 1.6% were underweight, 18.4% of normal weight, 22.9% overweight and 57.1% obese. In the 45-69 years age group for females (n=596), 4.3% were underweight, 14.4% within the normal weight classification, 30.0% overweight and 51.4% obese.

Figure 110. Percentage of respondents (excluding pregnant women) classified as overweight (BMI≥25).

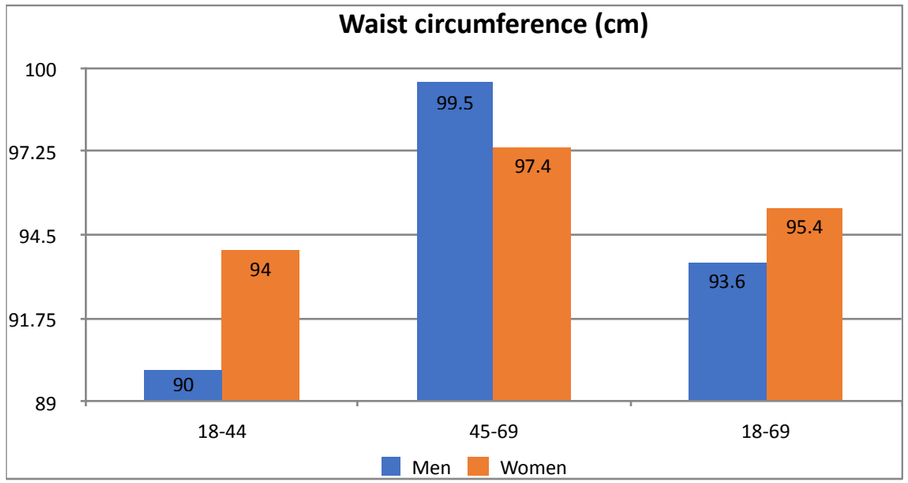


The percentage of all respondents (excluding pregnant women) classified as overweight (BMI≥25) (n=2140) were calculated at 71.6%. For participants aged 18-44 years (n=1117), it was 68.9% and for those aged 45-69 years (n=1023), the calculation was 75.8%.

The percentage of all male respondents classified as overweight (BMI≥25) of both age groups (n=849) was calculated at 62.0%. For participants aged 18-44 years (n=422), it was 57.5% and for those aged 45-69 years (n=427), the calculation was 69.5%.

The percentage of all female respondents (excluding pregnant women) classified as overweight (BMI≥25) of both age groups (n=1291) was calculated at 80.6%. For participants aged 18-44 years (n=695), it was 80.0% and for those aged 45-69 years (n=596), the calculation was 81.4%.

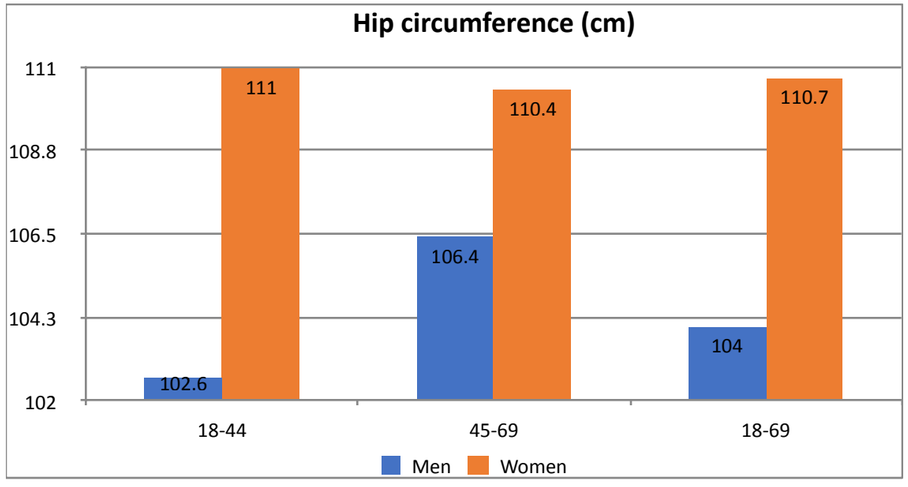
Figure 111. Mean waist circumference among all respondents (excluding pregnant women).



The mean waist circumference for all male respondents of both age groups (n=868) was calculated at 93.6 cm. For participants aged 18-44 years (n=432), it was 90.0 cm and for those aged 45-69 years (n=436), the calculation was 99.5 cm.

The mean waist circumference for all female respondents of both age groups (excluding pregnant women) (n=1338) was calculated at 95.4 cm. For participants aged 18-44 years (n=719), it was 94.0 cm and for those aged 45-69 years (n=619), the calculation was 97.4 cm.

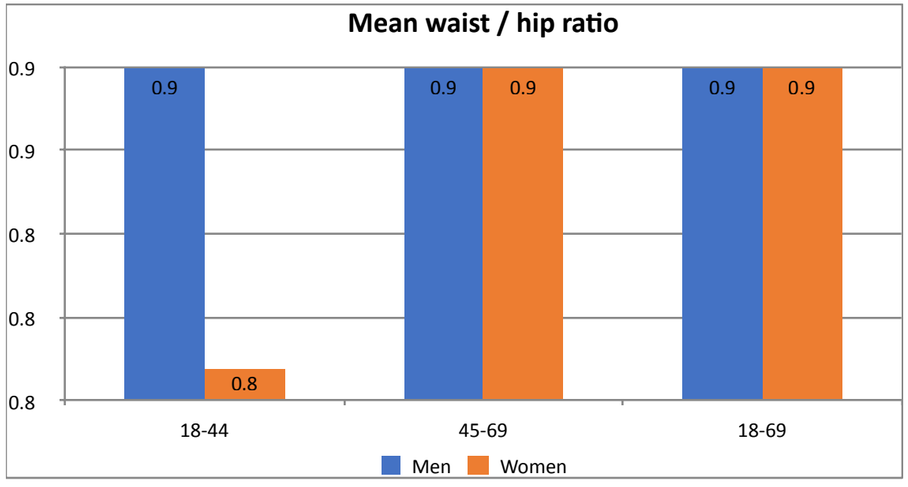
Figure 112. Mean hip circumference among all respondents (excluding pregnant women).



The mean hip circumference for all male respondents of both age groups (n=863) was calculated at 104.0 cm. For participants aged 18-44 years (n=429), it was 102.6 cm and for those aged 45-69 years (n=434), the calculation was 106.4 cm.

The mean hip circumference for all female respondents of both age groups (excluding pregnant women) (n=1335) was calculated at 110.7 cm. For participants aged 18-44 years (n=719), it was 111.0 cm and for those aged 45-69 years (n=616), the calculation was 110.4 cm.

Figure 113. Mean waist-to-hip ratio among all respondents (excluding pregnant women).



The mean waist-to-hip ratio for all male respondents of both age groups (n=863) was calculated at 0.9. For participants aged 18-44 years (n=429), it was 0.9 and for those aged 45-69 years (n=434), the calculation was 0.9.

The mean waist-to-hip ratio for all female respondents of both age groups (excluding pregnant women) (n=1335) was calculated at 0.9. For participants aged 18-44 years (n=719), it was 0.8 and for those aged 45-69 years (n=616), the calculation was 0.9.

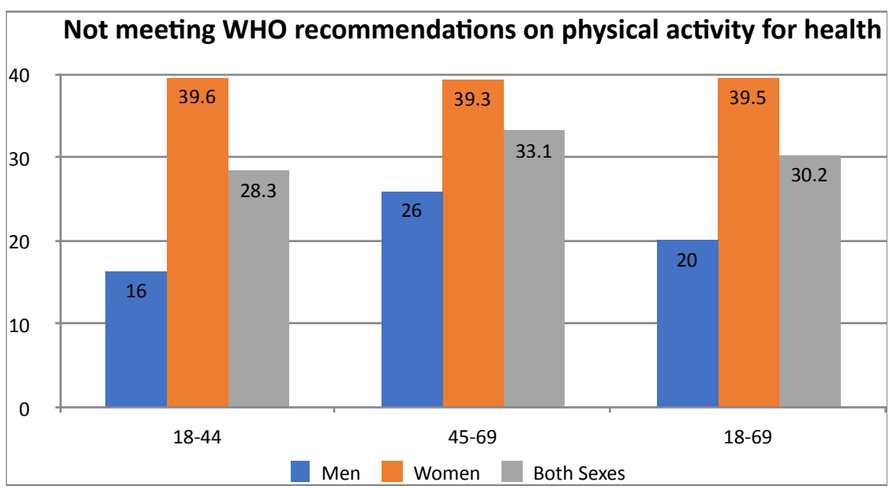
Physical Activity

The survey questionnaire contained questions that explored whether respondents met the recommended level of physical activity that is aligned with a healthy lifestyle. Individuals whose responses did not

For the calculation of the recommended amount of physical activity for health, the total timespent in physical activity during a typical week and the intensity of the physical activity wereconsidered. Thus, throughout a week, including activity for work, during transport and leisuretime, the recommendation is that individuals should engage in, at a minimum, 150 minutes of moderate-intensity physical activity OR 75 minutes of vigorous-intensity physical activity OR an equivalent combination of moderate- and vigorous-intensity physical activity achievingat least 600 metabolic equivalent minutes.

The following Figure indicates the results of evaluation of responses of respondents that indicate that these recommendations were not met – described as rates of physical inactivity.

Figure 114. Pattern of physical inactivity of respondents aged 18-69 years, by both sexes andage groups.



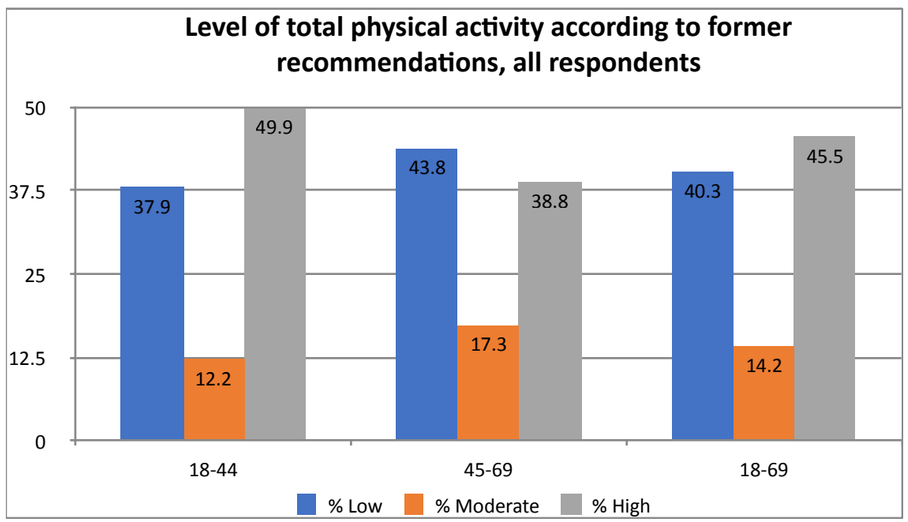
For 2248 respondents of both sexes and age groups, answers to the questions on levels andtypes of physical activity were collated to determine those that did not meet recommendedminimum levels of physical activity. The rate of physical inactivity of respondents was 30.2%.The rate was 28.3% among those respondents aged 18-44 years (n=1168), and among 33.1%of respondents aged 45-69 years (n=1080).

Of male respondents of both age groups (n=876), 20.0% did not meet recommended minimum levels of physical activity. This was true among 16.3% of male respondents aged 18-44 years (n=429), and among 26.0% of respondents aged 45-69 years (n=447).

Of female respondents of both age groups (n=1372), 39.5% did not meet recommended minimum levels of physical activity. This was true among 39.6% of female respondents aged18-44 years (n=739), and among 39.3% of respondents aged 45-69 years (n=633).

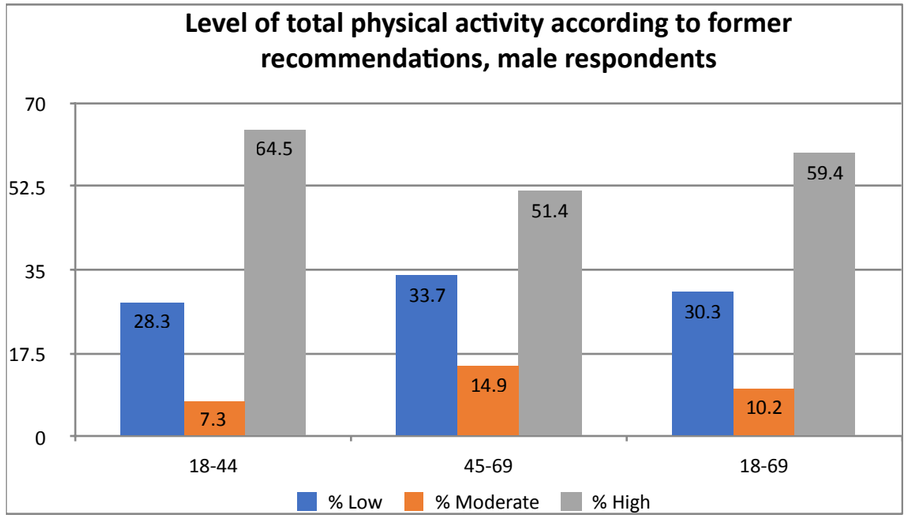
Respondents of both sexes and age groups provided answers to the questions on levels andtypes of physical activity were analysed to determine the mean number of minutes spent of a particular type of physical activity on average per day. The following was observed.

Figure 115. Category of level of total physical activity on average per day to former recommendations.



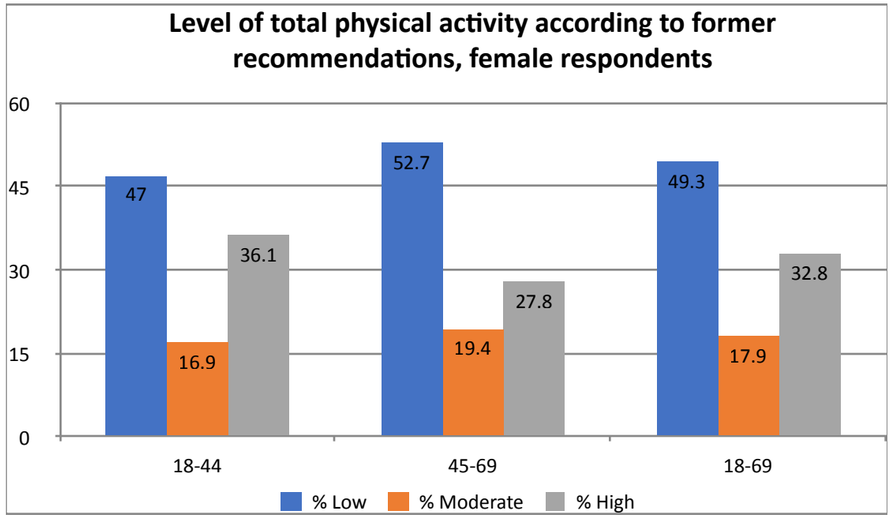
For all respondents that provided responses to the question of physical activity levels and types, an evaluation was done against former recommendations as espoused by the world Health Assembly. The following patterns were observed. For all respondents (n=2248), the level of total activity according to former WHO recommendations was low for 40.3%, moderate for 14.2% and high for 45.5%. For all respondents aged 18-44 years (n=1168), the level of total activity according to former WHO recommendations was low for 37.9%, moderate for 12.2% and high for 49.9%. Among all respondents aged 45-69 years (n=1080), the levels were low for 43.8%, moderate for 17.3% and high for 38.8%.

Figure 116. Category of level of total physical activity on average per day to former recommendations.



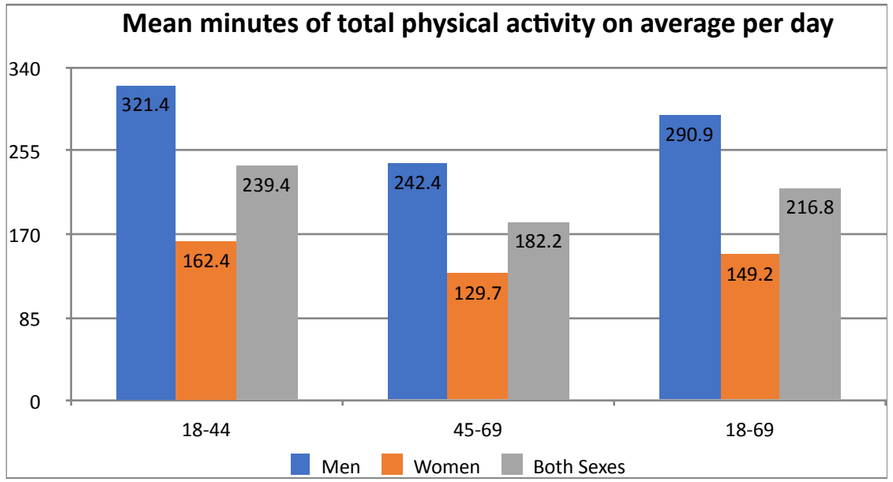
For male respondents (n=876), the level of total activity according to former WHO recommendations was low for 30.3%, moderate for 10.2% and high for 59.4%. For male respondents aged 18-44 years (n=429), the level of total activity according to former WHO recommendations was low for 28.3%, moderate for 7.3% and high for 64.5%. Among male respondents aged 45-69 years (n=447), the levels were low for 33.7%, moderate for 14.9% and high for 51.4%.

Figure 117. Category of level of total physical activity on average per day to former recommendations.



For female respondents (n=1372), the level of total activity according to former WHO recommendations was low for 49.3%, moderate for 17.9% and high for 32.8%. For female respondents aged 18-44 years (n=739), the level of total activity according to former WHO recommendations was low for 47.0%, moderate for 16.9% and high for 36.1%. Among female respondents aged 45-69 years (n=633), the levels were low for 52.7%, moderate for 19.4% and high for 27.8%.

Figure 118. Mean minutes of total physical activity on average per day.

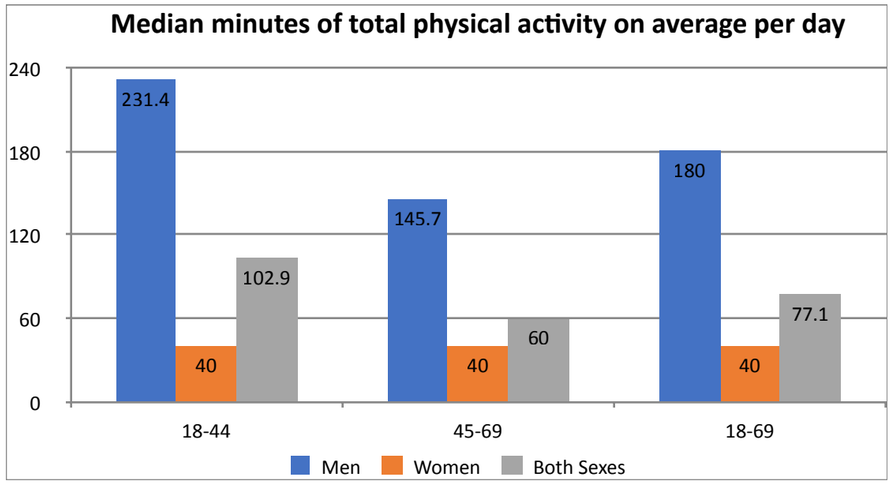


The mean minutes of total physical activity on average per day for all respondents was 216.8 minutes. The mean minutes of total physical activity on average per day for all respondents aged 18-44 years (n=1168) was 239.4 minutes, and 182.2 minutes among all respondents aged 45-69 years (n=1080).

For male respondents of both age groups (n=876), the mean minutes of total physical activity on average per day was 290.9 minutes. The number was 321.4 minutes for male respondents aged 18-44 years (n=429), and 242.4 minutes for male respondents aged 45-69 years (n=447).

For female respondents of both age groups (n=1372), the mean minutes of total physical activity on average per day was 149.2 minutes. The number was 162.4 minutes for female respondents aged 18-44 years (n=739), and 129.7 minutes for female respondents aged 45-69 years (n=633).

Figure 119. Median minutes of total physical activity on average per day.

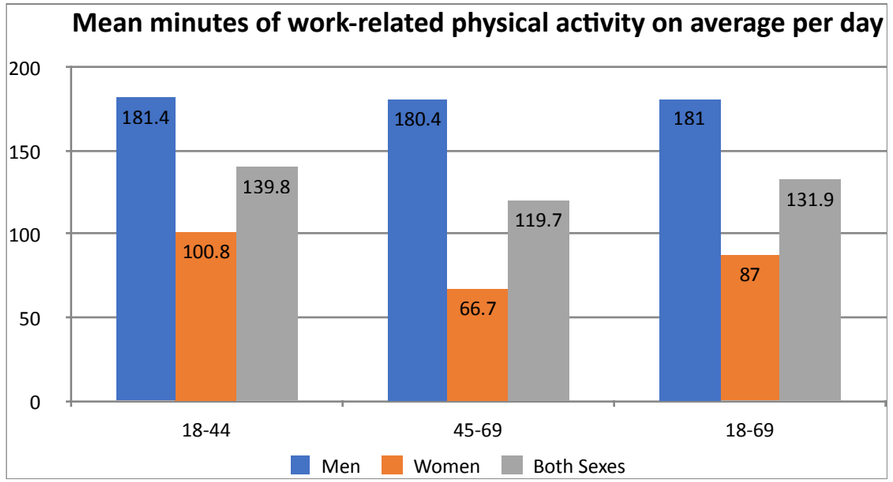


The median minutes of total physical activity on average per day for all respondents was 77.1 minutes. The median minutes of total physical activity on average per day for all respondents aged 18-44 years (n=1168) was 102.9 minutes, and 60.0 minutes among all respondents aged 45-69 years (n=1080).

For male respondents of both age groups (n=876), the median minutes of total physical activity on average per day was 180.0 minutes. The number was 231.4 minutes for male respondents aged 18-44 years (n=429), and 145.7 minutes for male respondents aged 45-69 years (n=447).

For female respondents of both age groups (n=1372), the median minutes of total physical activity on average per day was 40.0 minutes. The number was 40.0 minutes for female respondents aged 18-44 years (n=739), and 40.0 minutes for female respondents aged 45-69 years (n=633).

Figure 120. Mean minutes of work-related physical activity on average per day.

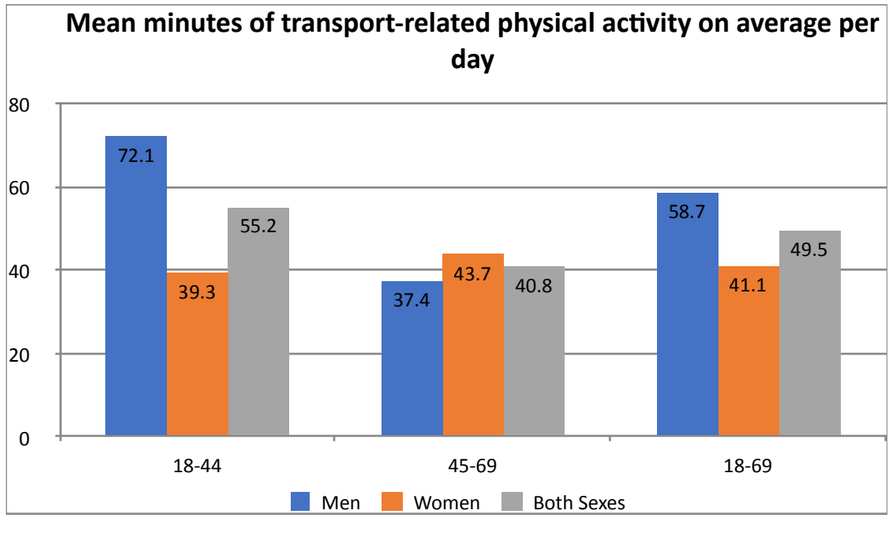


The mean minutes of transport-related physical activity on average per day for all respondents was 131.9 minutes. The mean minutes of transport-related physical activity on average per day for all respondents aged 18-44 years (n=1168) was 139.8 minutes, and 119.7 minutes among all respondents aged 45-69 years (n=1080).

For male respondents of both age groups (n=876), the mean minutes of transport-related physical activity on average per day was 181.0 minutes. The number was 181.4 minutes for male respondents aged 18-44 years (n=429), and 180.4 minutes for male respondents aged 45-69 years (n=447).

For female respondents of both age groups (n=1372), the mean minutes of transport-related physical activity on average per day was 87.0 minutes. The number was 100.8 minutes for female respondents aged 18-44 years (n=739), and 66.7 minutes for female respondents aged 45-69 years (n=633).

Figure 121. Mean minutes of transport-related physical activity on average per day.

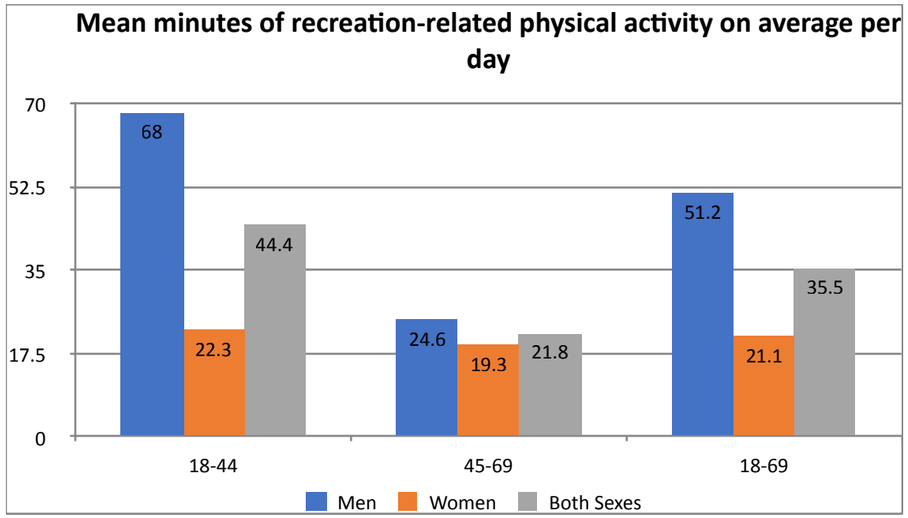


The mean minutes of transport-related physical activity on average per day for all respondents was 49.5 minutes. The mean minutes of transport-related physical activity on average per day for all respondents aged 18-44 years (n=1168) was 55.2 minutes, and 40.8 minutes among all respondents aged 45-69 years (n=1080).

For male respondents of both age groups (n=876), the mean minutes of transport-related physical activity on average per day was 58.7 minutes. The number was 72.1 minutes for male respondents aged 18-44 years (n=429), and 37.4 minutes for male respondents aged 45-69 years (n=447).

For female respondents of both age groups (n=1372), the mean minutes of transport-related physical activity on average per day was 41.1 minutes. The number was 39.3 minutes for female respondents aged 18-44 years (n=739), and 43.7 minutes for female respondents aged 45-69 years (n=633).

Figure 122. Mean minutes of recreation-related physical activity on average per day.



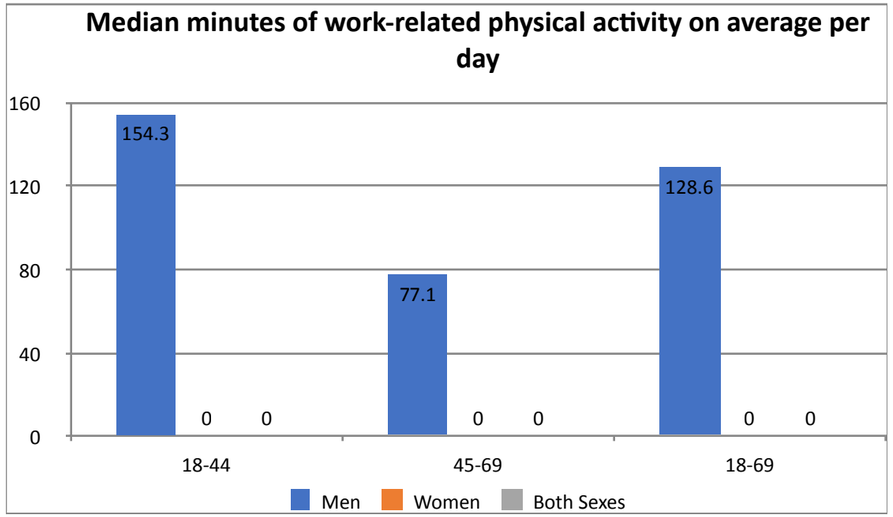
The mean minutes of recreation-related physical activity on average per day for all respondents was 35.5 minutes. The mean minutes of recreation-related physical activity on average per day for all respondents aged 18-44 years (n=1168) was 44.4 minutes, and 21.8 minutes among all respondents aged 45-69 years (n=1080).

For male respondents of both age groups (n=876), the mean minutes of recreation-related physical activity on average per day was 51.2 minutes. The number was 68.0 minutes for male respondents aged 18-44 years (n=429), and 24.6 minutes for male respondents aged 45-69 years (n=447).

For female respondents of both age groups (n=876), the mean minutes of recreation-related physical activity on average per day was 21.1 minutes. The number was 22.3 minutes for female respondents aged 18-44 years (n=739), and 19.3 minutes for female respondents aged 45-69 years (n=633).

Respondents of both sexes and age groups provided answers to the questions on levels and type of physical activity were analysed to determine the median number of minutes spent of a particular type of physical activity on average per day. The following was observed.

Figure 123. Median minutes of work-related physical activity on average per day.

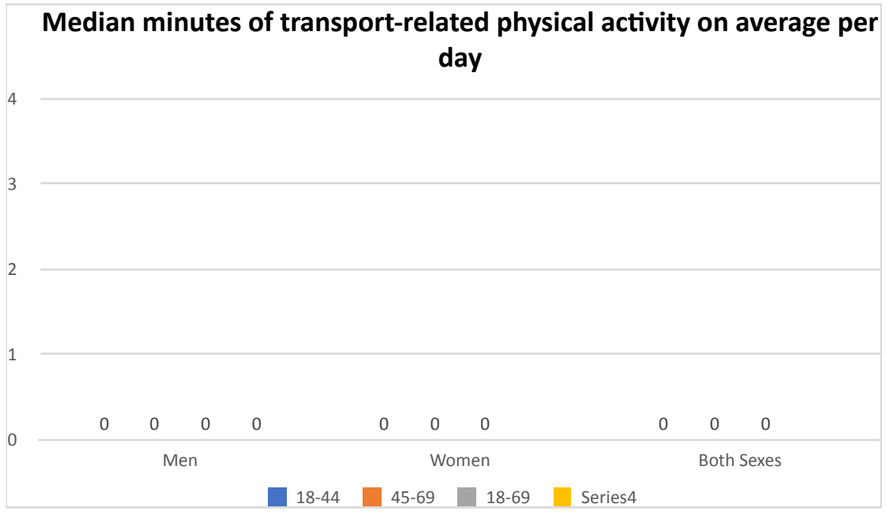


For all respondents of both age groups (n=2248), the median minutes of work-related physical activity on average per day was 0.0 minutes. This was also true among all respondents aged 18-44 years (n=1168), and among all respondents aged 45-69 years (n=1080).

For male respondents of both age groups (n=876), the median minutes of work-related physical activity on average per day was 128.6 minutes. The number was 154.3 minutes for male respondents aged 18-44 years (n=429), and 77.1 minutes for male respondents aged 45-69 years (n=447).

For female respondents of both age groups (n=1372), the median minutes of work-related physical activity on average per day was 0.0 minutes. This was also true among female respondents aged 18-44 years (n=739), and among female respondents aged 45-69 years (n=633).

Figure 124. Median minutes of transport-related physical activity on average per day.

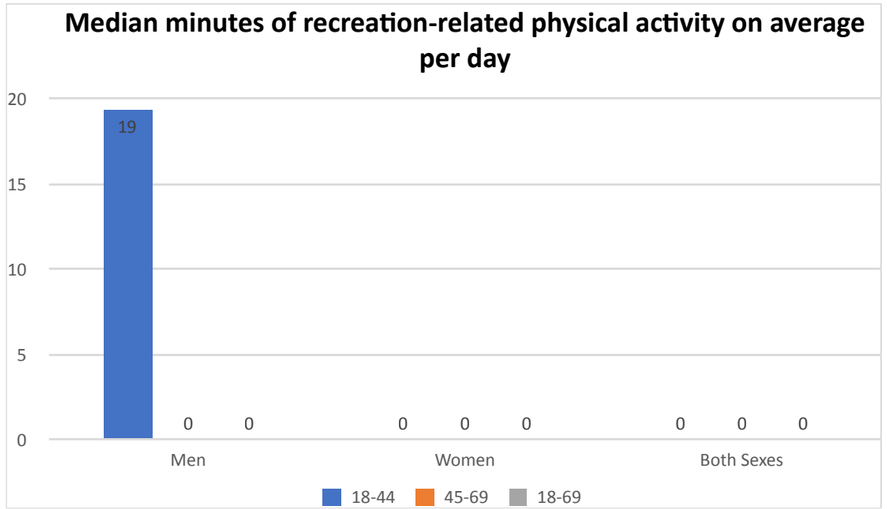


For all respondents of both age groups (n=2248), the median minutes of transport-related physical activity on average per day was 0.0 minutes. This was also true among all respondents aged 18-44 years (n=1168), and among all respondents aged 45-69 years (n=1080).

For male respondents of both age groups (n=876), the median minutes of transport-related physical activity on average per day was 0.0 minutes. This was also true among male respondents aged 18-44 years (n=429), and among male respondents aged 45-69 years (n=447).

For female respondents of both age groups (n=1372), the median minutes of transport-related physical activity on average per day was 0.0 minutes. This was also true among female respondents aged 18-44 years (n=739), and among female respondents aged 45-69 years (n=633).

Figure 125. Median minutes of recreation-related physical activity on average per day.

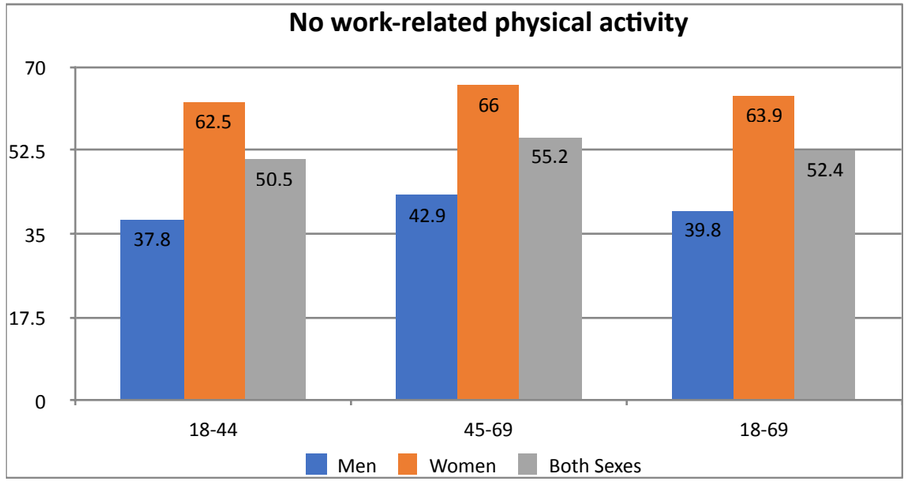


The median minutes of recreation-related physical activity on average per day for all respondents was 0.0 minutes. The median minutes of recreation-related physical activity on average per day for all respondents aged 18-44 years (n=1168) was 0.0 minutes, and 0.0 minutes among all respondents aged 45-69 years (n=1080).

For male respondents of both age groups (n=876), the median minutes of recreation-related physical activity on average per day was 0.0 minutes. The number was 19.3 minutes for male respondents aged 18-44 years (n=429), and 0.0 minutes for male respondents aged 45-69 years (n=447).

For female respondents of both age groups (n=1372), the median minutes of recreation-related physical activity on average per day was 0.0 minutes. This was also true among female respondents aged 18-44 years (n=739), and among female respondents aged 45-69 years (n=633).

Figure 126. Percentage of all respondents that reported no work-related physical activity.

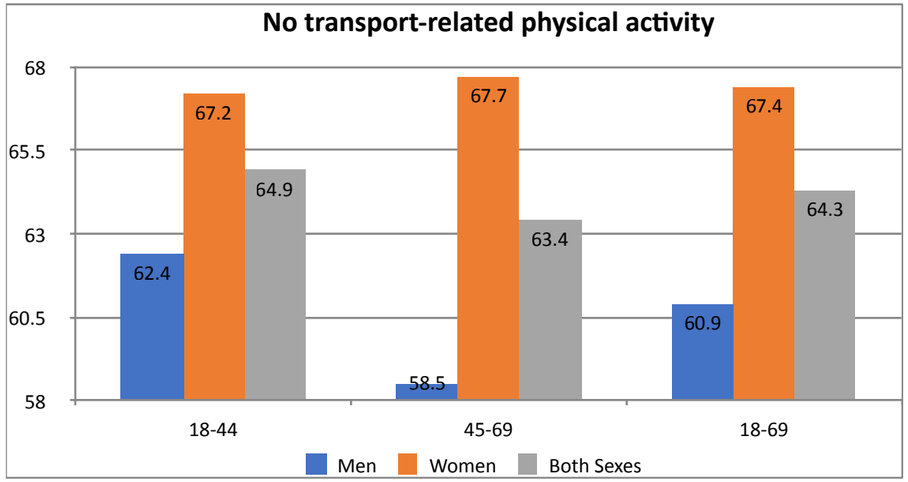


For 2248 respondents of both sexes and age groups, answers to the questions on levels andtypes of physical activity were analysed to determine those who did no work-related physical activity in a particular area of life. The rate of no work-related physical activity of respondents was 52.4%. The rate was 50.5% among those respondents aged 18-44 years (n=1168), and among 55.2% of respondents aged 45-69 years (n=1080).

Of male respondents of both age groups (n=876), 39.8% reported no work-related physical activity. This was true among 37.8% of male respondents aged 18-44 years (n=429), and among 42.9% of respondents aged 45-69 years (n=447).

Of female respondents of both age groups (n=1372), 63.9% reported no work-related physical activity. This was true among 62.5% of female respondents aged 18-44 years (n=739), and among 66.0% of respondents aged 45-69 years (n=633).

Figure 127. Percentage of all respondents that reported no transport-related physical activity.

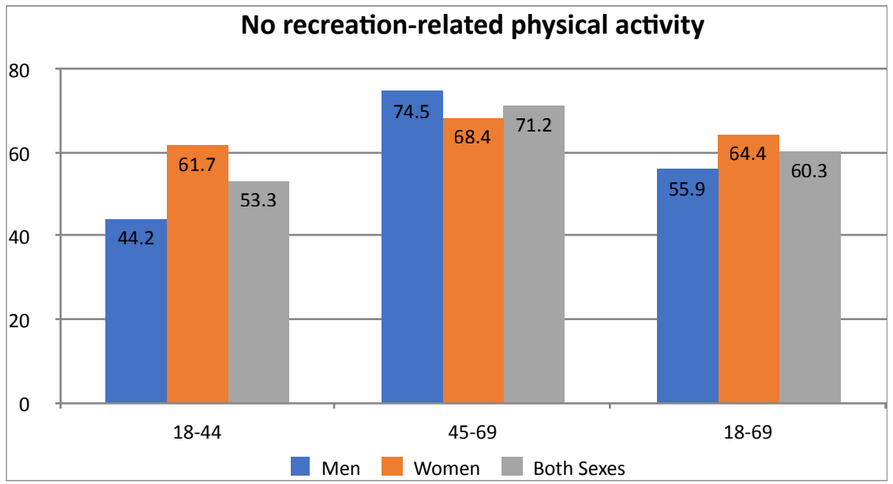


For 2248 respondents of both sexes and age groups, answers to the questions on levels andtypes of physical activity were analysed to determine those who did not transport-related physical activity in a particular area of life. The rate of no transport-related physical activity of respondents was 64.3%. The rate was 64.9% among those respondents aged 18-44 years (n=1168), and among 63.4% of respondents aged 45-69 years (n=1080).

Of male respondents of both age groups (n=876), 60.9% reported no transport-related physical activity. This was true among 62.4% of male respondents aged 18-44 years (n=429), and among 58.5% of respondents aged 45-69 years (n=447).

Of female respondents of both age groups (n=1372), 67.4% reported no transport-related physical activity. This was true among 67.2% of female respondents aged 18-44 years (n=739), and among 67.7% of respondents aged 45-69 years (n=633).

Figure 128. Percentage of all respondents that reported no recreation-related physical activity.



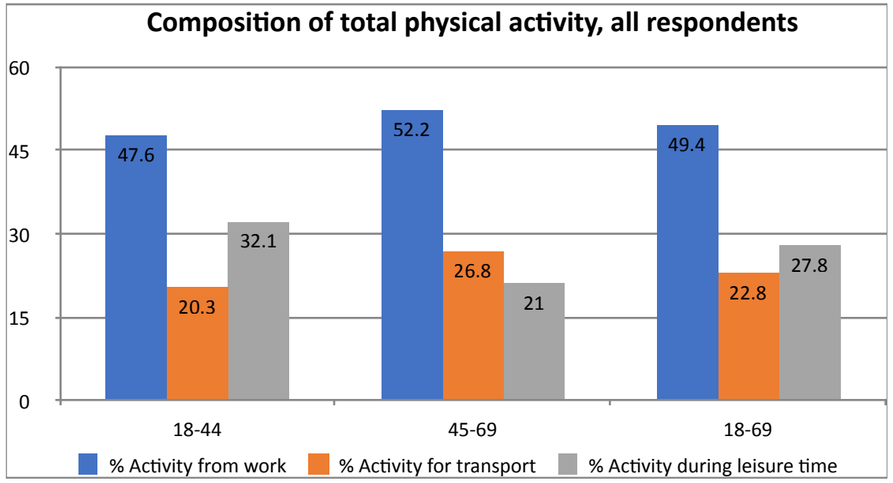
For 2248 respondents of both sexes and age groups, answers to the questions on levels andtypes of physical activity were analysed to determine those who did no recreation-related physical activity in a particular area of life. The rate of no recreation-related physical activity of respondents was 60.3%. The rate was 53.3% among those respondents aged 18-44 years (n=1168), and among 71.2% of respondents aged 45-69 years (n=1080).

Of male respondents of both age groups (n=876), 55.9% reported no recreation-related physical activity. This was true among 44.2% of male respondents aged 18-44 years (n=429), and among 74.5% of respondents aged 45-69 years (n=447).

Of female respondents of both age groups (n=1372), 64.4% reported no recreation-related physical activity. This was true among 61.7% of female respondents aged 18-44 years (n=739), and among 68.4% of respondents aged 45-69 years (n=633).

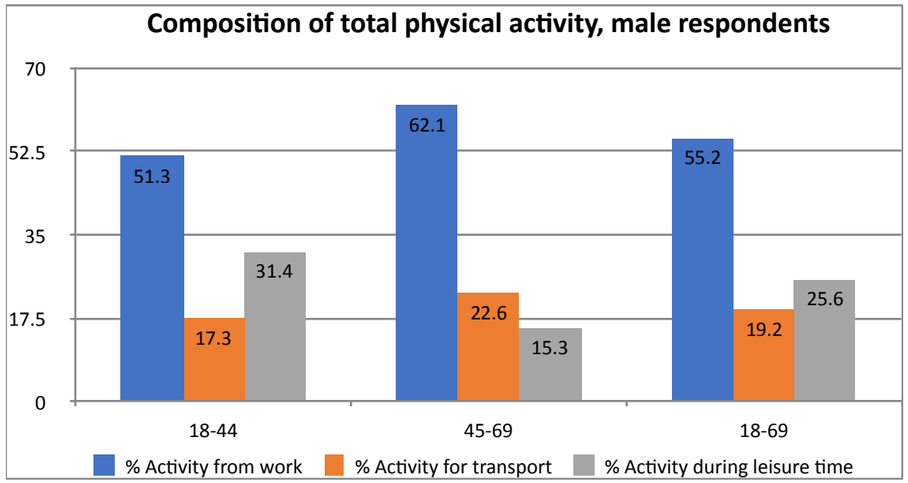
Questions on the survey instrument sought to ascertain the proportion of physical activity that each of activities at work, travel to and from spaces and recreational activities contributed to the respondents' total physical activity. The results were evaluated, and the following patterns were observed.

Figure 129. Percentage of work, transport and recreational activity contributing to total physical activity.



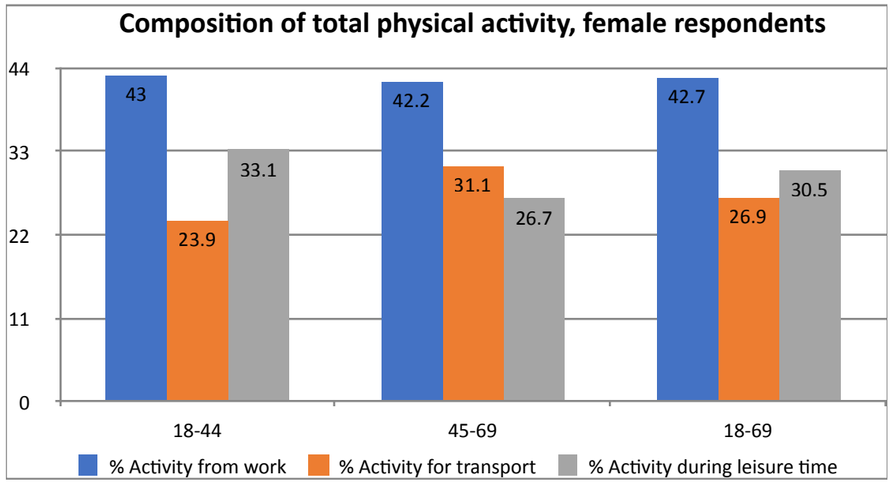
For all respondents that responded to the question (n=1598), activity from work contributed to 49.4% of physical activity, activity for transport for 22.8% and activity during leisure time accounted for 27.8% of the total physical activity by respondents. For all respondents aged 18-44 years (n=828), activity from work contributed to 47.6% of physical activity, activity for transport for 20.3% and activity during leisure time accounted for 32.1% of the total physical activity by respondents. For all respondents aged 45-69 years (n=770), activity from work contributed to 52.5% of physical activity, activity for transport for 26.8% and activity during leisure time accounted for 21.0% of the total physical activity by respondents.

Figure 130. Percentage of work, transport and recreational activity contributing to total physical activity.



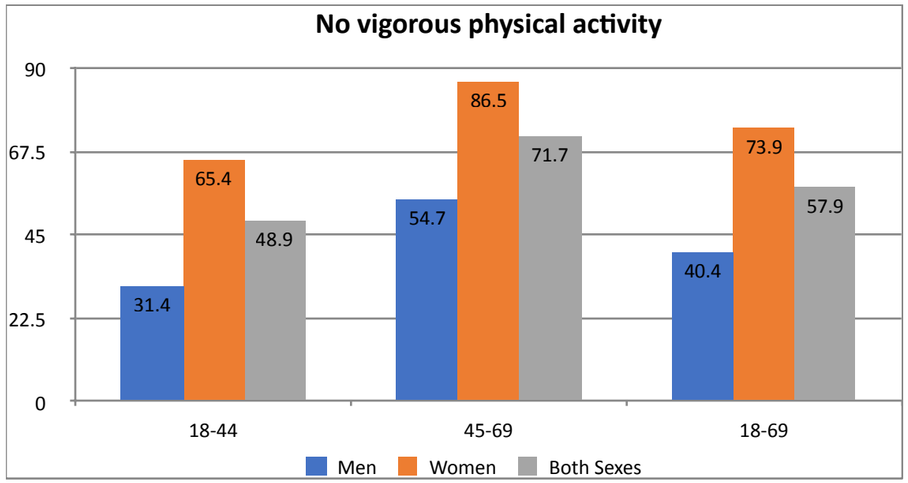
For male respondents that responded to the question (n=732), activity from work contributed to 55.2% of physical activity, activity for transport for 19.2% and activity during leisure time accounted for 25.6% of the total physical activity by respondents. For male respondents aged 18-44 years (n=365), activity from work contributed to 51.3% of physical activity, activity for transport for 17.3% and activity during leisure time accounted for 31.4% of the total physical activity by respondents. For male respondents aged 45-69 years (n=367), activity from work contributed to 62.1% of physical activity, activity for transport for 22.6% and activity during leisure time accounted for 15.3% of the total physical activity by respondents.

Figure 131. Percentage of work, transport and recreational activity contributing to total physical activity.



For female respondents that responded to the question (n=866), activity from work contributed to 42.7% of physical activity, activity for transport for 26.9% and activity during leisure time accounted for 30.5% of the total physical activity by respondents. For female respondents aged 18-44 years (n=463), activity from work contributed to 43.0% of physical activity, activity for transport for 23.9% and activity during leisure time accounted for 33.1% of the total physical activity by respondents. For female respondents aged 45-69 years (n=403), activity from work contributed to 42.2% of physical activity, activity for transport for 31.1% and activity during leisure time accounted for 26.7% of the total physical activity by respondents.

Figure 132. Percentage of respondents aged 18-69 years who report no vigorous physical activity, by both sexes and age groups.

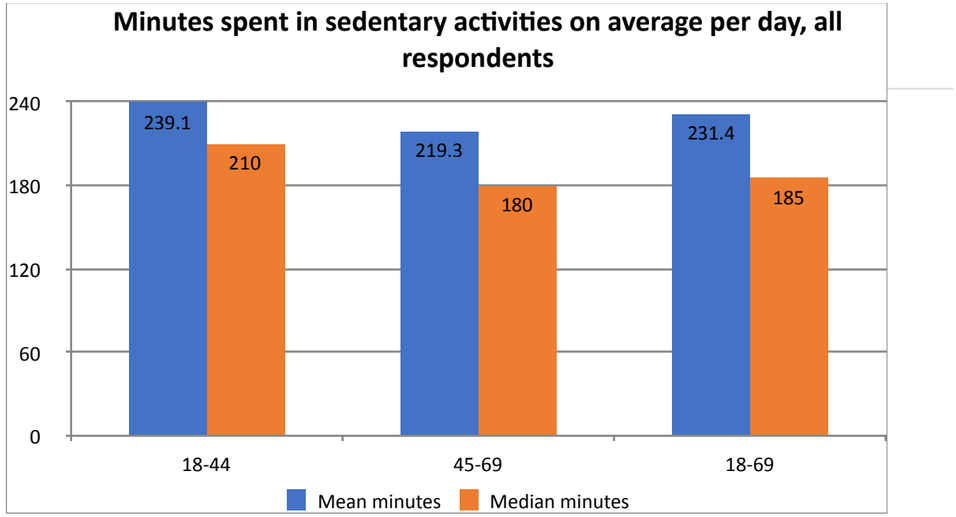


For 2248 respondents of both sexes and age groups, answers to the questions on levels andtypes of physical activity were analysed to determine those who did no vigorous physical activity. The rate of no vigorous physical activity of respondents was 57.9%. The rate was 48.9% among those respondents aged 18-44 years (n=1168), and among 71.7% of all respondents aged 45-69 years (n=1080).

Of male respondents of both age groups (n=876), 40.4% reported no vigorous physical activity. This was true among 31.4% of male respondents aged 18-44 years (n=429), and among 54.7% of male respondents aged 45-69 years (n=447).

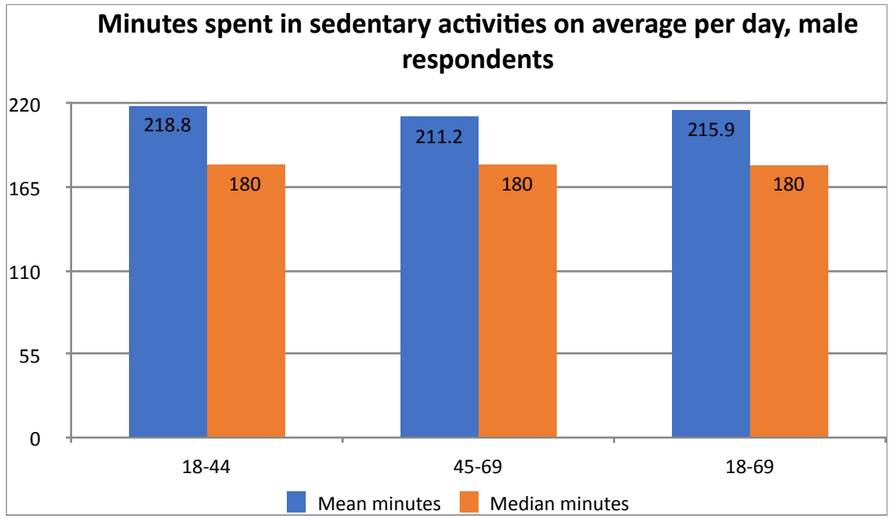
Of female respondents of both age groups (n=1372), 73.9% reported no vigorous physical activity. This was true among 65.4% of female respondents aged 18-44 years (n=739), and among 86.5% of female respondents aged 45-69 years (n=633).

Figure 133. Mean and Median Minutes spent in sedentary activities on average per day ofrespondents aged 18-69 years, by both sexes and age groups.



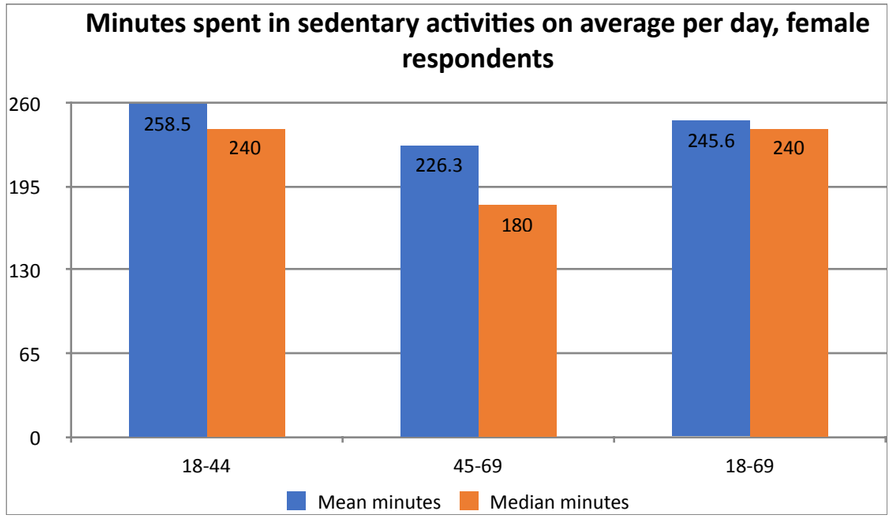
For 2247 respondents of both sexes and age groups, answers to the questions on levels andtypes of physical activity were collated to calculate the mean and median number of minutesof sedentary activities on average per day. The mean number of minutes of sedentary activities on average per day of respondents was 231.4 minutes while the median number of minutes was 185.0. The mean amount was 239.1 minutes, and the median amount was 210.0minutes among those respondents aged 18-44 years (n=1237). The mean amount was 219.3minutes, and the median amount was 180.0 minutes among respondents aged 45-69 years (n=1126).

Figure 134. Mean and Median Minutes spent in sedentary activities on average per day ofmale respondents aged 18-69 years, by both sexes and age groups.



Of male respondents both age groups (n=932), the mean number of minutes of sedentary activities on average per day of respondents was 215.9 minutes while the median number ofminutes was 180.0. The mean amount was 218.8 minutes, and the median amount was 180.0minutes among those male respondents aged 18-44 years (n=463). The mean amount was 211.2 minutes, and the median amount was 180.0 minutes among male respondents aged 45-69 years (n=469).

Figure 135. Mean and Median Minutes spent in sedentary activities on average per day offemale respondents aged 18-69 years, by both sexes and age groups.

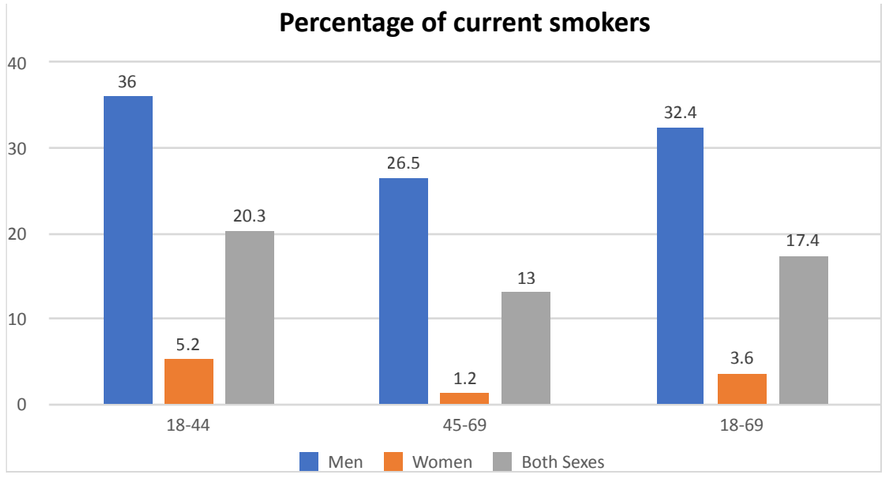


Of female respondents of both age groups (n=1431), the mean number of minutes of sedentary activities on average per day of respondents was 245.6 minutes while the mediannumber of minutes was 240.0. The mean amount was 258.5 minutes, and the median amount was 240.0 minutes among those female respondents aged 18-44 years (n=774). Themean amount was 226.3 minutes, and the median amount was 180.0 minutes among femalerespondents aged 45-69 years (n=657).

Tobacco Consumption and Exposure

This section provides a report of the survey results that speak to whether a respondent was classified as a current smoker or non-smoker, the age that the individual started smoking as wellas the present duration of smoking, whether the smoking implement was pre-manufactured, pipe tobacco, hand-rolled, cigarillo, shisha, other tobacco product, including chewing tobacco, the number of cigarettes smoked for cigarette smokers, attempts to stop second-hand exposureto second hand smoke, by sex and age group.

Figure 136. Contemporality of smoking status of respondents aged 18-69 years, by both sexes and age groups.



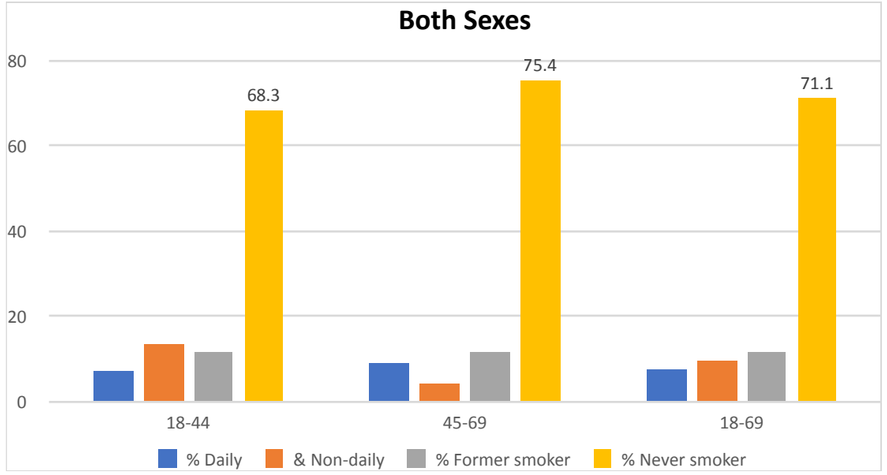
The term 'current smoker' is used to define respondents who reported smoking daily or less thandaily in the last 28 days (or non-daily smokers). Conversely, the term 'non-smoker' is used to define respondents who reported having never smoked or who had not smoked in more than 30 days.

Among all respondents (n=2360), 17.4% provided responses that classified them as current smokers. Among all respondents aged 18-44 years (n=1236), 20.3% provided responses that classified them as current smokers while 13.0% of all respondents aged 45-69 years (n=1124) provided responses that classified them as current smokers.

Among male respondents (n=931), 32.4% provided responses that classified them as current smokers. Among male respondents aged 18-44 years (n=463), 36.0% provided responses that classified them as current smokers while 26.5% of male respondents aged 45-69 years (n=468) provided responses that classified them as current smokers.

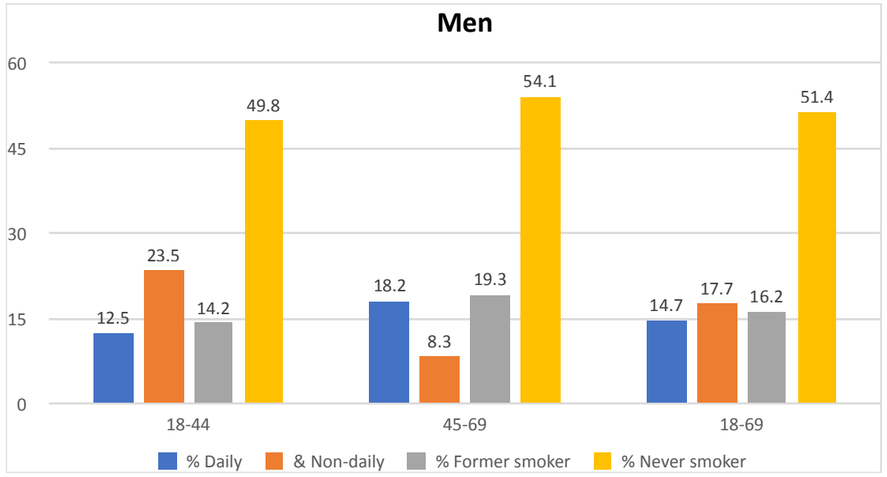
Among female respondents (n=1429), 3.6% provided responses that classified them as current smokers. Among female respondents aged 18-44 years (n=773), 5.2% provided responses that classified them as current smokers while 1.2% of female respondents aged 45-69 years (n=656) provided responses that classified them as current smokers

Figure 137. Smoking status of respondents aged 18-69 years, by both sexes and age groups.



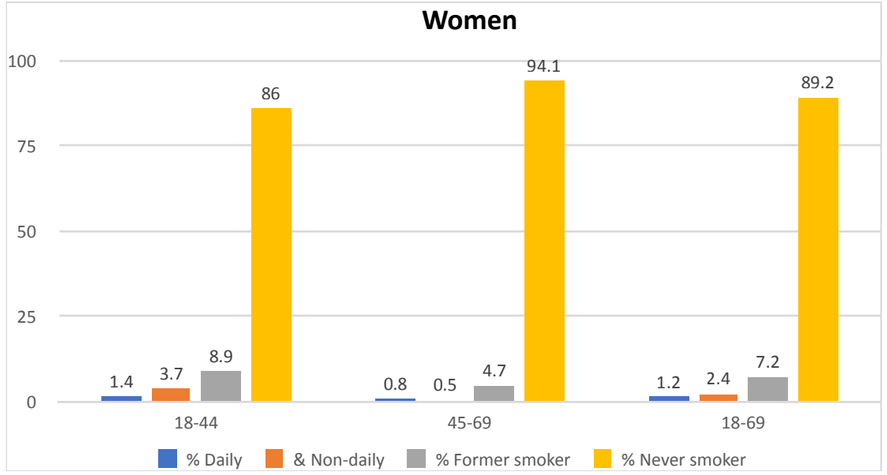
The results from the survey reflect that in considering by both sexes and age groups (n=2360), 7.7% of all respondents were daily-smokers, 9.8%were non-daily smokers, 11.5% were former smokers and 71.1% were never smokers. Among all respondents between the age of 18-44 years, 6.9% of all respondents were daily-smokers, 13.4% were non-daily smokers, 11.5% were former smokers and 68.3% were never smokers. Among all respondents aged 45-69 years 8.9% of all respondents were daily-smokers, 4.1% were non-daily smokers, 11.5% were former smokers and 75.4% were never smokers .

Figure 138. Smoking status of male respondents aged 18-69 years, by both age groups.



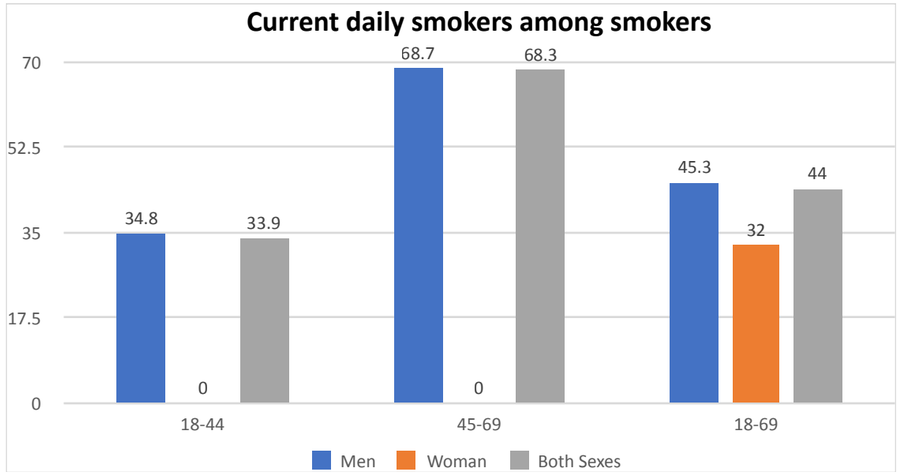
The results from the survey reflect that in considering by male respondents and both age groups (n=931), 14.7% of male respondents were daily-smokers, 17.7% were non-daily smokers, 16.2% were former smokers and 51.4% were never smokers. Among male respondents between the age of 18-44 years (n=463), 12.5% were daily-smokers, 23.5% were non-daily smokers, 14.2% were former smokers and 49.8% were never smokers. Among male respondents aged 45-69 years (n=468), 18.2% were daily-smokers, 17.7% were non-daily smokers, 16.2% were former smokers and 51.4% were never smokers.

Figure 139. Smoking status of female respondents aged 18-69 years, by both age groups.



The results from the survey reflect that in considering by female respondents and both age groups (n=1429), 1.2% of female respondents were daily-smokers, 2.4% were non-daily smokers, 7.2% were former smokers and 89.2% were never smokers. Among female respondents between the age of 18-44 years (n=773), 1.4% were daily-smokers, 3.7% were non-daily smokers, 8.9% were former smokers and 86.0% were never smokers. Among female respondents aged 45-69 years (n=656), 0.8% were daily-smokers, 0.5% were non-daily smokers, 4.7% were former smokers and 94.1% were never smokers.

Figure 140. Daily smokers among current smokers of respondents aged 18-69 years, by both sexes and age groups.

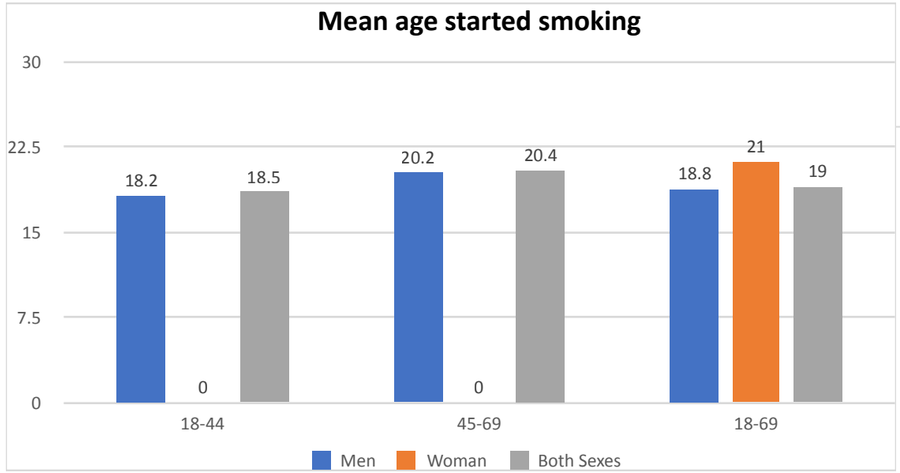


Among current smokers, further evaluation was done to identify the rate of individuals who smoked daily. For all respondents that were current smokers who answered the question on whether they were daily smokers (n=314), 44.0% were classified as daily smokers with a prevalence of 33.9% among current smokers aged 18-44 years (n=179) and68.3% among respondents aged 45-69 years (n=135).

Of male respondents who were current smokers (n=259), 45.3% were daily smokers which included 34.8% among those 18-44 years (n=141) and 68.7% of male respondents aged 45-69 years (n=118).

Of female respondents who were current smokers, the percentage of daily smokers was 32.4%. The validity for description by age groups for females who were daily smokers could not be assured.

Figure 141. Mean age started smoking of respondents aged 18-69 years, by both sexes and age groups.

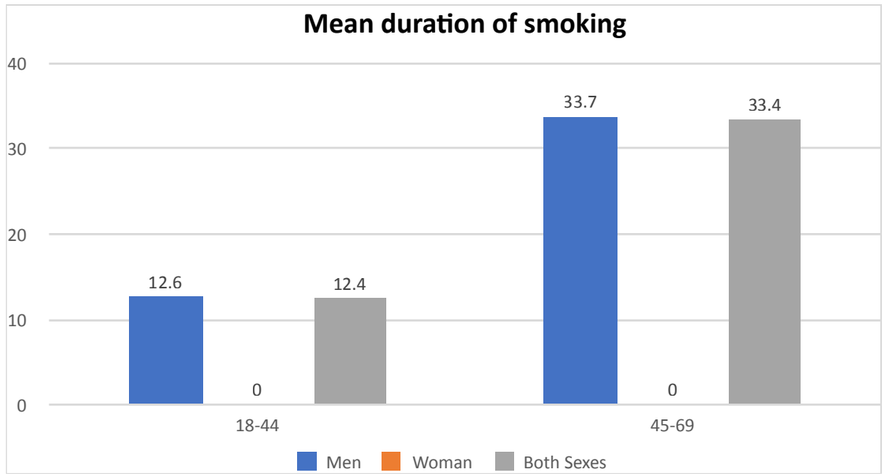


The mean age at which an individual commenced smoking was recorded for 302 respondents inthe survey. The result was determined to be 19.0 years for both sexes which reflected 18.5 years for respondents aged 18-44 years (n=172) and 20.4 years for those aged 45-69 years (n=130).

Of male respondents (n=251), the mean age when smoking commenced was reported as 18.8 years which was reflected as 18.2 years for those aged 18-44 years (n=137) and 20.2 years for those aged 45-69 years (n=114).

Of female respondents (n=51), the mean age for commencement of smoking was 21.2 years. The validity for description by age groups for females for mean age smoking started could not be assured.

Figure 142. Mean duration of smoking respondents aged 18-69 years, by both sexes and age groups.



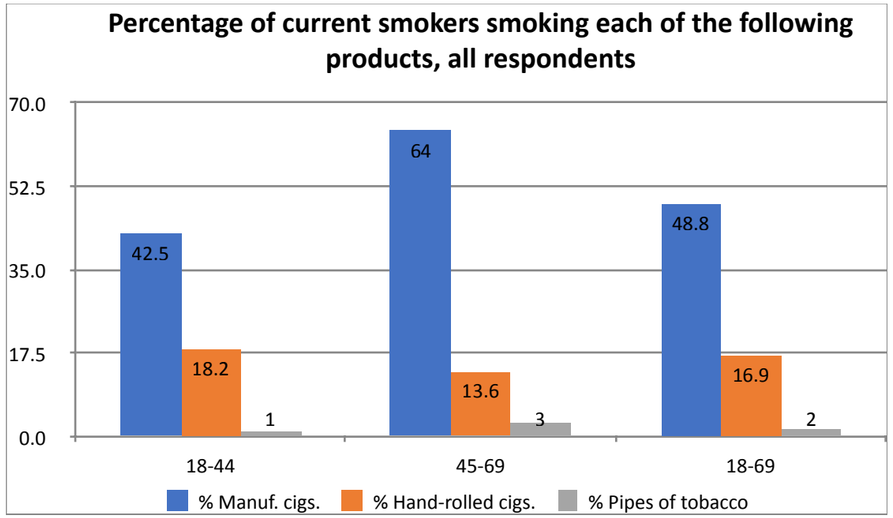
The mean duration for which an individual smoked was reported for 302 respondents in the survey. The result was determined to be 12.4 years for both sexes aged 18-44 years and for respondents aged 45-69 years it was 33.4 years.

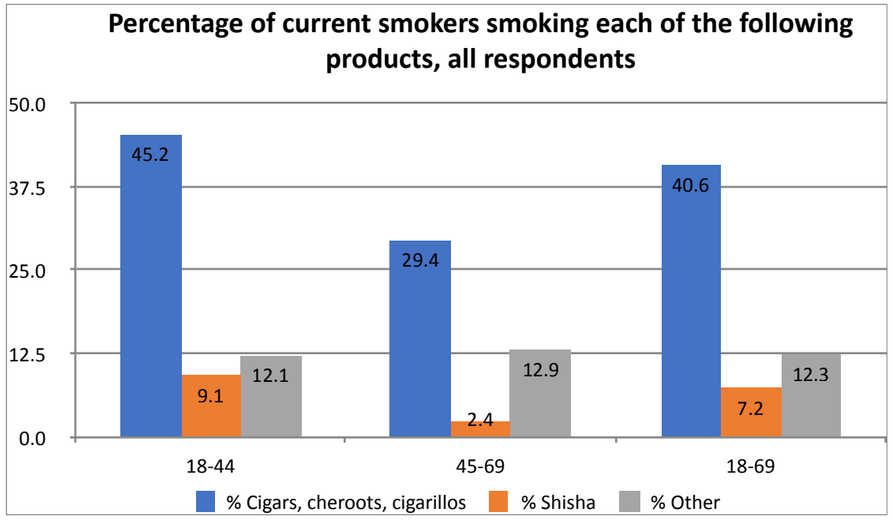
Of male respondents (n=251), the mean duration of smoking was determined to be 12.6 years for both sexes aged 18-44 years and for respondents aged 45-69 years it was 33.7 years.

Validity for description by age groups for female respondents for the mean duration of smokingcould not be assured

The survey further explored the type of tobacco that respondents smoked providing choices suchas manufactured, hand-rolled, pipe of tobacco, cigars/cigarillos, shisha and other.

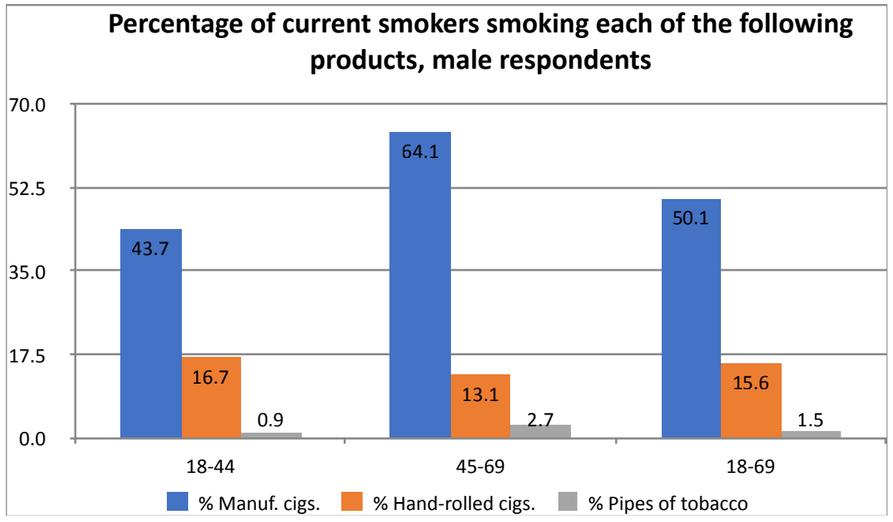
Figures 143a & 143b. Percentage and type of cigarette product smoked by respondents aged 18-69 years, by both sexes and age groups.

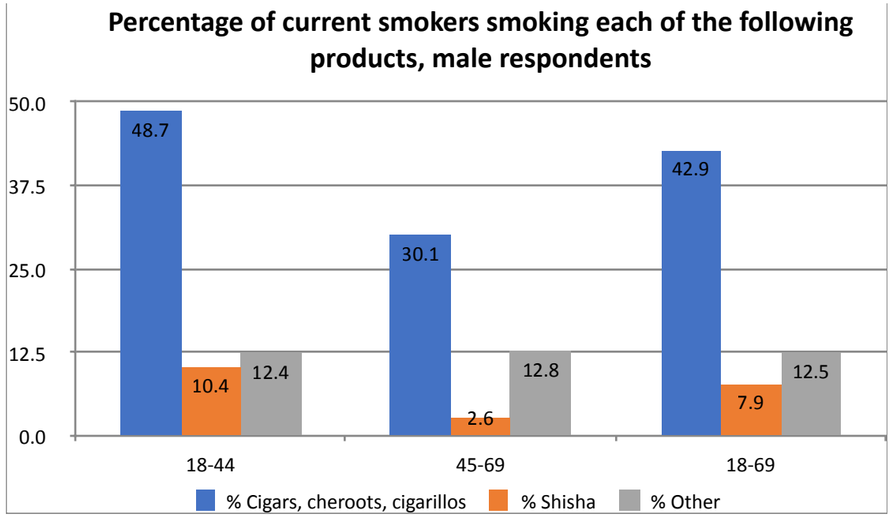




Among current smokers who responded (n=314), manufactured cigarettes were reportedly the tobacco product of choice for 48.8% of respondents, followed by cigars, cheroots, or cigarillos at40.6%, hand-rolled cigars at 16.9%, other at 12.3%, shisha at 7.2% and pipes of tobacco at 1.6%.Of respondents aged 18-44 years (n=179), the products of choice rated as follows – cigars, cheroot, and cigarillos at 45.2%, manufactured cigarettes at 42.5%, hand-rolled cigars 18.2%, other at 12.3%, shisha at 9.1% and pipes of tobacco at 1.0%. Of respondents aged 45-69 years (n=135) the choice of products used were as follows – manufactured cigarettes at 64.0%, cigars, cheroots, and cigarillos at 29.4% hand-rolled cigars at 13.6%, other at 12.9%, pipes of tobacco at 3.0% and shisha at 2.4%.

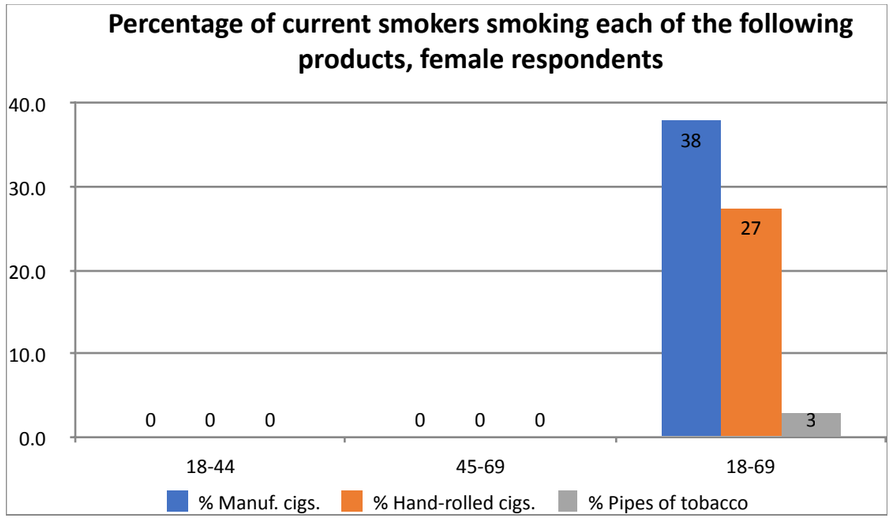
Figures 144a & 144b. Percentage and type of cigarette product smoked by male respondents aged 18-69 years, by age groups.

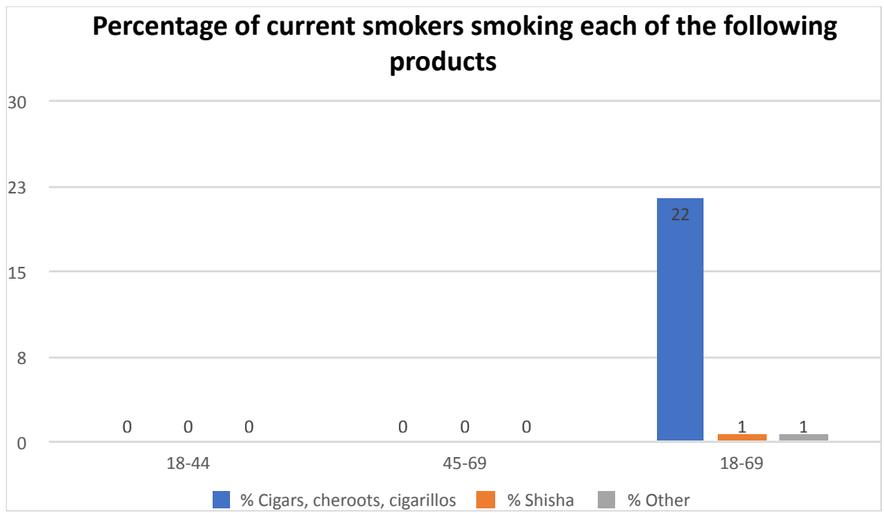




Among male respondents who were current smokers who responded (n=259), manufactured cigarettes were reportedly the tobacco product of choice for 50.1% of respondents, followed bycigars, cheroots, or cigarillos at 42.9%, hand-rolled cigars at 15.6%, other at 12.5%, shisha at 7.9%and pipes of tobacco at 1.5%. Of male respondents aged 18-44 years (n=141), the products of choice rated as follows – cigars, cheroot, and cigarillos at 48.7%, manufactured cigarettes at 43.7%, hand-rolled cigars 16.7%, other at 12.4%, pipes of tobacco at 1.5% and shisha at 7.9%. Of male respondents aged 45-69 years (n=118), the choice of products used were as follows – manufactured cigarettes at 64.1%, cigars, cheroots, and cigarillos at 30.1%, hand-rolled cigars at 13.1%, other at 12.8%, pipes of tobacco at 2.7%.and shisha at 2.6%

Figures 145a & 145b. Percentage and type of cigarette product smoked by female respondents aged 18-69 years, by age groups.

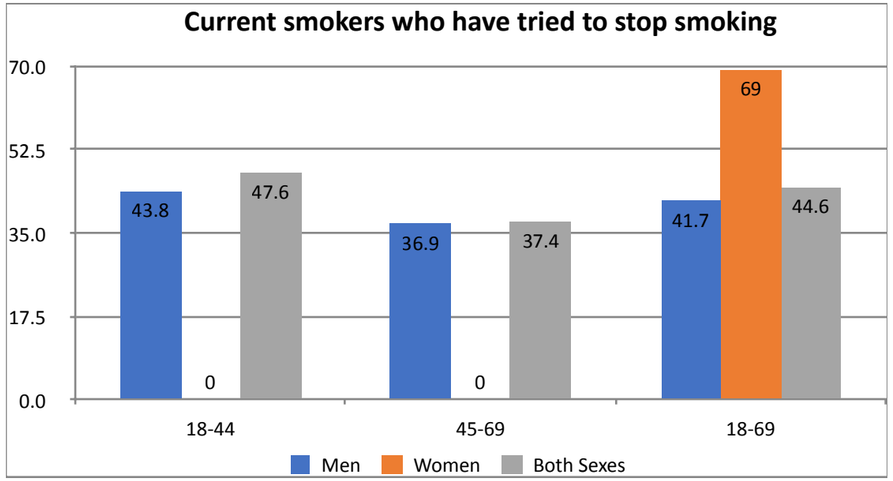




Among female respondents who were current smokers who responded (n=55), manufactured cigarettes were reportedly the tobacco product of choice for 37.9% of respondents, followed byhand-rolled cigars at 27.4%, cigars, cheroots, or cigarillos at 21.5%, other at 10.7%, pipes of tobacco at 2.8%, and shisha at 0.8%.

The validity for description by age groups for each type of product consumed for female current smoker respondents could not be assured.

Figure 146. Percentage of respondents aged 18-69 years who are current smokers who have triedto stop smoking, by both sexes and age groups.

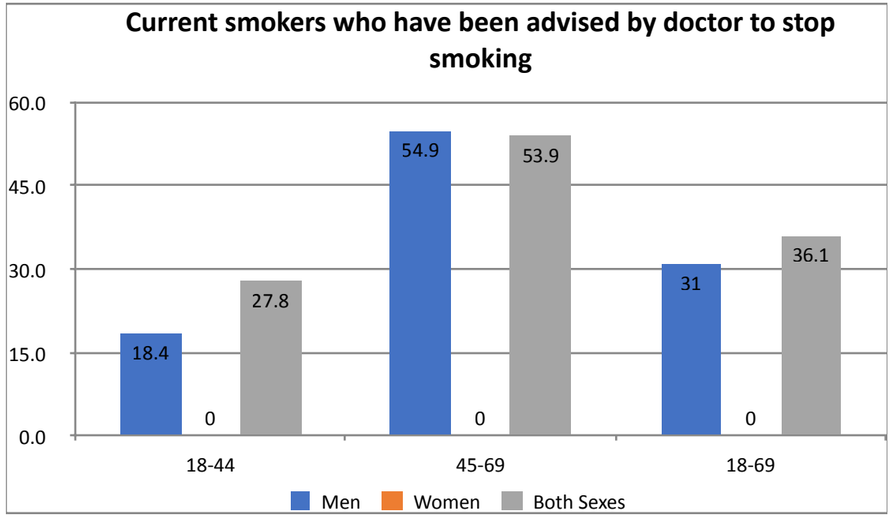


Data was also obtained on individuals who were current smokers and reported having tried to stop smoking. For the response received (n=314), 44.6% reported having tried to stop smoking.For those aged 18-44 years (n=179), the rate was 47.6% and for those that are 45-69 years (n=135), the rate was 37.4%.

Data from male respondents who are current smokers (n=259) reflect that 41.7% tried to stop smoking. Of current smokers who are males that tried to stop smoking, 43.8% were between 18-44 years (n-141) and 36.9% were between 45-69 years (n=118).

For current smokers that were female (n=55), 69.3% reported having tried to stop smoking. The validity for description by age groups for female current smoker respondents who tried to stop smoking could not be assured.

Figure 147. Percentage of respondents aged 18-69 years who are current smokers and would havetried to stop smoking after being advised to stop smoking by a doctor by both sexes and age groups.

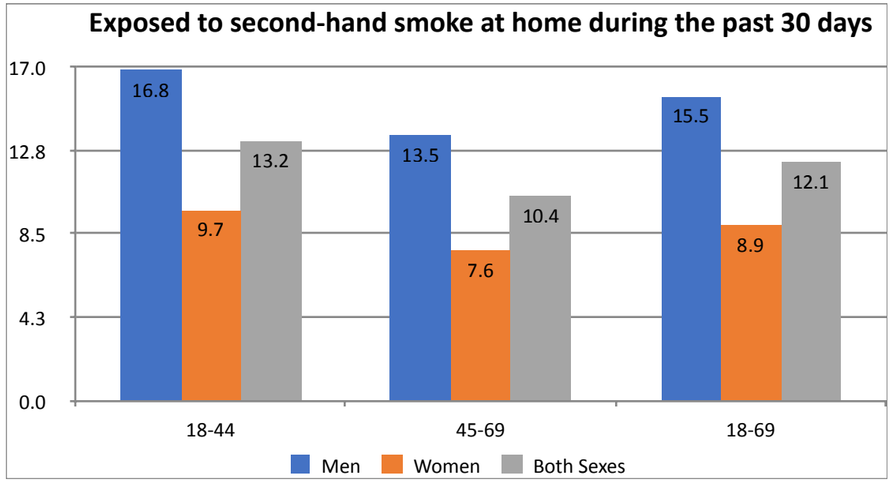


There were 258 respondents who described themselves as current smokers and who reported having been advised by a doctor to stop smoking. This reflected 36.1% of current smokers. Current smokers who were advised by a doctor to stop smoking that were 18-44 years (n=140) represented 27.8%. Current smokers who were aged 45-69 years (n=118) and were advised to stop smoking by a doctor was 53.9%

There were 212 male respondents who described themselves as current smokers and who reported having been advised by a doctor to stop smoking. This reflected 31.0% of current male smokers. Current male smokers who were advised by a doctor to stop smoking that were 18-44 years (n=109) represented 18.4%. Current male smokers who were aged 45-69 years (n=103) and were advised to stop smoking by a doctor was 54.9%.

The validity for description for female respondents who were advised to stopped smoking could notbe assured.

Figure 148. Percentage of respondents aged 18-69 years who are exposed to secondhand smoke at home during the past 30 days, by both sexes and age groups.



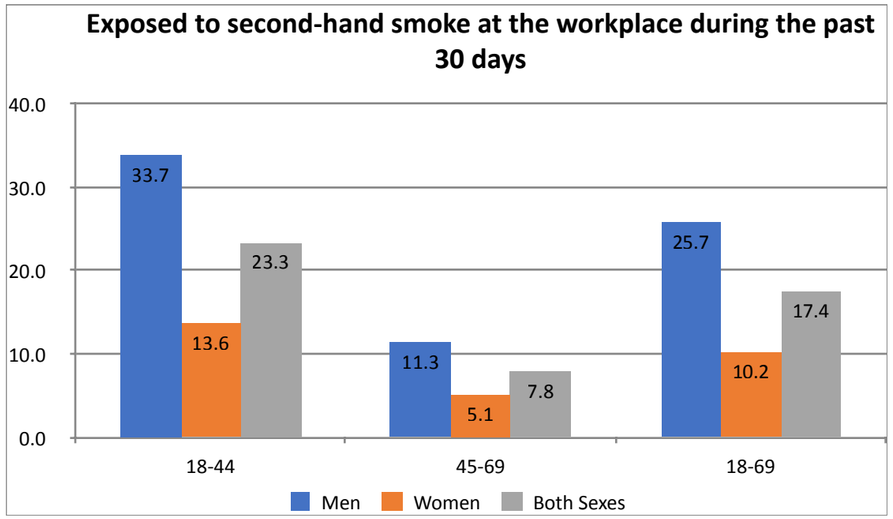
In assessing answers to the question about second-hand smoke in the home, answers from 2360 respondents of both sexes and age groups were evaluated. For both sexes and age groups, 12.1%reported that they were exposed to second-hand smoke at home. For both sexes aged 18-44 years (n=1236), the rate of exposure was 13.2%, and 10.4% of respondents aged 45-69 years (n=1124).

Exposure to second-hand smoke in the home during the past 30 days of male respondents (n=931) was reported at a rateof 15.5%. Of male respondents aged 18-44 years (n=463), the rate of exposure was 16.8%, and 13.5% of respondents aged 45-69 years (n=468).

Exposure to second-hand smoke in the home during the past 30 days of female respondents (n=1429) was reported at arate of 8.9%. Of female respondents aged 18-44 years (n=773), the rate of exposure was 9.7%, and 7.6% ofrespondents aged 45-69 years (n=656).

The answer to this question was based on whether someone at the workplace was a current smoker.

Figure 149. Percentage of respondents aged 18-69 years who are exposed to secondhand smokeat the work place during the past 30 days, by both sexes and age groups.

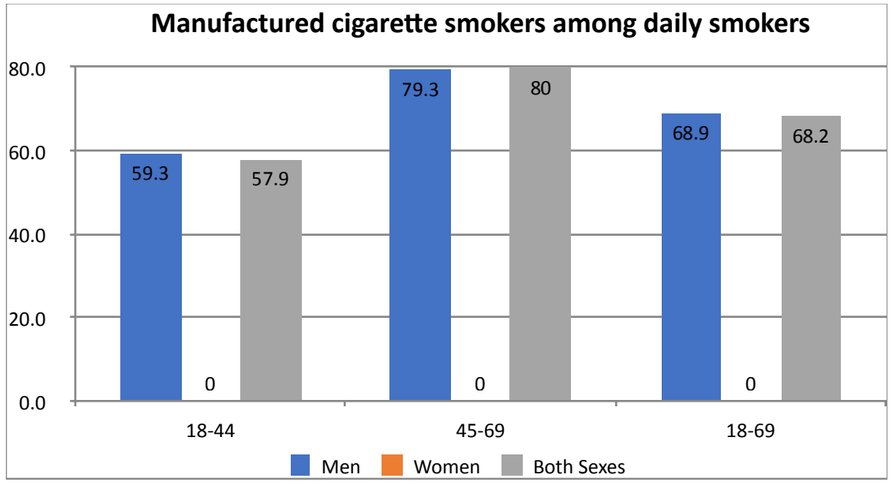


In assessing answers to the question about second-hand smoke exposure in the work place during the past 30 days, answers from 2164respondents of both sexes and age groups were evaluated. For both sexes and age groups,17.4% reported that they were exposed to second-hand smoke in the work place during the past 30 days. For both sexes aged 18-44 years (n=1136), the rate of exposure was 23.3%, and 7.8% of respondents aged 45-69 years (n=1028).

Exposure to second-hand smoke in the work place during the past 30 days of male respondents (n=831) was reported at a rate of 25.7%. Of male respondents aged 18-44 years (n=418), the rate of exposure was 33.7%, and 11.3% ofrespondents aged 45-69 years (n=413).

Exposure to second-hand smoke in the work place during the past 30 days of female respondents (n=1333) was reported at arate of 10.2%. Of female respondents aged 18-44 years (n=718) the rate of exposure was 13.6%, and 5.1%of respondents aged 45-69 years (n=615).

Figure 150. Percentage of daily smokers who smoke manufactured cigarettes.

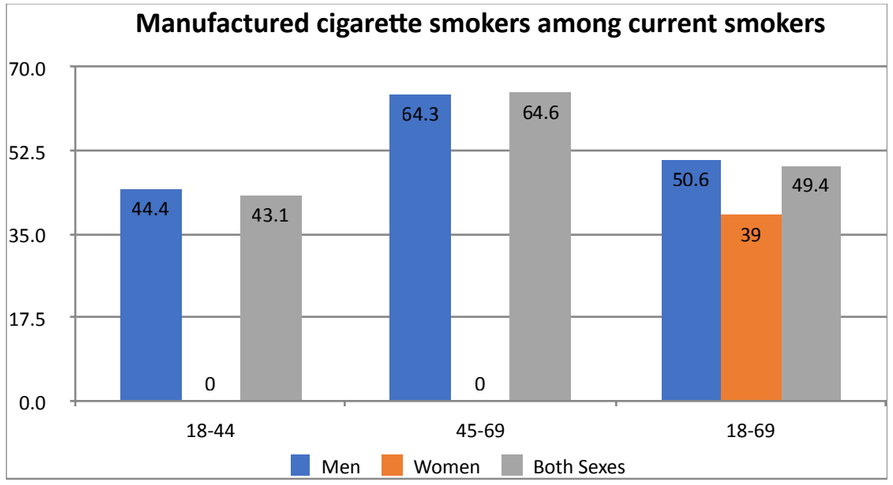


A questionnaire on the survey instrument inquired whether a respondent was a daily smoker and whether the respondent smoked manufactured cigarettes. The following responses were observed. Among all daily smokers who responded, 68.2% (n=184), reported the use of manufactured cigarettes. For all daily smokers aged 18-44 years (n=100) who responded, 57.9% used manufactured cigarettes and 80.0% used manufactured cigarettes among all respondents aged 45-69 years (n=84) who responded to the question.

For all male daily smokers who answered the question (n=153), 68.9% used manufactured cigarettes. For male daily smokers aged 18-44 years (n=153) who responded, 59.3% used manufactured cigarettes and 79.3% used manufactured cigarettes among male daily smokers aged 45-69 years (n=84) who responded to the question.

The validity of responses for female daily smokers on the use of manufactured cigarettes could not be assured.

Figure 151. Percentage of current smokers who smoke manufactured cigarettes.



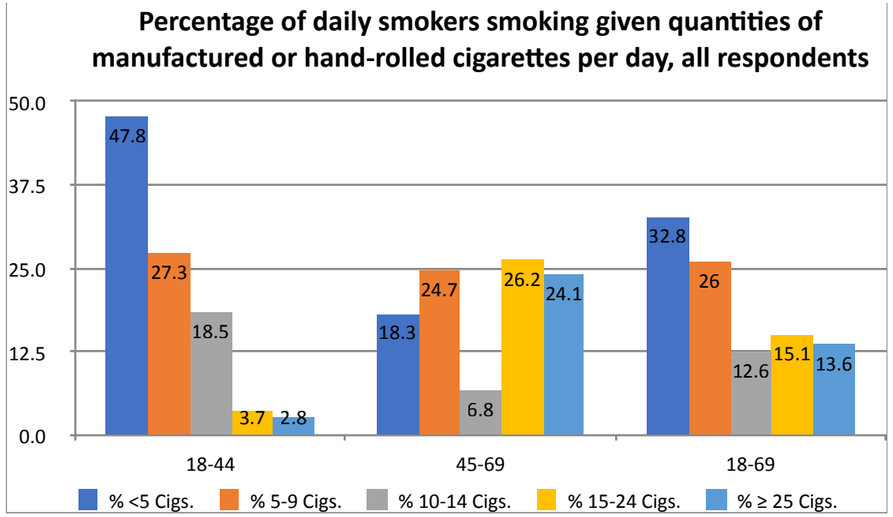
A questionnaire on the survey instrument inquired whether a respondent was a current smoker and whether the respondent smoked manufactured cigarettes. The following responses were observed. Among all current smokers who responded, 49.4% (n=307), reported the use of manufactured cigarettes. For all current smokers aged 18-44 years (n=174) who responded, 43.1% used manufactured cigarettes and 64.6% used manufactured cigarettes among all respondents aged 45-69 years (n=133) who responded to the question.

For all male current smokers who answered the question (n=254), 50.6% used manufactured cigarettes. For male current smokers aged 18-44 years (n=137) who responded, 44.4% used manufactured cigarettes and 64.3% used manufactured cigarettes among male current smokers aged 45-69 years (n=117) who responded to the question.

For all female current smokers who answered the question (n=53), 38.9% used manufactured cigarettes. The validity of responses for female current smokers by age groups on the use of manufactured cigarettes could not be assured.

A question on the survey sought to ascertain the amount of manufactured or hand-rolled cigarettes consumed per day by daily smokers. The following results were observed.

Figure 152. Percentage of all daily smokers smoking given quantities of manufactured or hand-rolled cigarettes per day by both sexes and age groups.

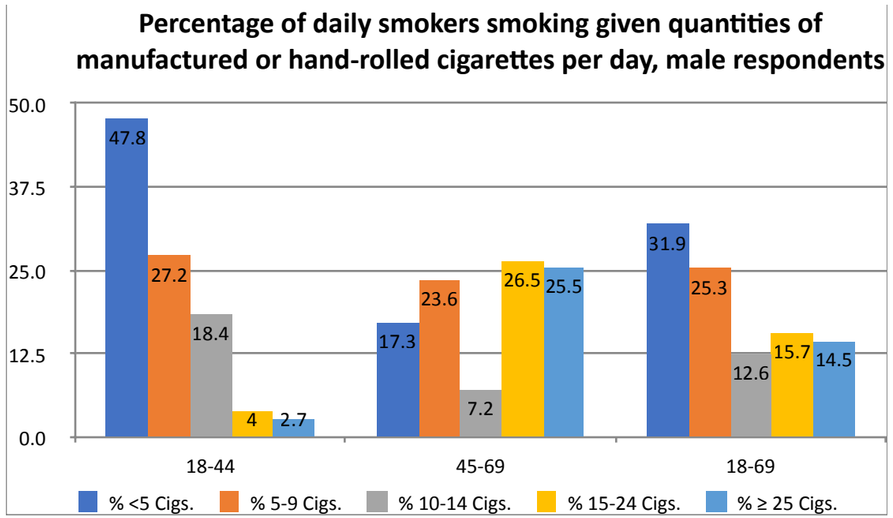


Among daily smokers, the percentage and daily consumption for all respondents (n=142) was 32.8% for less than five cigarettes per day, 26.0% consumed between five and nine cigarettes per day, 12.6% consumed 10-14 cigarettes per day, 15.1% consumed 15-24 cigarettes er day and 13.6% consumed 25 or more cigarettes per day.

Of all respondents aged 18-44 years (n=71), 47.8% for less than five cigarettes per day, 27.3% consumed between five and nine cigarettes per day, 18.5% consumed 10-14 cigarettes per day, 3.7% consumed 15-24 cigarettes er day and 2.8% consumed 25 or more cigarettes per day.

Of all respondents aged 45-69 years (n=71), 18.3% for less than five cigarettes per day, 24.7% consumed between five and nine cigarettes per day, 6.8% consumed 10-14 cigarettes per day, 26.2% consumed 15-24 cigarettes er day and 24.1% consumed 25 or more cigarettes per day.

Figure 153. Percentage of male daily smokers smoking given quantities of manufactured or hand-rolled cigarettes per day by both age groups.



Among male daily smokers, the percentage and daily consumption for all respondents (n=117) was 31.9% for less than five cigarettes per day, 25.3% consumed between five and nine cigarettes per day, 12.6% consumed 10-14 cigarettes per day, 15.7% consumed 15-24 cigarettes er day and 14.5% consumed 25 or more cigarettes per day.

Of male respondents aged 18-44 years (n=57), 47.8% for less than five cigarettes per day, 27.2% consumed between five and nine cigarettes per day, 18.4% consumed 10-14 cigarettes per day, 4.0% consumed 15-24 cigarettes er day and 2.7% consumed 25 or more cigarettes per day.

Of all respondents aged 45-69 years (n=60), 17.3% for less than five cigarettes per day, 23.6% consumed between five and nine cigarettes per day, 7.2% consumed 10-14 cigarettes per day, 26.5% consumed 15-24 cigarettes er day and 25.5% consumed 25 or more cigarettes per day.

Figure 154. Percentage of female daily smokers smoking given quantities of manufactured or hand-rolled cigarettes per day by both age groups.

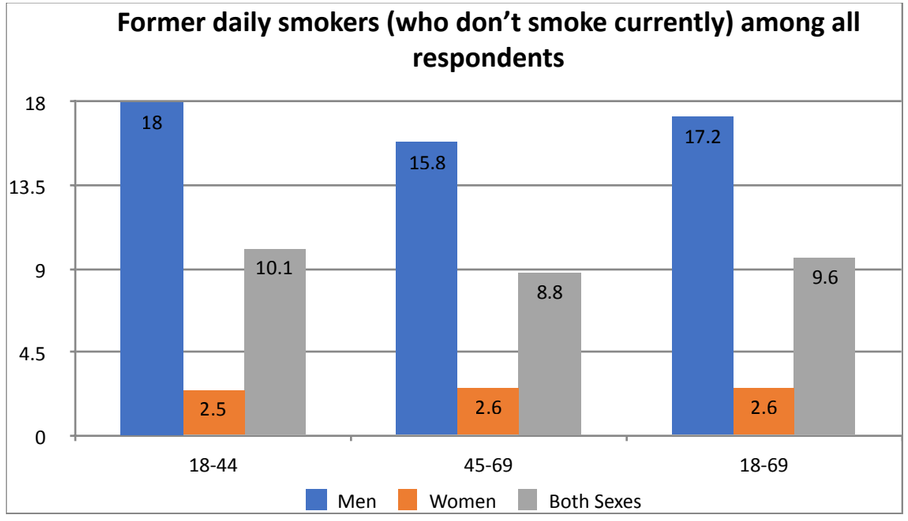
Percentage of daily smokers smoking given quantities of manufactured or hand-rolled cigarettes per											
Age Group (years)	**Women**										
	n	% <5 Cigs.	95% CI	% 5-9 Cigs.	95% CI	% 10-14 Cigs.	95% CI	% 15-24 Cigs.	95% CI	% ≥ 25 Cigs.	95% CI
18-44	--	--	--	--	--	--	--	--	--	--	--
45-69	--	--	--	--	--	--	--	--	--	--	--
18-69	--	--	--	--	--	--	--	--	--	--	--

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

The validity of calculations for the estimation of the percentage of female daily smokers by quantities of manufactured or hand-rolled cigarettes smoked each day could not be assured.

Responses from respondents who were characterized by their responses as former daily smokers were evaluated to ascertain their prevalence among all respondents, their prevalence among ever daily smokers and the mean number of years since they ceased smoking. The results are recorded in the figures and descriptions below.

Figure 155. Percentage of former daily smokers (who don't smoke currently) among all respondents.

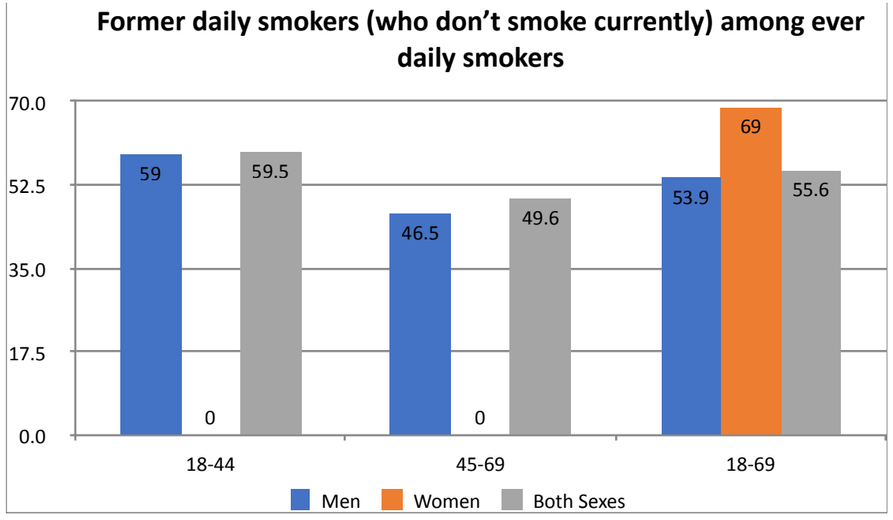


Among all respondents (n=2360), 9.6% of responses indicated that the respondent was a former daily smoker who did not currently smoke. For all respondents aged 18-44 years (n=1236), the percentage of former daily smokers who did not currently smoke was 10.1% while the proportion of former daily smokers who did not currently smoke of all respondents aged 45-69 years (n=1124) was 8.8%.

Among all male respondents (n=931), 17.2% of responses indicated that the respondent was a former daily smoker who did not currently smoke. For male respondents aged 18-44 years (n=463), the percentage of former male daily smokers who did not currently smoke was 18.0% while the proportion of former male daily smokers who did not currently smoke of all respondents aged 45-69 years (n=468) was 15.8%.

Among all respondents (n=1429), 2.6% of responses indicated that the respondent was a former daily smoker who did not currently smoke. For all respondents aged 18-44 years (n=773), the percentage of former daily smokers who did not currently smoke was 2.5% while the proportion of former daily smokers who did not currently smoke of all respondents aged 45-69 years (n=656) was 2.6%.

Figure 156. Percentage of former daily smokers (who don't smoke currently) among ever daily smokers daily smokers manufactured cigarettes.

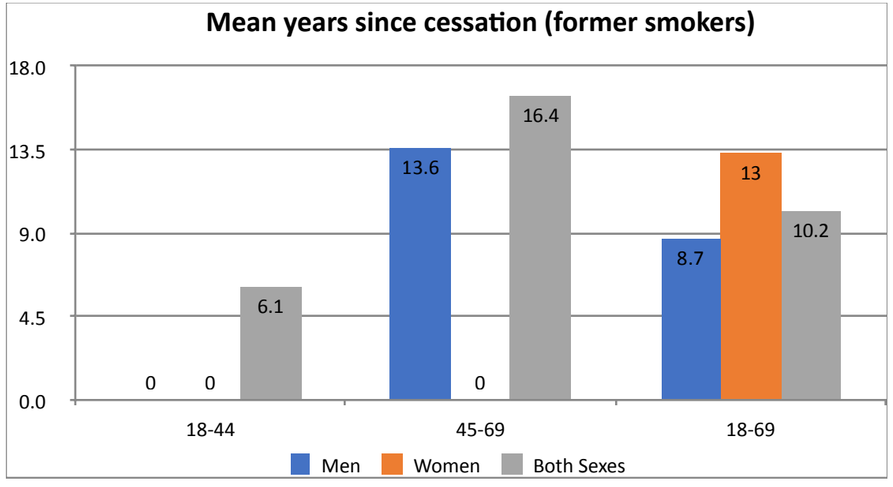


Among all respondents who were ever daily smokers (n=293), 55.6% of responses indicated that the respondent was a former daily smoker who did not currently smoke. For all respondents who were ever daily smokers aged 18-44 years (n=153), the percentage of former daily smokers who did not currently smoke of who were ever daily smokers was 59.5% while the proportion of former daily smokers who did not currently smoke of all who were ever daily smokers aged 45-69 years (n=140) was 49.6%.

Among male respondents who were ever daily smokers (n=230), 53.9% of responses indicated that the respondent was a former daily smoker who did not currently smoke. For all respondents who were ever daily smokers aged 18-44 years (n=116), the percentage of former daily smokers who did not currently smoke of who were ever daily smokers was 59.0% while the proportion of former daily smokers who did not currently smoke of all who were ever daily smokers aged 45-69 years (n=114) was 46.5%.

Among female respondents who were ever daily smokers (n=63), 68.8% of responses indicated that the respondent was a former daily smoker who did not currently smoke. The validity of the estimations of the percentage of former female daily smokers who did not currently smoke of all who were ever daily smokers by age groups could not be assured.

Figure 157. Mean years since cessation for former daily smokers.



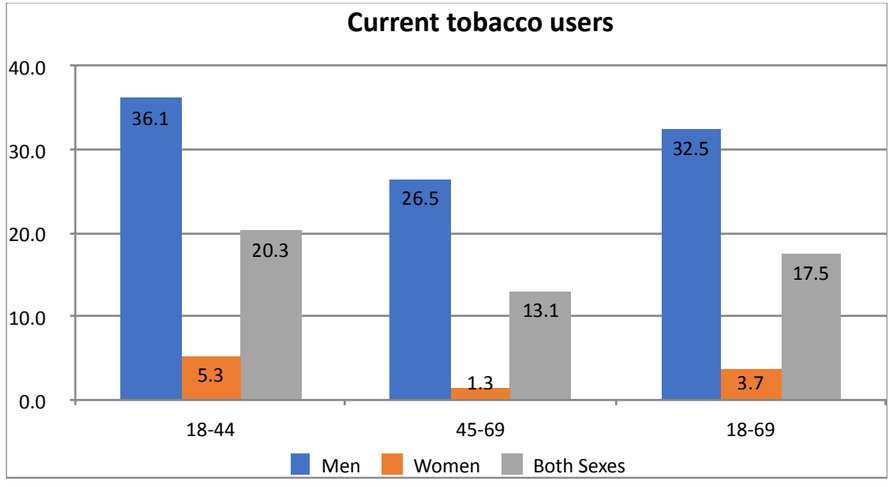
The mean duration of years for which a former daily smoker who currently did not smoke had ceased smoking (n=167) was 10.2 years. The result reflected 6.1 years for respondents aged 18-44 years (n=81) and 16.4 years for those aged 45-69 years (n=86).

For male respondents (n=113), the mean duration of years for which a former daily smoker who currently did not smoke had ceased smoking was 8.7% and 13.6% for former male daily smokers who did not currently smoke and who were aged 45-69 years (n=65). The validity of the result for male respondents aged 18-44 years and the mean duration of years since cessation of smoking could not be assured

For female respondents (n=54), the mean duration of years for which a former daily smoker who currently did not smoke had ceased smoking was 13.3%. The validity of the mean duration of years that a former female daily smoker who did not currently smoke had ceased smoking by age groups could not be assured.

The following Figures and description provide information on the prevalence of current and daily tobacco users. A current tobacco user is one who has sed any tobacco product in the past 30 days.

Figure 158. Prevalence of current tobacco users.

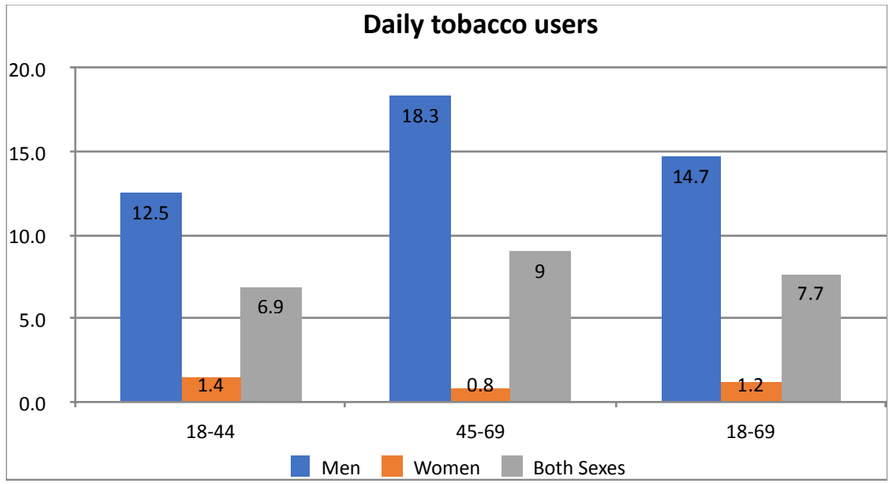


The prevalence of current tobacco users among all respondents (n=2360) was reported at 17.5%. For all respondents aged 18-44 years (n=1236) the prevalence was 20.3% with 13.1% being the prevalence for all respondents aged 45-69 years (n=1124).

The prevalence of current tobacco users among male respondents (n=931) was reported at 32.5%. For male respondents aged 18-44 years (n=463) the prevalence was 36.1% with 26.5% being the prevalence for male respondents aged 45-69 years (n=468).

The prevalence of current tobacco users among female respondents (n=1429) was reported at 3.7%. For female respondents aged 18-44 years (n=773) the prevalence was 5.3% with 1.3% being the prevalence for female respondents aged 45-69 years (n=656).

Figure 159. Prevalence of daily tobacco users.



The prevalence of daily tobacco users among all respondents (n=2360) was reported at 7.7%. For all respondents aged 18-44 years (n=1236) the prevalence was 6.9% with 9.0% being the prevalence for all respondents aged 45-69 years (n=1124).

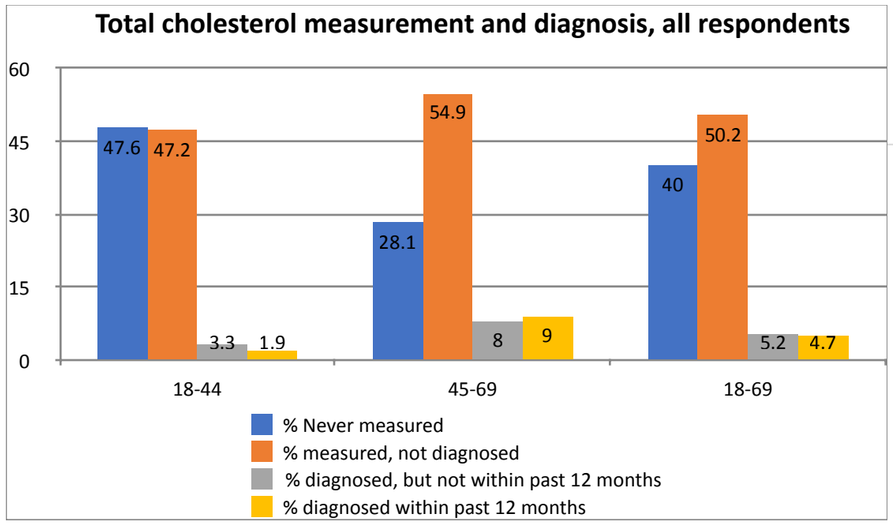
The prevalence of daily tobacco users among male respondents (n=931) was reported at 14.7%. For male respondents aged 18-44 years (n=463) the prevalence was 12.5% with 18.3% being the prevalence for male respondents aged 45-69 years (n=468).

The prevalence of daily tobacco users among female respondents (n=1429) was reported at 1.2%. For female respondents aged 18-44 years (n=773) the prevalence was 1.4% with 0.8% being the prevalence for female respondents aged 45-69 years (n=656).

Hypercholesteremic

The measurement of total blood cholesterol levels is a recommendation among all individuals atleast annually. Questions in the survey questionnaire inquired about the experience of respondents in getting their blood cholesterol levels measured with response options being never measured, measured but not given a diagnosis, diagnosed but not within the past 12 months, and diagnosed within the past 12 months. The following results were obtained.

Figure 160. Status of total blood cholesterol measurement and/or diagnosis among respondentsaged 18-69 years, by both sexes and age groups.

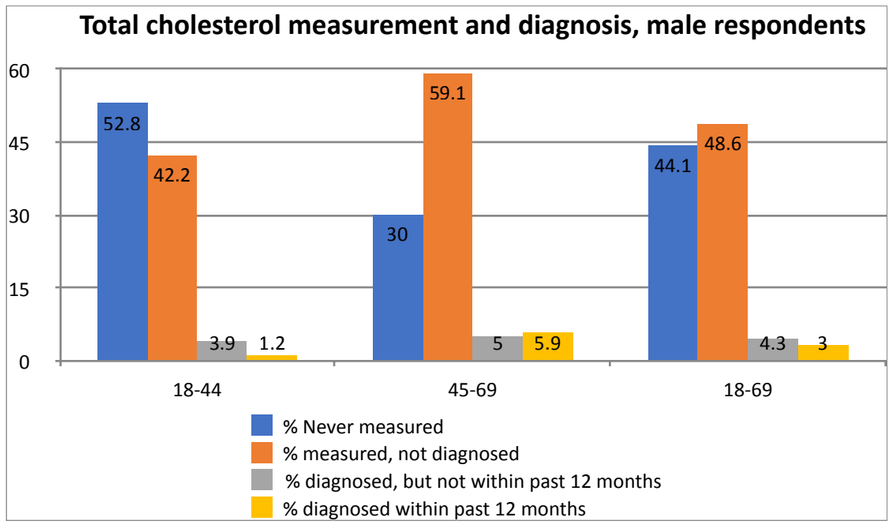


Of respondents of both sexes (n=2360), 40.0% reported never having their total blood cholesterollevels measured, 50.2% reported having had their total blood cholesterol levels measured but not being given a diagnosis, 5.2% reported having been diagnosed with raised total cholesterol more than 12 months ago, and 4.7% reported being diagnosed with raised total cholesterol in the past 12 months.

Of respondents aged 18-44 years (n=1236), 47.6% reported never having their total blood cholesterol levels measured, 47.2% reported having had their total blood cholesterol levels measured but not being given a diagnosis, 3.3% reported having been diagnosed with raised totalcholesterol more than 12 months ago, and 1.9% reported being diagnosed with raised total cholesterol in the past 12 months.

Of respondents aged 45-69 years (n=1124), 28.1% reported never having their total blood cholesterol levels measured, 54.9% reported having had their total blood cholesterol levels measured but not being given a diagnosis, 8.0% reported having been diagnosed with raised totalcholesterol more than 12 months ago, and 9.0% reported being diagnosed with raised total cholesterol in the past 12 months.

Figure 161. Status of total blood cholesterol measurement and/or diagnosis among male respondents aged 18-69 years, by age groups.

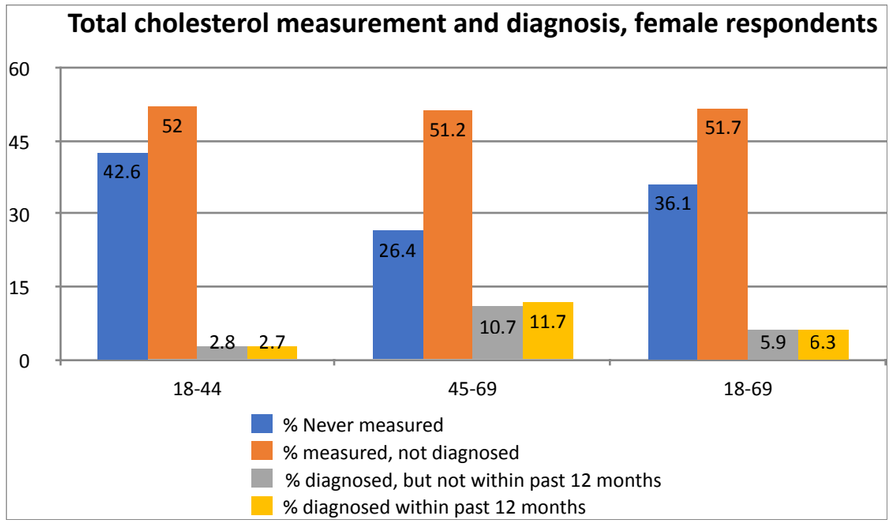


Of male respondents (n=931), 44.1% reported never having their total blood cholesterol levels measured, 48.6% reported having had their total blood cholesterol levels measured but not beinggiven a diagnosis, 4.3% reported having been diagnosed with raised total cholesterol more than12 months ago, and 3.0% reported being diagnosed with raised total cholesterol in the past 12 months.

Of male respondents aged 18-44 years (n=463), 52.8% reported never having their total blood cholesterol levels measured, 42.2% reported having had their total blood cholesterol levels measured but not being given a diagnosis, 3.9% reported having been diagnosed with raised totalcholesterol more than 12 months ago, and 1.2% reported being diagnosed with raised total cholesterol in the past 12 months.

Of male respondents aged 45-69 years (n=468), 30.0% reported never having their total blood cholesterol levels measured, 59.1% reported having had their total blood cholesterol levels measured but not being given a diagnosis, 5,0% reported having been diagnosed with raised totalcholesterol more than 12 months ago, and 5.9% reported being diagnosed with raised total cholesterol in the past 12 months.

Figure 162. Status of total blood cholesterol measurement and/or diagnosis among femalerespondents aged 18-69 years, by age groups.

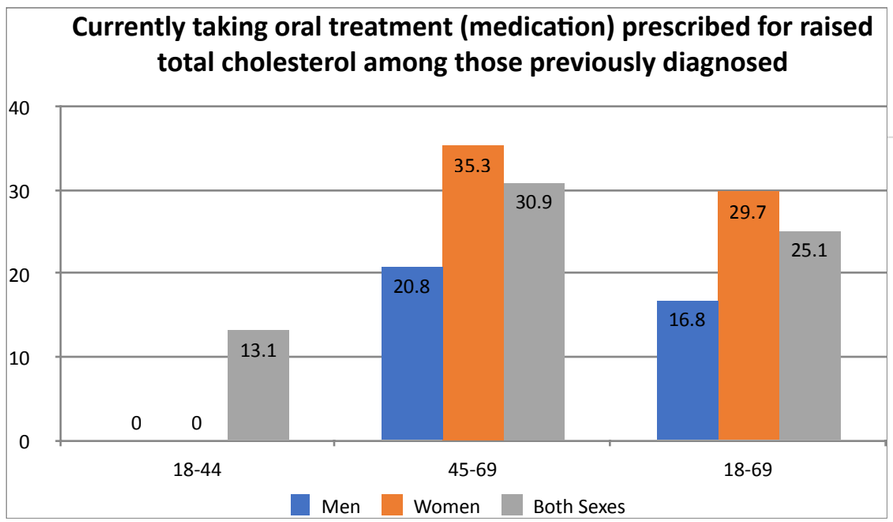


Of female respondents (n=1429), 36.1% reported never having their total blood cholesterol levelsmeasured, 51.7% reported having had their total blood cholesterol levels measured but not beinggiven a diagnosis, 5.9% reported having been diagnosed with raised total cholesterol more than12 months ago, and 6.3% reported being diagnosed with raised total cholesterol in the past 12 months.

Of female respondents aged 18-44 years (n=773), 42.6% reported never having their total bloodcholesterol levels measured, 52.0% reported having had their total blood cholesterol levels measured but not being given a diagnosis, 2.8% reported having been diagnosed with raised totalcholesterol more than 12 months ago, and 2.7% reported being diagnosed with raised total cholesterol in the past 12 months.

Of female respondents aged 45-69 years (n=656), 26.4% reported never having their total blood cholesterol levels measured, 51.2% reported having had their total blood cholesterol levels measured but not being given a diagnosis, 10.7% reported having been diagnosed with raised total cholesterol more than 12 months ago, and 11.7% reported being diagnosed with raised total cholesterol in the past 12 months.

Figure 163. Percentage of respondents aged 18-69 years who have been diagnosed with raised total cholesterol and are currently taking oral medications, by both sexes and age groups.

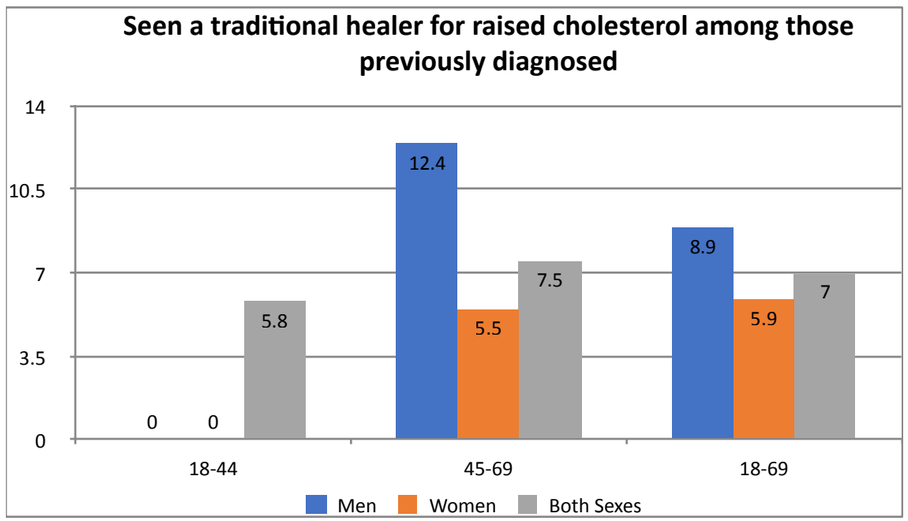


Of respondents who reported having been given a diagnosis of raised total cholesterol (n=274), 25.1% reported that they were currently taking oral medications for same. For those aged 18-44years (n=62), the percentage was 13.1% and for those 45-69 years (n=212), 30.9%.

Of male respondents who reported having been given a diagnosis of raised total cholesterol (n=85), 16.8% reported that they were currently taking oral medications for same. Of male respondents aged 45-69 years (n=62), the percentage was 20.8%. Validity for description for males aged 18-44 years with raised total cholesterol and currently taking oral medications couldnot be assured.

Of female respondents who reported having been given a diagnosis of raised total cholesterol (n=189), 29.7% reported that they were currently taking oral medications for same. Of female respondents aged 45-69 years (n=150), the percentage was 35.3%. Validity for description for females aged 18-44 years with raised total cholesterol and currently taking oral medications couldnot be assured.

Figure 164. Percentage of respondents aged 18-69 years who have been diagnosed with raised total cholesterol and have seen a traditional, by both sexes and age groups.



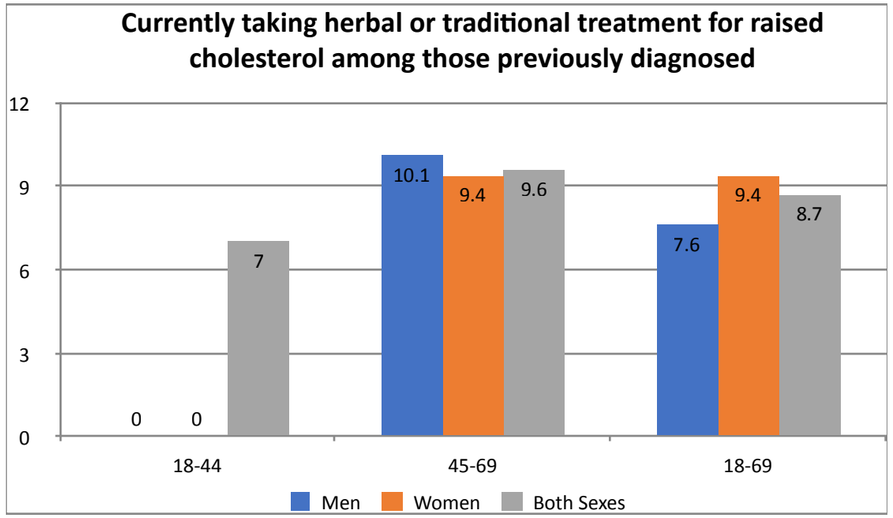
For the question which inquired on whether the respondents had seen a traditional healer after being diagnosed with raised cholesterol, responses were recorded for 246 persons. For all respondents, 7.0% reported that had seen a traditional healer after being diagnosed with raised cholesterol. This was reported as occurring in 5.8% of respondents aged 18-44 years (n=62) and reported to occur among 7.5% of respondents aged 45-69 years (n=212).

Of male respondents (n=85), 8.9% reported that they had seen a traditional healer after being diagnosed with raised cholesterol. This was reported as occurring in 12.4% of respondents aged 45-69 years (n=62). The validity of the data for males aged 18-44 years could not be assured.

Of female respondents (n=189), 5.9% reported that they had seen a traditional healer after being diagnosed with raised cholesterol. This was reported as occurring in 5.5% of respondents aged45-69 years (n=150). The validity of the data for females aged 18-44 years could not be assured.

The survey questionnaire also inquired about the practice of using an herbal or traditional remedyas part of the treatment of raised total cholesterol. The following Figure provides the results of the analysis of those questions.

Figure 165. Percentage of respondents aged 18-69 years who have been diagnosed with raised total cholesterol and currently taking an herbal or traditional treatment, by both sexes and age groups.

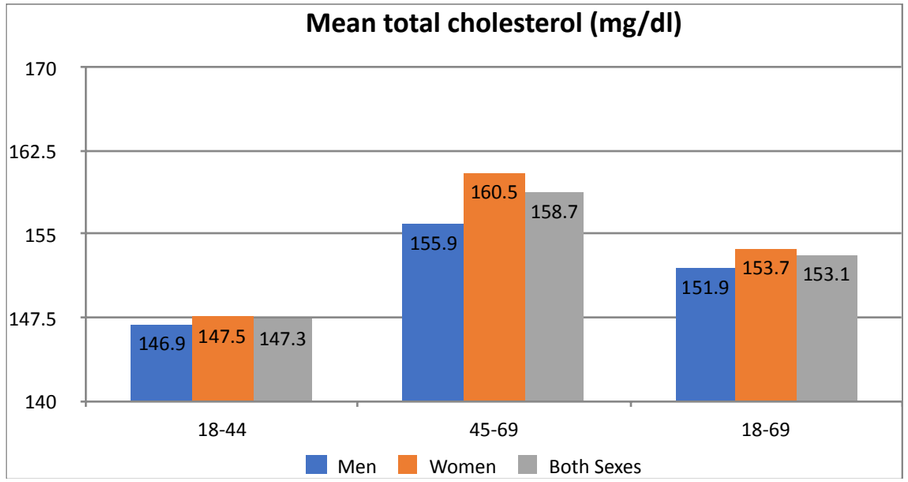


Of respondents who reported having been given a diagnosis of raised total cholesterol (n=274), 8.7% reported that they were currently taking an herbal or traditional treatment for same. For those aged 18-44 years (n=62), the percentage was 7.0% and for those 45-69 years (n=212), 9.6%.

Of male respondents who reported having been given a diagnosis of raised total cholesterol (n=85), 7.6% reported that they were currently taking an herbal or traditional treatment for same.Of male respondents aged 45-69 years (n=62), the percentage was 10.1%. Validity for description for males aged 18-44 years with raised total cholesterol and currently taking an herbalor traditional treatment could not be assured.

Of female respondents who reported having been given a diagnosis of raised total cholesterol (n=189), 9.4% reported that they were currently taking an herbal or traditional treatment for same. Of female respondents aged 45-69 years (n=150), the percentage was 9.4%. Validity for description for females aged 18-44 years with raised total cholesterol and currently taking an herbalor traditional treatment could not be assured.

Figure 166. Mean total cholesterol among all respondents including those currently on medication for raised cholesterol.

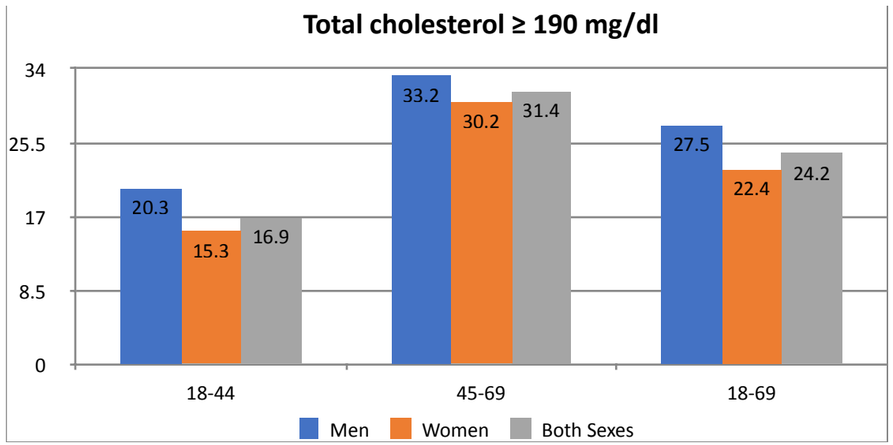


For all respondents (n=1301), the mean of measured total cholesterol was 153.1%.For those aged 18-45 years (n=644) the mean of measured total cholesterol was 147.3 mg/dl, and 158.7 mg/dl for all participants aged 45-69 years (n=657).

For all male participants (n=466), the mean of measured total cholesterol was 151.9 mg/dl. For male participants aged 18-45 years (n=207) with measured total cholesterol, the mean of measured total cholesterol was 146.9 mg/dl, and 155.9 mg/dl for male participants aged 45-69 years (n=259).

For all female participants (n=835), the mean of measured total cholesterol was 153.7 mg/dl. For female participants aged 18-45 years (n=437) with measured total cholesterol, the mean of measured total cholesterol was 147.5 mg/dl, and 160.5 mg/dl for female participants aged 45-69 years (n=398).

Figure 167. Percentage of respondents aged 18-69 years with measured total cholesterol ≥ 190 mg/dl by both sexes and age groups.

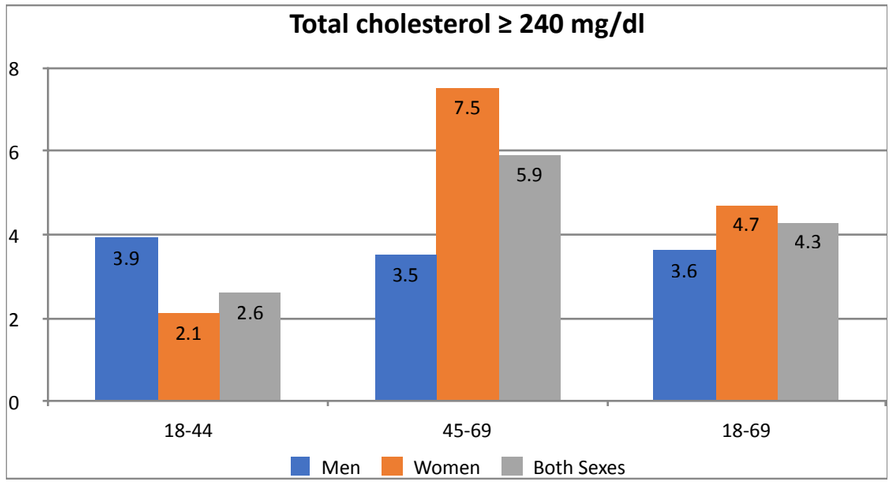


The percentage of participants with measured total cholesterol ≥ 190 mg/dl (n=1301) was 24.2%.For those aged 18-45 years (n=644) with measured total cholesterol ≥ 190 mg/dl, the percentagewas 16.9% and for participants aged 45-69 years (n=657), 31.4%.

The percentage of male participants with measured total cholesterol ≥ 190 mg/dl (n=466) was 27.5%. For male participants aged 18-45 years (n=207) with measured total cholesterol ≥ 190 mg/dl, the percentage was 20.3% and for male participants aged 45-69 years (n=259), 33.2%.

The percentage of female participants with measured total cholesterol ≥ 240 mg/dl (n=835) was22.4%. For female participants aged 18-45 years (n=437) with measured total cholesterol ≥ 190 mg/dl, the percentage was 15.3% and for male participants aged 45-69 years (n=398), 30.2%.

Figure 168. Percentage of respondents aged 18-69 years with measured total cholesterol ≥ 240 mg/dl by both sexes and age groups.

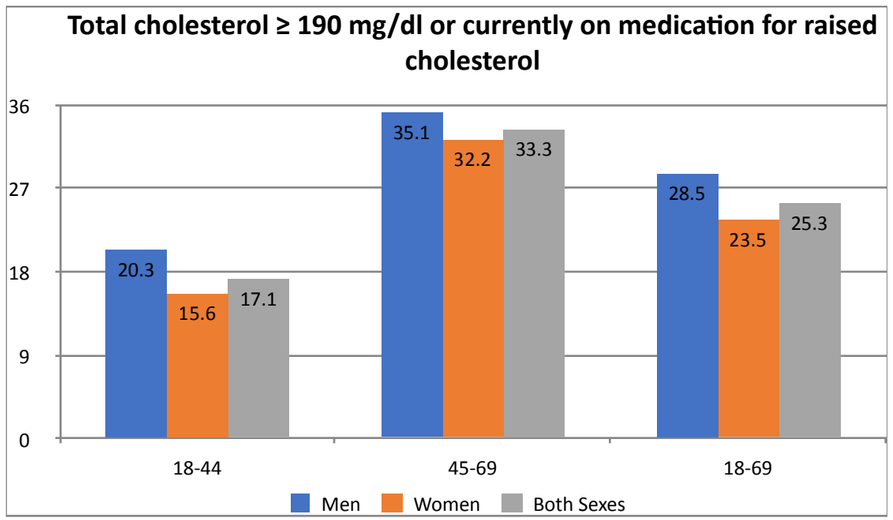


The percentage of participants with measured total cholesterol ≥ 240 mg/dl (n=1301) was 4.3%.For those aged 18-45 years (n=644) with measured total cholesterol ≥ 240 mg/dl, the percentagewas 2.6% and for participants aged 45-69 years (n=657), 5.9%.

The percentage of male participants with measured total cholesterol ≥ 240 mg/dl (n=466) was 3.6%. For male participants aged 18-45 years (n=207) with measured total cholesterol ≥ 240 mg/dl, the percentage was 3.9% and for male participants aged 45-69 years (n=259), 3.5%.

The percentage of female participants with measured total cholesterol ≥ 240 mg/dl (n=835) was4.7%. For female participants aged 18-45 years (n=437) with measured total cholesterol ≥ 240 mg/dl, the percentage was 2.1% and for male participants aged 45-69 years (n=398), 7.5%.

Figure 169. Percentage of respondents aged 18-69 years with either measured total cholesterol ≥ 190 mg/dl or currently on medication, by both sexes and age groups.

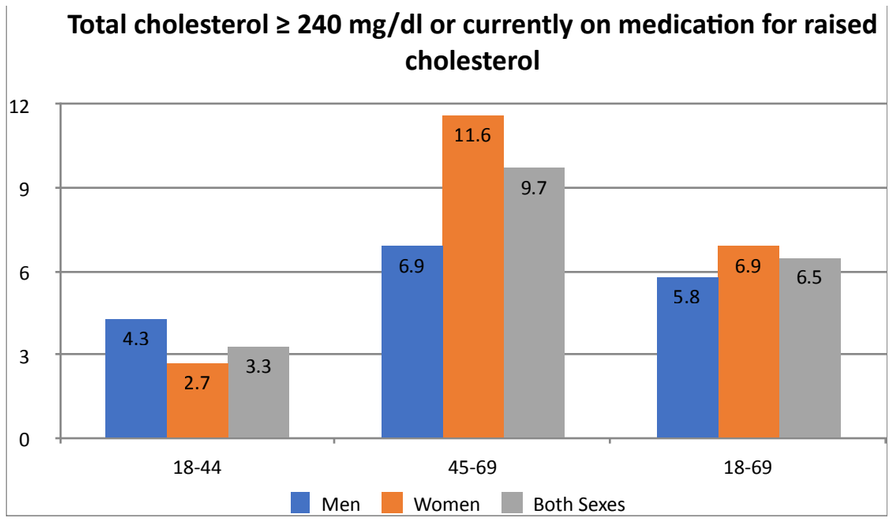


The percentage of respondents (n=1301) either total cholesterol ≥ 190 mg/dl or currently on medication for raised cholesterol was 25.3%. The percentage of respondents aged 18-44 years (n=644) with either total cholesterol ≥ 190 mg/dl or currently on medication for raised cholesterol was 17.1% while that of respondents aged 45-69 years (n=657) was 33.3%.

Of male respondents (n=466), 28.5% reported either total cholesterol ≥ 190 mg/dl or currently on medication for raised cholesterol. The percentage of male respondents aged 18-44 years (n=207)with either total cholesterol ≥ 190 mg/dl or currently on medication for raised cholesterol was 20.3% while that of respondents aged 45-69 years (n=259) was 35.1%.

Of female respondents (n=835), 23.5% reported either total cholesterol ≥ 190 mg/dl or currently on medication for raised cholesterol. The percentage of female respondents aged 18-44 years (n=437) with either total cholesterol ≥ 190 mg/dl or currently on medication for raised cholesterol was 15.6% while that of respondents aged 45-69 years (n=398) was 32.2%

Figure 170. Percentage of respondents aged 18-69 years with either measured total cholesterol ≥ 240 mg/dl or currently on medication, by both sexes and age groups.



The percentage of respondents (n=1301) either total cholesterol ≥ 240 mg/dl or currently on medication for raised cholesterol was 6.5%. The percentage of respondents aged 18-44 years (n=644) with either total cholesterol ≥ 240 mg/dl or currently on medication for raised cholesterol was 3.3% while that of respondents aged 45-69 years (n=657) was 9.7%.

Of male respondents (n=466), 5.8% reported either total cholesterol ≥ 240 mg/dl or currently on medication for raised cholesterol. The percentage of male respondents aged 18-44 years (n=207)with either total cholesterol ≥ 240 mg/dl or currently on medication for raised cholesterol was 4.3% while that of respondents aged 45-69 years (n=259) was 6.9%.

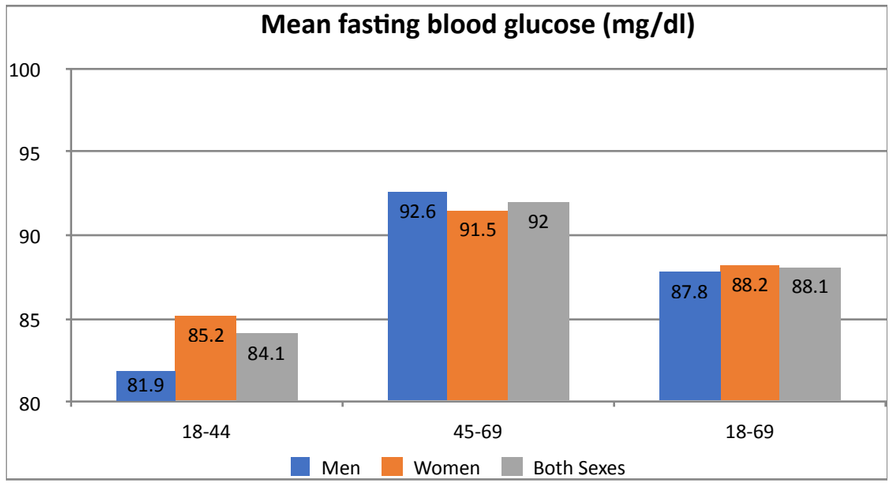
Of female respondents (n=835), 6.9% reported either total cholesterol ≥ 240 mg/dl or currently on medication for raised cholesterol. The percentage of female respondents aged 18-44 years (n=437) with either total cholesterol ≥ 240 mg/dl or currently on medication for raised cholesterol was 2.7% while that of respondents aged 45-69 years (n=398) was 11.6%

<u>Diabetes</u>

The measurement of blood sugar is a recommendation among all individuals at least annually. Questions in the survey questionnaire inquired about the experience of respondents in getting their blood sugar

measured with response options being never measured, measured but not given a diagnosis, diagnosed but not within the past 12 months, and diagnosed within the past 12 months. The following results were obtained.

Figure 171. Mean Fasting Blood Glucose (mg/dL).

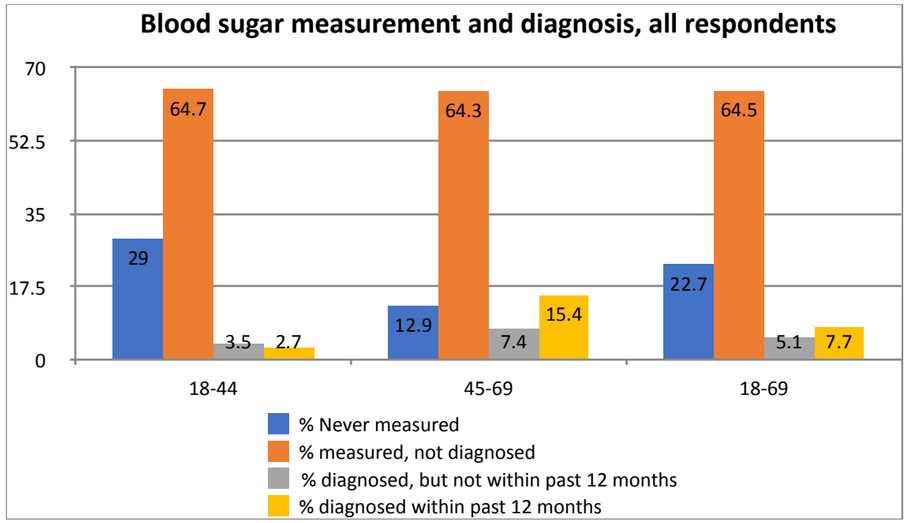


The mean fasting blood glucose of all respondents (n=1225) was calculated at 88.1 mg/dl. For participants aged 18-44 years (n=609), the mean fasting blood glucose was 84.1 mg/dl and for those aged 45-69 years (n=616), the calculation was 92.0 mg/dl.

The mean fasting blood glucose of all male respondents of both age groups (n=444) was calculated at 87.8 mg/dl. For participants aged 18-44 years (n=199), the mean fasting blood glucose was 81.9 mg/dl and for those aged 45-69 years (n=245), the calculation was 92.6 mg/dl.

The mean fasting blood glucose of all female respondents of both age groups (n=781) was calculated at 88.2 mg/dl. For participants aged 18-44 years (n=410), the mean fasting blood glucose was 85.2 mg/dl and for those aged 45-69 years (n=371), the calculation was 91.5 mg/dl.

Figure 172. Status of blood sugar measurement and/or diagnosis of diabetes among respondentsaged 18-69 years, by both sexes and age groups.

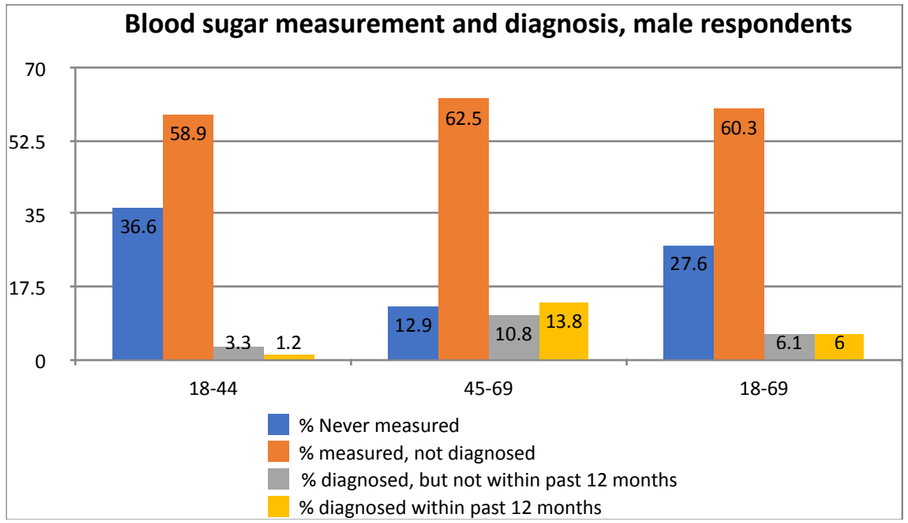


Of respondents of both sexes and age groups (n=2360), 22.7% reported never having their bloodsugar measured, 64.5% reported having had their blood sugar measured but not being given a diagnosis, 5.1% reported having been diagnosed with diabetes more than 12 months ago, and 7.7% reported being diagnosed with diabetes in the past 12 months.

Of respondents aged 18-44 years (n=1236), 29.0% reported never having their blood sugar measured, 64.7% reported having had their blood sugar measured but not being given a diagnosis, 3.5% reported having been diagnosed with diabetes more than 12 months ago, and 2.7% reported being diagnosed with diabetes in the past 12 months.

Of respondents aged 45-69 years (n=1124), 12.9% reported never having their blood sugar measured, 64.3% reported having had their blood sugar measured but not being given a diagnosis, 7.4% reported having been diagnosed with diabetes more than 12 months ago, and 15.4% reported being diagnosed with diabetes in the past 12 months.

Figure 173. Status of blood sugar measurement and/or diagnosis of diabetes among male respondents aged 18-69 years, by age groups.

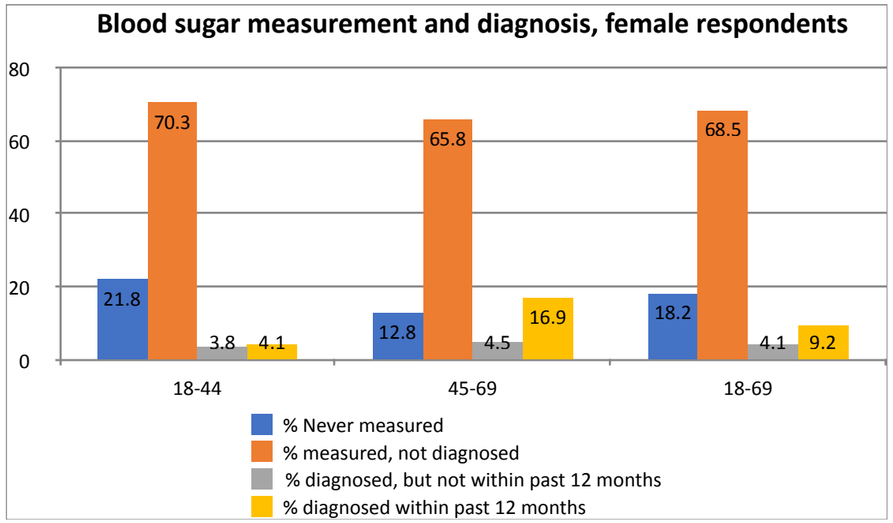


Of male respondents both sexes and age groups (n=930), 27.6% reported never having their blood sugar measured, 60.3% reported having had their blood sugar measured but not being given a diagnosis, 6.1% reported having been diagnosed with diabetes more than 12 months ago,and 6.0% reported being diagnosed with diabetes in the past 12 months.

Of male respondents aged 18-44 years (n=463), 36.6% reported never having their blood sugar measured, 58.9% reported having had their blood sugar measured but not being given a diagnosis, 3.3% reported having been diagnosed with diabetes more than 12 months ago, and 1.2% reported being diagnosed with diabetes in the past 12 months.

Of male respondents aged 45-69 years (n=468), 12.9% reported never having their blood sugar measured, 62.5% reported having had their blood sugar measured but not being given a diagnosis, 10.8% reported having been diagnosed with diabetes more than 12 months ago, and 13.8% reported being diagnosed with diabetes in the past 12 months.

Figure 174. Status of blood sugar measurement and/or diagnosis of diabetes among female respondents aged 18-69 years, by age groups.



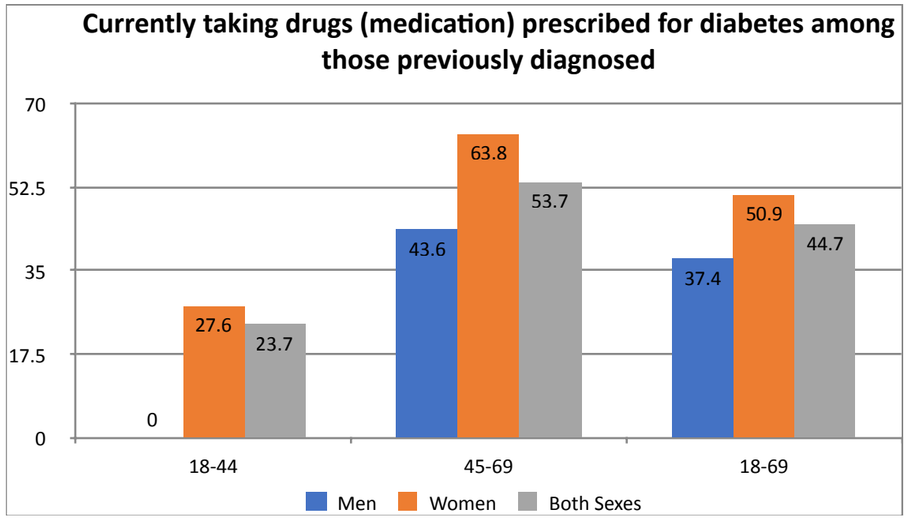
Of female respondents (n=1429), 18.2% reported never having their blood sugar measured, 68.5% reported having had their blood sugar measured but not being given a diagnosis, 4.1% reported having been diagnosed with diabetes more than 12 months ago, and 9.2% reported being diagnosed with diabetes in the past 12 months.

Of female respondents aged 18-44 years (n=738), 21.8% reported never having their blood sugarmeasured, 70.3% reported having had their blood sugar measured but not being given a diagnosis, 3.8% reported having been diagnosed with diabetes more than 12 months ago, and 4.1% reported being diagnosed with diabetes in the past 12 months.

Of female respondents aged 45-69 years (n=656), 12.8% reported never having their blood sugarmeasured, 65.8% reported having had their blood sugar measured but not being given a diagnosis, 4.5% reported having been diagnosed with diabetes more than 12 months ago, and 16.9% reported being diagnosed with diabetes in the past 12 months.

Figure 175. Percentage of respondents aged 18-69 years diagnosed with diabetes and currentlytaking medications, by both sexes and age groups.

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

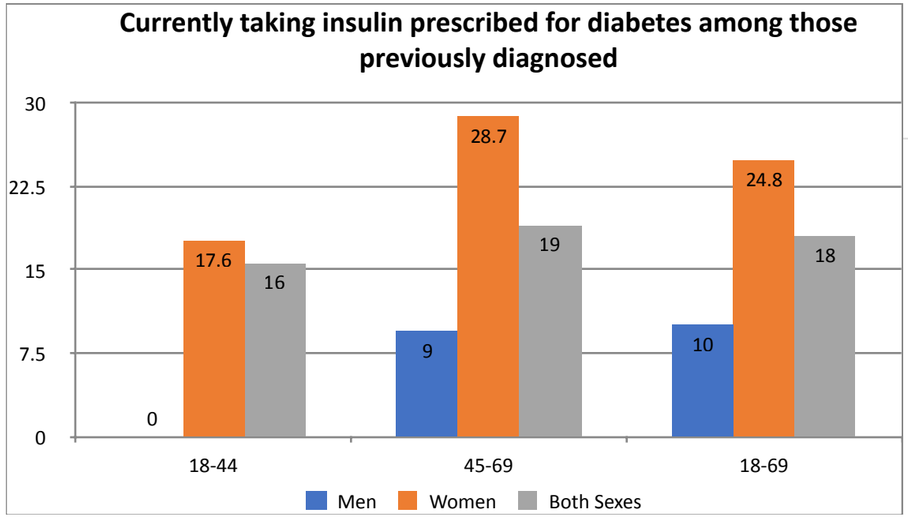


Of respondents of both sexes and age groups who reported having been given a diagnosis of diabetes (n=246), 44.7% reported that they were currently taking medications for same. For those aged 18-44 years (n=64), the percentage was 23.7% and for those 45-69 years (n=182), 53.7%.

Of male respondents who reported having been given a diagnosis of diabetes (n=84), 37.4% reported that they were currently taking medications for same. For male respondents aged 45-69 years (n=64) the percentage was 43.6%. The validity for the data for male respondents aged 18-44 years could not be assured.

Of female respondents who reported having been given a diagnosis of diabetes (n=162), 50.9% reported that they were currently taking medications for same. Of female respondents aged 18-44 years (n=44), the percentage was 27.6% and for those 45-69 years (n=118), 63.8%.

Figure 176. Percentage of respondents aged 18-69 years diagnosed with diabetes and currently taking insulin, by both sexes and age groups.



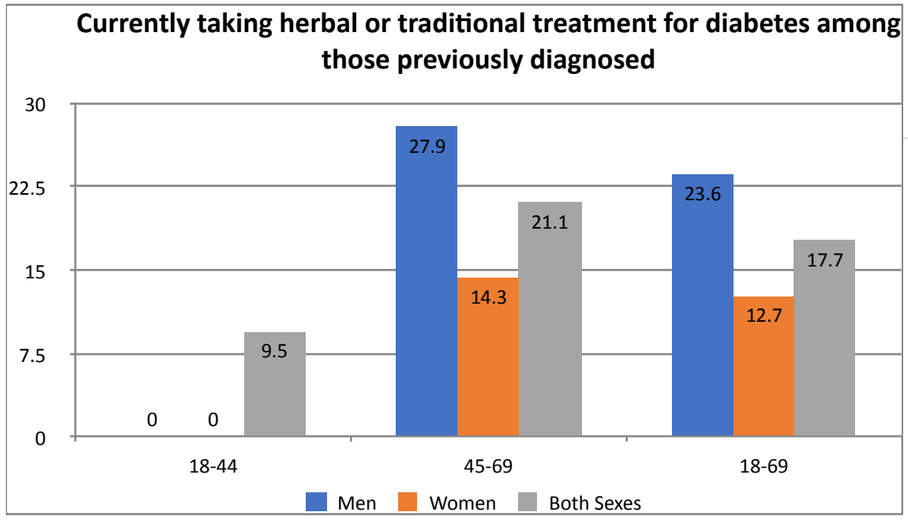
Of respondents of both sexes and age groups who reported having been given a diagnosis of diabetes (n=246), 18.0% reported that they were currently taking insulin for same. For those aged 18-44 years (n=64), the percentage was 15.6% and for those 45-69 years (n=182), 19.0%.

Of male respondents of both age groups who reported having been given a diagnosis of diabetes(n=84), 10.0% reported that they were currently taking insulin for same. For those aged 45-69 years, the rate was 9.4%. The validity for the data for male respondents aged 18-44 years could not be assured.

Of female respondents of both age groups who reported having been given a diagnosis of diabetes (n=162), 24.8% reported that they were currently taking insulin for same. Of female respondents aged 18-44 years (n=44), the percentage was 17.6% and for those 45-69 years (n=118), 28.7%.

The survey questionnaire also inquired about the practice of using an herbal or traditional remedyas part of the treatment of diabetes. The following Figure provides the results of the analysis ofthose questions

Figure 177. Percentage of respondents aged 18-69 years diagnosed with diabetes and currentlytaking an herbal or traditional treatment, by both sexes and age groups.



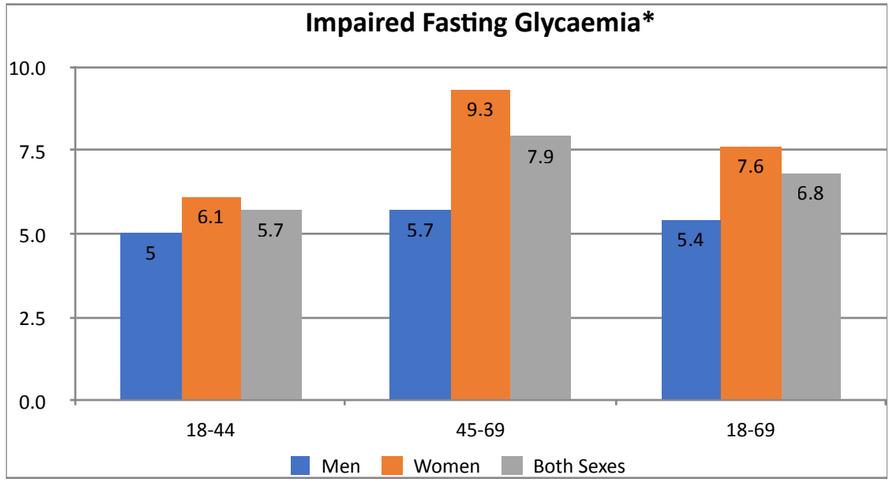
For the question which inquired on whether the respondents were currently taking herbal or traditional treatment to treat diabetes, responses were recorded for 246 persons. For all respondents, 17.7% reported that they were currently taking herbal or traditional treatment to treat diabetes. This was reported as occurring in 9.5% of respondents aged 18-44 years (n=64) and reported to occur among 21.1% of respondents aged 45-69 years (n=182).

Of male respondents (n=84), 23.6% reported that they were currently taking herbal or traditional treatment to treat diabetes. This was reported as occurring in 27.9% of respondents aged 45-69 years (n=64). The validity of the data for males aged 18-44 years could not be assured.

Of female respondents (n=162), 12.7% reported that they were currently taking herbal or traditional treatment to treat diabetes. This was reported as occurring in 14.3% of respondents aged 45-69 years (n=118). The validity of the data for females aged 18-44 years could not be assured.

Blood sugar level measurements were performed on a percentage of respondents who were given advanced notice and had eaten nor drank anything other than water in the preceding 12 hours. The measurements were evaluated based on whether the respondent had a prior diagnosis of diabetes and the results collated using the latter parameter of the presence of a diagnosis of diabetes. The results are reflected in the following Figures.

Figure 178. Percentage of respondents aged 18-69 years with measured impaired fasting glycaemia, by both sexes and age groups.



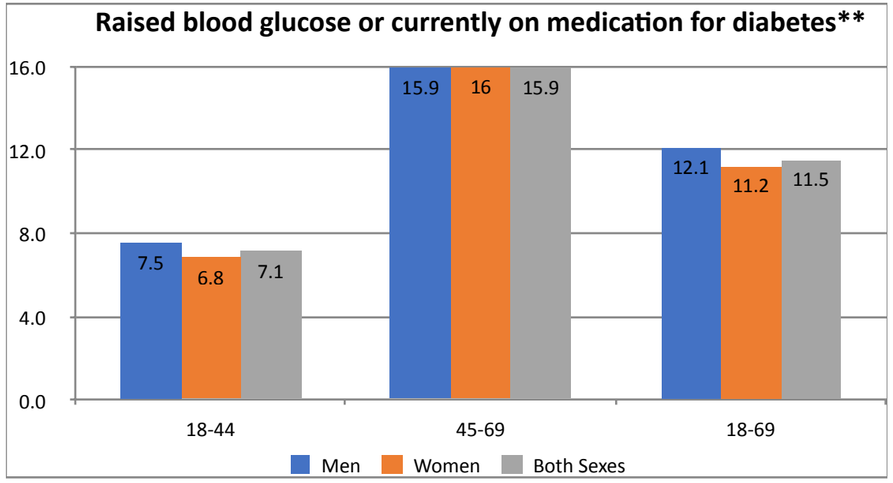
* Impaired fasting glycaemia is defined as plasma venous value ≥110mg/dl and <126mg/dl

The percentage of respondents of both sexes and age groups n=1230) with impaired fasting glycaemia was 6.8%. The percentage of respondents aged 18-44 years (n=609) with impaired fasting glycaemia was 5.7% while that of respondents aged 45-69 years (n=621) was 7.9%.

Of male respondents of both age groups (n=445), 5.4% with impaired fasting glycaemia. The percentage of male respondents aged 18-44 years (n=199) with impaired fasting glycaemia was 5.0% while that of respondents aged 45-69 years (n=246) was 5.7%.

Of female respondents of both age groups (n=785), 7.6% with impaired fasting glycaemia. The percentage of female respondents aged 18-44 years (n=410) with impaired fasting glycaemia was6.1% while that of respondents aged 45-69 years (n=375) was 9.3%.

Figure 179. Percentage of respondents aged 18-69 years with measured raised blood glucose orcurrently on medication for diabetes, by both sexes and age groups.



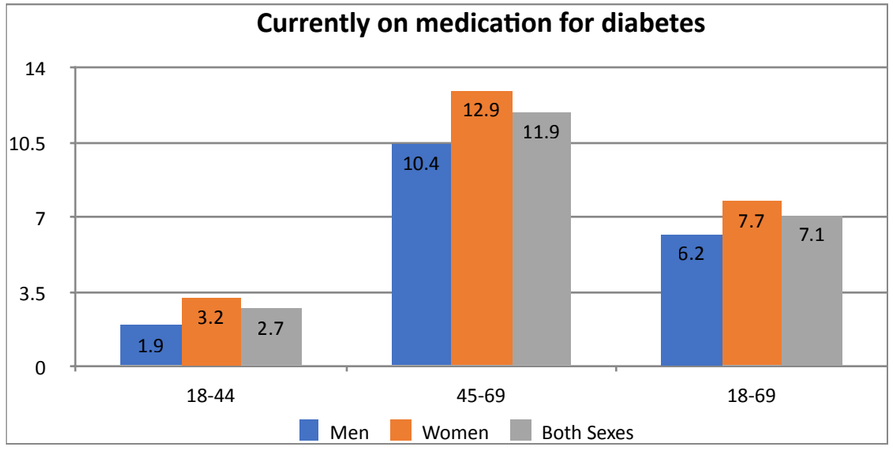
** Raised blood glucose is defined as plasma venous value: ≥ 126 mg/dl

The percentage of all respondents with raised blood glucose or currently on medication for diabetes of both sexes and age groups (n=1230) was 11.5%. The percentage of all respondents with raised blood glucose or currently on medication for diabetes aged 18-44 years (n=609) was 7.1% while that of respondents aged 45-69 years (n=621) was 15.9%.

The percentage of all male respondents with raised blood glucose or currently on medication for diabetes of both age groups (n=445) was 12.1%. The percentage of male respondents with raised blood glucose or currently on medication for diabetes aged 18-44 years (n=199) was 7.5% while that of respondents aged 45-69 years (n=246) was 15.9%.

Percentage of all respondents with raised blood glucose or currently on medication for diabetes of both age groups (n=785) was 11.2%. The percentage of all respondents with raised blood glucose or currently on medication for diabetes aged 18-44 years (n=410) was 6.8% while that of respondents aged 45-69 years (n=375) was 16.0%.

Figure 180. Percentage of respondents aged 18-69 years currently on medication for diabetes, by both sexes and age groups.

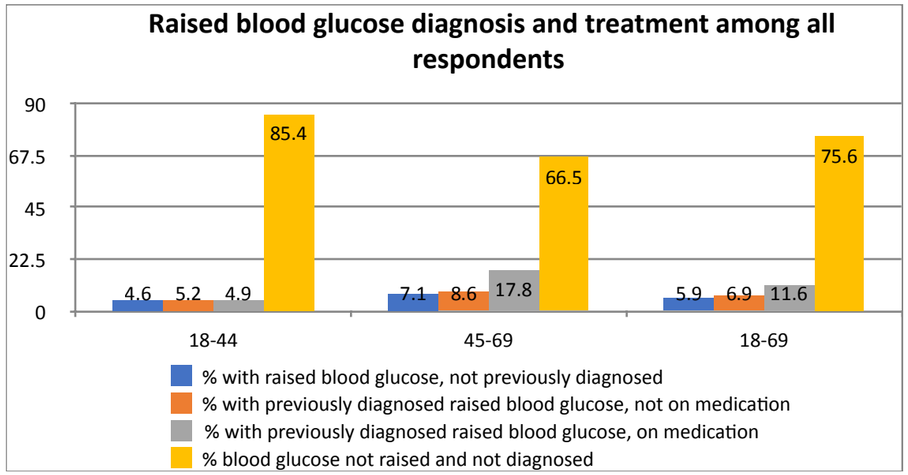


The percentage of all respondents currently on medication for diabetes (n=2363) was 7.1%. The percentage of respondents aged 18-44 years (n=1237) currently on medication for diabetes was 2.7% while that of respondents aged 45-69 years (n=1126) was 11.9%.

Of male respondents of both age groups (n=932), 6.2% currently on medication for diabetes. The percentage of male respondents aged 18-44 years (n=463) with currently on medication for diabetes was 1.9% while that of respondents aged 45-69 years (n=469) was 10.4%.

Of female respondents of both age groups (n=1431), 7.7% currently on medication for diabetes. The percentage of female respondents aged 18-44 years (n=774) currently on medication for diabetes was 3.2% while that of respondents aged 45-69 years (n=657) was 12.9%.

Figure 181. Percentage and status of respondents aged 18-69 years with respect to raised bloodglucose, diagnosis, and treatment status, by both sexes and age groups.



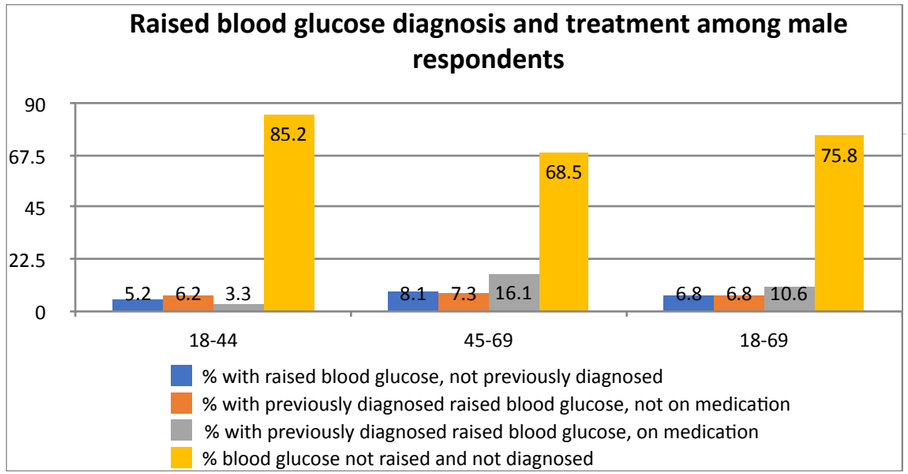
The percentage of respondents of both sexes and age groups (n=1326) with measured raised blood glucose without reporting a diagnosis of diabetes was 5.9%. The percentage of respondents aged 18-44 years (n=636) with measured raised blood glucose without reporting a diagnosis of diabetes was 4.6% while that of respondents aged 45-69 years (n=690) was 7.1%.

The percentage of respondents of both sexes and age groups (n=1326) with measured raised blood glucose, diagnosed with raised blood sugar and reporting not taking medications was 6.9%.The percentage of respondents aged 18-44 years (n=636) with measured raised blood glucose, diagnosed with raised blood sugar and reporting not taking medications was 5.2% while that of respondents aged 45-69 years (n=690) was 8.6%.

The percentage of respondents of both age groups (n=1326) with measured raised blood glucose,diagnosed with raised blood sugar and reporting taking prescribed medications was 11.6%. Thepercentage of respondents aged 18-44 years (n=636) with measured raised blood glucose, diagnosed with raised blood sugar and reporting taking prescribed medications was 4.9% whilethat of respondents aged 45-69 years (n=690) was 17.8%.

The percentage of respondents of both sexes and age groups (n=1326) whose measured raised blood glucose and who have not been diagnosed with raised blood sugar was 75.6%.The percentage of respondents aged 18-44 years (n=636) with measured raised blood glucose, diagnosed with raised blood sugar and reporting not taking medications was 85.4% while that of respondents aged 45-69 years (n=690) was 66.5%.

Figure 182. Percentage and status of male respondents aged 18-69 years with respect to raisedblood glucose, diagnosis, and treatment status, by age groups.



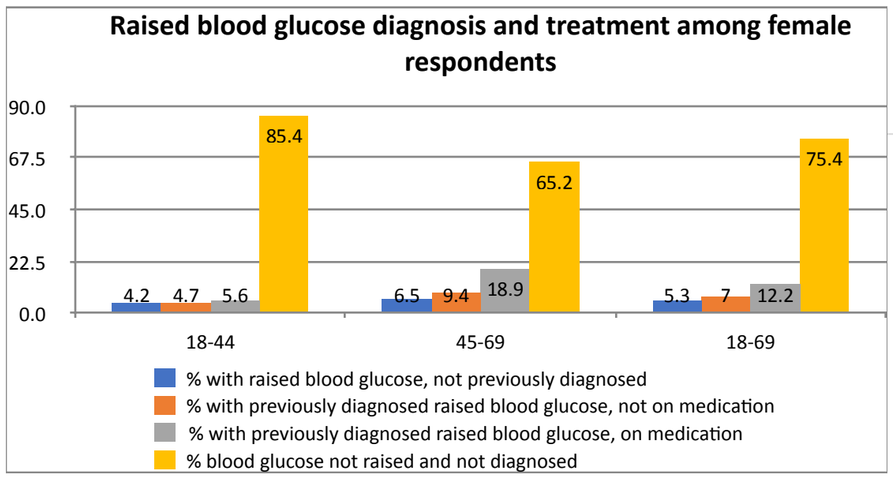
The percentage of male respondents of both age groups (n=483) with measured raised blood glucose without reporting a diagnosis of diabetes was 6.8%. The percentage of male respondents aged 18-44 years (n=210) with measured raised blood glucose without reporting a diagnosis of diabetes was 5.2% while that of male respondents aged 45-69 years (n=273) was 8.1%.

The percentage of male respondents of both sexes and age groups (n=483) with measured raised blood glucose, diagnosed with raised blood sugar and reporting not taking medications was 6.8%.The percentage of male respondents aged 18-44 years (n=210) with measured raised blood glucose, diagnosed with raised blood sugar and reporting not taking medications was 6.2% while that of male respondents aged 45-69 years (n=273) was 7.3%.

The percentage of male respondents of both age groups (n=483) with measured raised blood glucose, diagnosed with raised blood sugar and reporting taking prescribed medications was 10.6%. The percentage of male respondents aged 18-44 years (n=210) with measured raised blood glucose, diagnosed with raised blood sugar and reporting taking prescribed medications was 3.3% while that of male respondents aged 45-69 years (n=273) was 16.1%.

The percentage of male respondents of both sexes and age groups (n=483) whose measured raised blood glucose and who have not been diagnosed with raised blood sugar was 75.8%.The percentage of male respondents aged 18-44 years (n=210) with measured raised blood glucose, diagnosed with raised blood sugar and reporting not taking medications was 85.2% while that of male respondents aged 45-69 years (n=273) was 68.5%.

Figure 183. Percentage and status of female respondents aged 18-69 years with respect toraised blood glucose, diagnosis, and treatment status, by age groups.



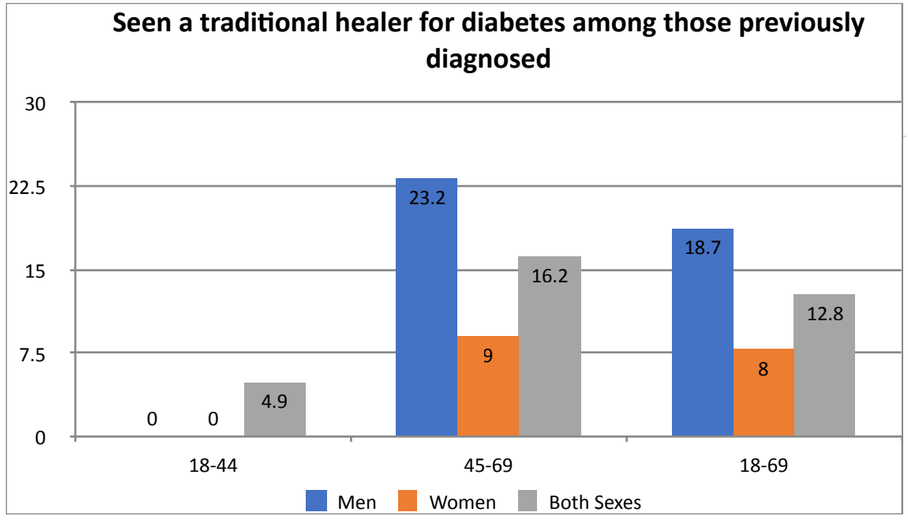
The percentage of female respondents of both age groups (n=843) with measured raised blood glucose without reporting a diagnosis of diabetes was 5.3%. The percentage of female respondents aged 18-44 years (n=426) with measured raised blood glucose without reporting a diagnosis of diabetes was 4.2% while that of female respondents aged 45-69 years (n=417) was 6.5%.

The percentage of female respondents of both sexes and age groups (n=483) with measured raised blood glucose, diagnosed with raised blood sugar and reporting not taking medications was 7.0%.The percentage of female respondents aged 18-44 years (n=426) with measured raised blood glucose, diagnosed with raised blood sugar and reporting not taking medications was 4.7% while that of female respondents aged 45-69 years (n=417) was 9.4%.

The percentage of female respondents of both age groups (n=483) with measured raised blood glucose, diagnosed with raised blood sugar and reporting taking prescribed medications was 12.2%. Thepercentage of female respondents aged 18-44 years (n=426) with measured raised blood glucose, diagnosed with raised blood sugar and reporting taking prescribed medications was 5.6% while that of female respondents aged 45-69 years (n=417) was 18.9%.

The percentage of female respondents of both sexes and age groups (n=843) whose measured raised blood glucose and who have not been diagnosed with raised blood sugar was 75.%.The percentage of female respondents aged 18-44 years (n=426) with measured raised blood glucose, diagnosed with raised blood sugar and reporting not taking medications was 85.4% while that of female respondents aged 45-69 years (n=417) was 65.2%.

Figure 184. Percentage and status of all respondents aged 18-69 years with diabetes that have seen a traditional healer, by both sexes and age groups.



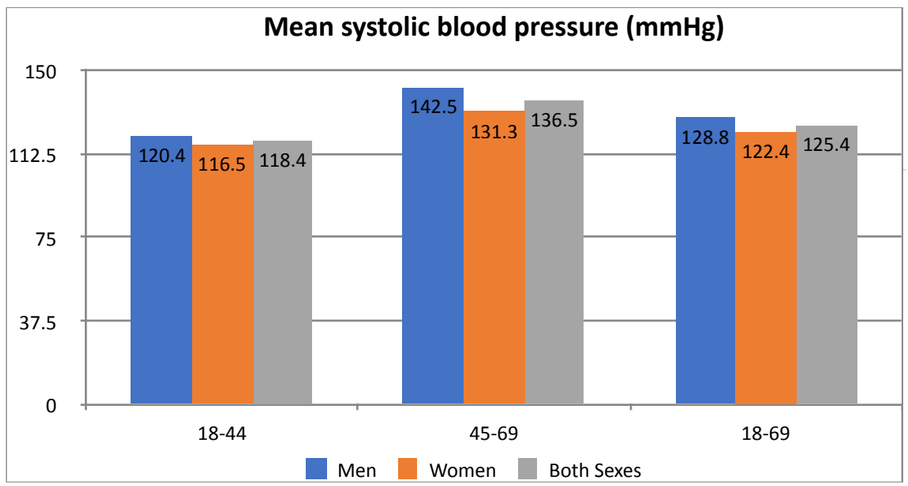
For the question which inquired on whether the respondents had seen a traditional healer after being diagnosed with diabetes, responses were recorded for 246 persons. For all respondents, 12.8% reported that had seen a traditional healer after being diagnosed with diabetes. This was reported as occurring in 4.9% of respondents aged 18-44 years (n=64) and reported to occur among 16.2% of respondents aged 45-69 years (n=182).

Of male respondents (n=84), 18.7% reported that they had seen a traditional healer after being diagnosed with diabetes. This was reported as occurring in 23.2% of respondents aged 45-69 years (n=64). The validity of the data for males aged 18-44 years could not be assured.

Of female respondents (n=162), 7.8% reported that they had seen a traditional healer after being diagnosed with diabetes. This was reported as occurring in 9.0% of respondents aged 45-69 years (n=118). The validity of the data for females aged 18-44 years could not be assured.

Hypertension

Figure 185. Mean systolic blood pressure (mmHg), by sexes and age groups.

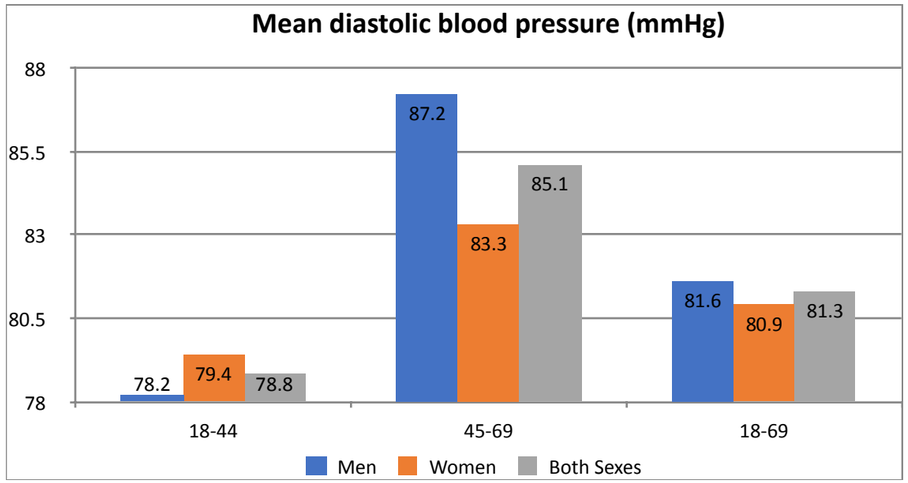


The mean systolic blood pressure for all respondents both sexes and age groups (n=2236) were calculated at 125.4 mmHg. For participants aged 18-44 years (n=1174), it was 118.4 mmHg and for those aged 45-69 years (n=1062), the calculation was 136.5 mmHg.

The mean systolic blood pressure for all male respondents of both age groups (n=871) was calculated at 128.8 mmHg. For participants aged 18-44 years (n=432), it was 120.4 mmHg and for those aged 45-69 years (n=439), the calculation was 142.5 mmHg.

The mean systolic blood pressure for all female respondents of both age groups (n=1368) was calculated at 122.4 mmHg. For participants aged 18-44 years (n=742), it was 116.5 mmHg and for those aged 45-69 years (n=623), the calculation was 131.3 mmHg.

Figure 186. Mean diastolic blood pressure (mmHg), by sexes and age groups.

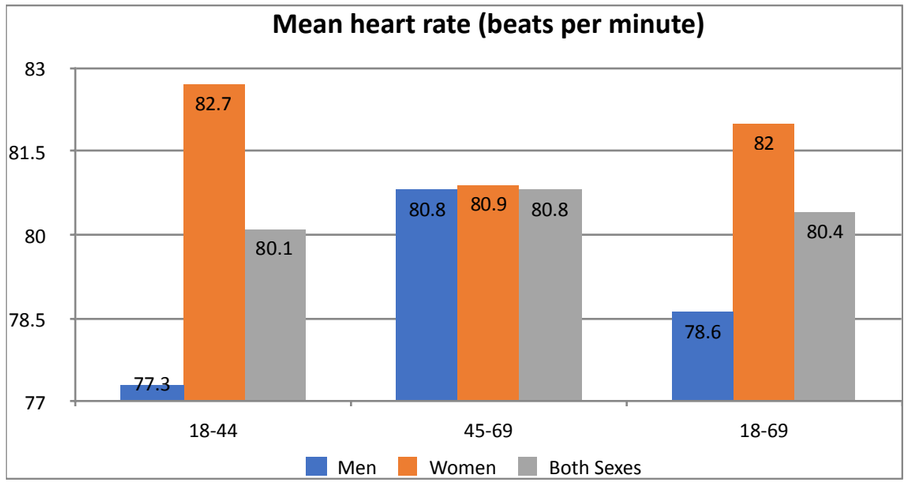


The mean diastolic blood pressure for all respondents both sexes and age groups (n=2236) were calculated at 81.3 mmHg. For participants aged 18-44 years (n=1174), it was 78.8 mmHg and for those aged 45-69 years (n=1062), the calculation was 85.1 mmHg.

The mean diastolic blood pressure for all male respondents of both age groups (n=871) was calculated at 81.6 mmHg. For participants aged 18-44 years (n=432), it was 78.2 mmHg and for those aged 45-69 years (n=439), the calculation was 87.2 mmHg.

The mean diastolic blood pressure for all female respondents of both age groups (n=1368) was calculated at 80.9 mmHg. For participants aged 18-44 years (n=742), it was 79.4 mmHg and for those aged 45-69 years (n=623), the calculation was 83.3 mmHg.

Figure 187. Mean heart rate (beats per minute), by sexes and age groups.

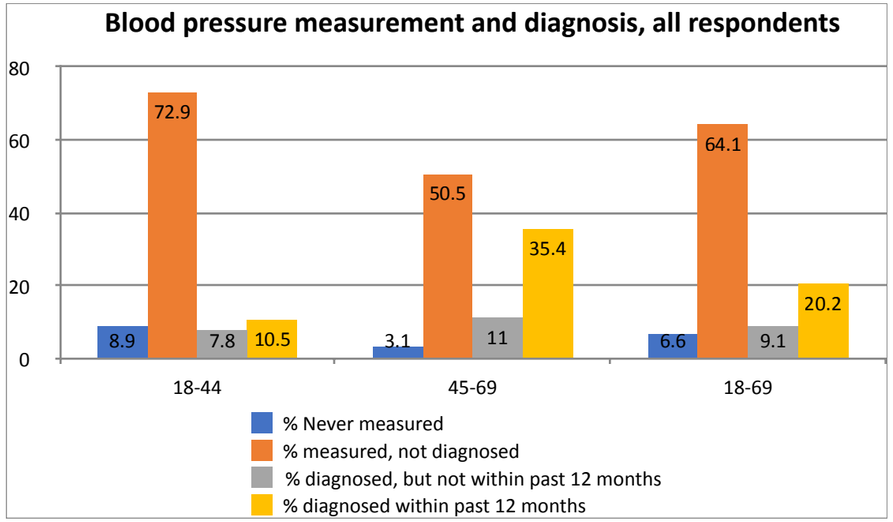


The mean heart rate for all respondents both sexes and age groups (n=2242) were calculated at 80.4 beats per minute. For participants aged 18-44 years (n=1178), it was 80.1 beats per minute and for those aged 45-69 years (n=1064), the calculation was 80.8 beats per minute.

The mean heart rate for all male respondents of both age groups (n=874) was calculated at 78.6 beats per minute. For participants aged 18-44 years (n=433), it was 77.3 beats per minute and for those aged 45-69 years (n=441), the calculation was 80.8 beats per minute.

The mean heart rate for all female respondents of both age groups (n=1368) was calculated at 82.0 beats per minute. For participants aged 18-44 years (n=745), it was 82.7 beats per minute and for those aged 45-69 years (n=623), the calculation was 80.9 beats per minute.

Figure 188. Blood pressure measurement and diagnosis for all respondents, by both sexes and age groups.



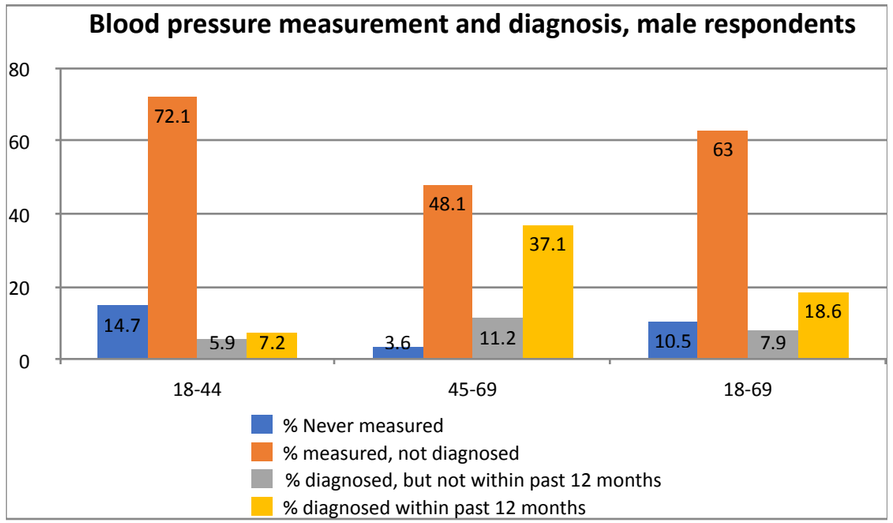
A question in the survey instrument was designed to elicit data from respondents on whether the respondent had undergone a measurement of his/her blood pressure in the past by a doctor or other health worker, and if that measurement/encounter resulted in a diagnosis of hypertension or raised blood pressure. The following results were observed. For all respondents (n=2360), 6.6% reported that they had never had their blood pressure measured; 64.1% reported that their blood pressure was measured but there was no diagnosis of hypertension or raised blood pressure made; 9.1% reported that they had been diagnosed with hypertension, but not within the past 12 months; and 20.2% said that they had been diagnosed with hypertension in the past 12 months.

For all respondents aged 18-44 years, (n=1236), 8.9% reported that they had never had their blood pressure measured; 72.9% reported that their blood pressure was measured but there was no diagnosis of hypertension or raised blood pressure made; 7.8% reported that they had been diagnosed with hypertension, but not within the past 12 months; and 10.5% said that they had been diagnosed with hypertension in the past 12 months.

For all respondents aged 45-69 years, (n=1124), 3.1% reported that they had never had their blood pressure measured; 50.5% reported that their blood pressure was measured but there was no diagnosis of

hypertension or raised blood pressure made; 11.0% reported that they had been diagnosed with hypertension, but not within the past 12 months; and 35.4% said that they had been diagnosed with hypertension in the past 12 months.

Figure 189. Blood pressure measurement and diagnosis of male participants, by age groups.



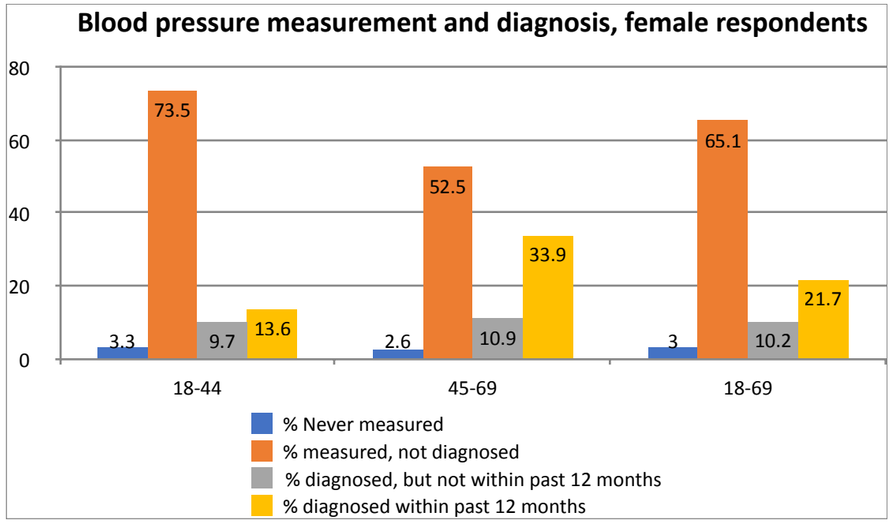
For male respondents (n=931), 10.5% reported that they had never had their blood pressure measured; 63.0% reported that their blood pressure was measured but there was no diagnosis of hypertension or raised blood pressure made; 7.9% reported that they had been diagnosed with hypertension, but not within the past 12 months; and 18.6% said that they had been diagnosed with hypertension in the past 12 months.

For male respondents aged 18-44 years, (n=463), 14.7% reported that they had never had their blood pressure measured; 72.1% reported that their blood pressure was measured but there was no diagnosis of hypertension or raised blood pressure made; 5.9% reported that they had been diagnosed with hypertension, but not within the past 12 months; and 7.2% said that they had been diagnosed with hypertension in the past 12 months.

For male respondents aged 45-69 years, (n=468), 3.6% reported that they had never had their blood pressure measured; 48.1% reported that their blood pressure was measured but there was no diagnosis of

hypertension or raised blood pressure made; 11.2% reported that they had been diagnosed with hypertension, but not within the past 12 months; and 37.1% said that they had been diagnosed with hypertension in the past 12 months.

Figure 190. Blood pressure measurement and diagnosis of female participants, by age groups.



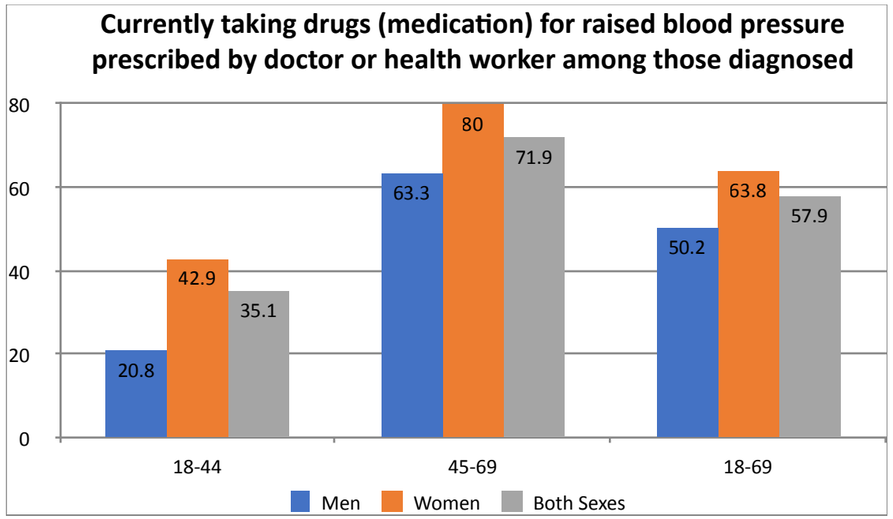
For female respondents (n=1429), 3.0% reported that they had never had their blood pressure measured; 65.1% reported that their blood pressure was measured but there was no diagnosis of hypertension or raised blood pressure made; 10.2% reported that they had been diagnosed with hypertension, but not within the past 12 months; and 21.7% said that they had been diagnosed with hypertension in the past 12 months.

For female respondents aged 18-44 years, (n=773), 3.3% reported that they had never had their blood pressure measured; 73.5% reported that their blood pressure was measured but there was no diagnosis of hypertension or raised blood pressure made; 9.7% reported that they had been diagnosed with hypertension, but not within the past 12 months; and 13.6% said that they had been diagnosed with hypertension in the past 12 months.

For female respondents aged 45-69 years, (n=656), 2.6% reported that they had never had their blood pressure measured; 52.5% reported that their blood pressure was measured but there was no diagnosis of

hypertension or raised blood pressure made; 10.9% reported that they had been diagnosed with hypertension, but not within the past 12 months; and 33.9% said that they had been diagnosed with hypertension in the past 12 months.

Figure 191. Respondents currently taking drugs (medication) for raised blood pressure prescribed by doctor or health worker among those diagnosed, by both sexes and age groups.

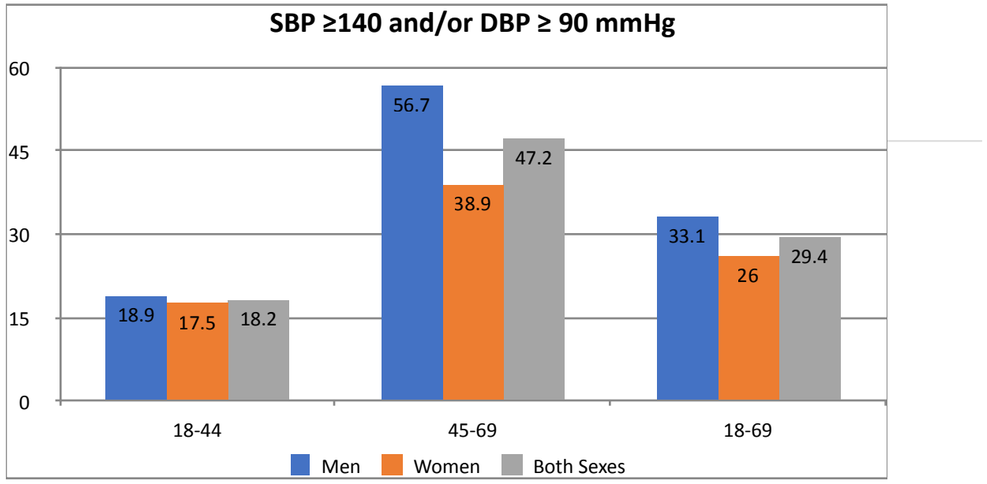


For the question which inquired on whether the respondents after being diagnosed with high blood pressure were currently taking drugs (medication) prescribed by a doctor or health worker, responses were recorded for 727 persons. For all respondents, 57.9% reported that they were currently taking drugs (medication) prescribed by a doctor or health worker after being diagnosed with high blood pressure. This was reported as occurring in 35.1% of respondents aged 18-44 years (n=199) and reported to occur among 71.9% of respondents aged 45-69 years (n=528).

Of male respondents (n=254), 50.2% reported that they were currently taking drugs (medication) prescribed by a doctor or health worker after being diagnosed with high blood pressure. This was reported as occurring in 20.8% of respondents aged 18-44 years (n=57) and reported to occur among 63.3% of respondents aged 45-69 years (n=197).

Of female respondents (n=473), 63.8% reported that they were currently taking drugs (medication) prescribed by a doctor or health worker after being diagnosed with high blood pressure. This was reported as occurring in 42.9% of respondents aged 18-44 years (n=142) and reported to occur among 80.0% of respondents aged 45-69 years (n=331).

Figure 192. Percentage of respondents aged 18-69 years with measured SBP ≥140 and/or DBP ≥ 90 mmHg, by both sexes and age groups.

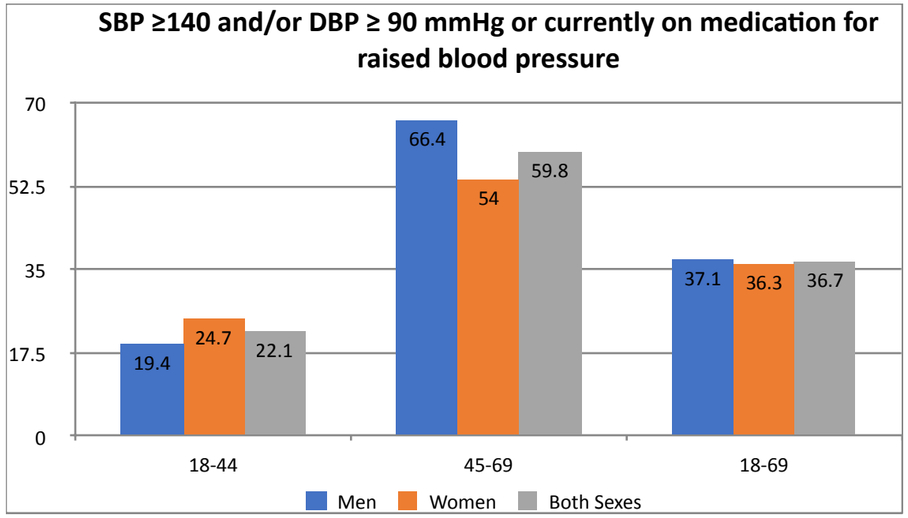


For participants of both sexes and age groups whose blood pressure was measured (n=2208), 29.4% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg. Among participants 18-44 years (n=1165), 18.2% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg, and for participants aged 45-69 years (n=1043), the percentage was 47.2%.

Among male participants of both age groups (n=858), 33.1% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg. Among male participants 18-44 years (n=429), 18.9% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg, and for male participants aged 45-69 years (n=429), the percentage was 56.7%.

Among female participants of both age groups (n=1350), 26.0% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg. Among female participants 18-44 years (n=736), 17.5% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg, and for female participants aged 45-69 years (n=614), the percentage was 38.9%

Figure 193. Percentage of respondents aged 18-69 years with measured SBP ≥140 and/or DBP ≥ 90 mmHg or currently on medication for raised blood pressure, by both sexes and age groups.

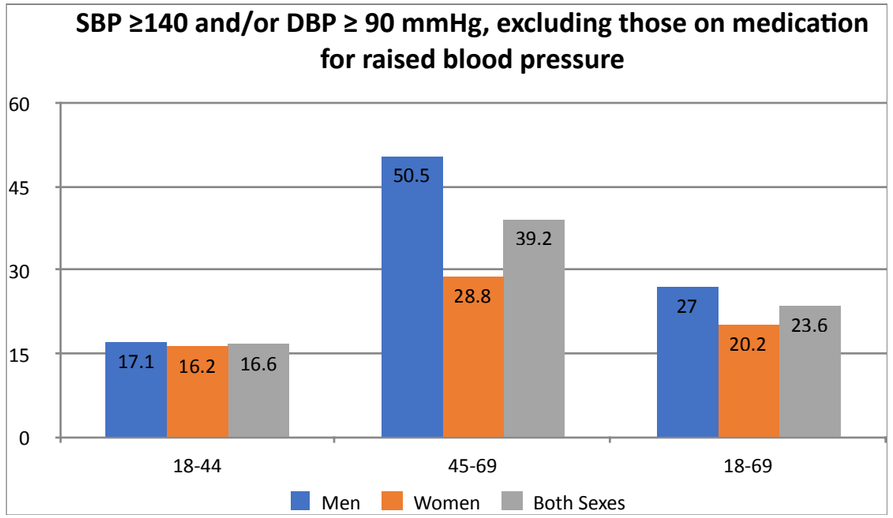


For participants currently on medications and whose blood pressure was measured (n=2208), 36.7% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg. Among participants 18-44 years (n=1165) who were currently on medications, 22.1% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg, and for participants aged 45-69 years (n=1043), the percentage was 59.8%.

Among male participants currently on medications and whose blood pressure was measured (n=858), 37.1% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg. Among male participants 18-44 years (n=429), who were currently on medications, 19.4% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg, andfor male participants aged 45-69 years (n=429), the percentage was 66.4%.

Among female participants currently on medications and whose blood pressure was measured (n=858), 36.3% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg. Among female participants 18-44 years (n=736), who were currently on medications, 24.7% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg, andfor female participants aged 45-69 years (n=614), the percentage was 54.0%.

Figure 194. Percentage of respondents aged 18-69 years with measured SBP ≥140 and/or DBP ≥ 90 mmHg excluding those on medication for raised blood pressure, by both sexes and age groups.

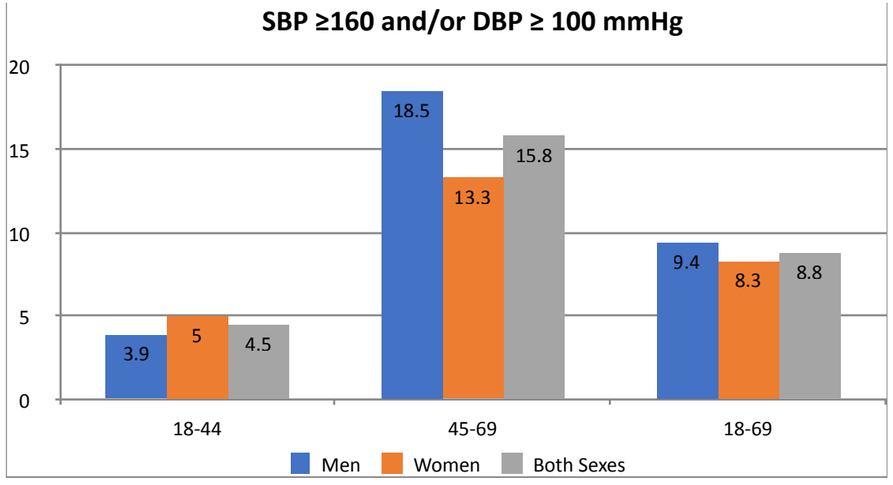


For participants of both sexes and age groups not currently on medications and whose bloodpressure was measured (n=1776), 23.6% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg. Among participants 18-44 years (n=1080) who were currently noton medications, 16.6% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg, and for participants aged 45-69 years (n=696), the percentage was 39.2%.

Among male participants of both age groups not currently on medications and whose bloodpressure was measured (n=733), 27.0% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg. Among male participants 18-44 years (n=410), who were currently not on medications, 17.1% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg, and for male participants aged 45-69 years (n=323), the percentage was 50.5%.

Among female participants of both age groups not currently on medications and whose blood pressure was measured (n=1043), 20.2% had blood pressure readings with results that were SBP ≥140 and/or DBP ≥ 90 mmHg. Among female participants 18-44 years (n=670), who were currently not on medications, 16.2% had blood pressure readings with results that were SBP ≥140and/or DBP ≥ 90 mmHg, and for female participants aged 45-69 years (n=373), the percentage was 28.8%.

Figure 195. Percentage of respondents aged 18-69 years with measured SBP ≥160 and/or DBP ≥ 100 mmHg excluding those on medication for raised blood pressure, by both sexes and age groups.

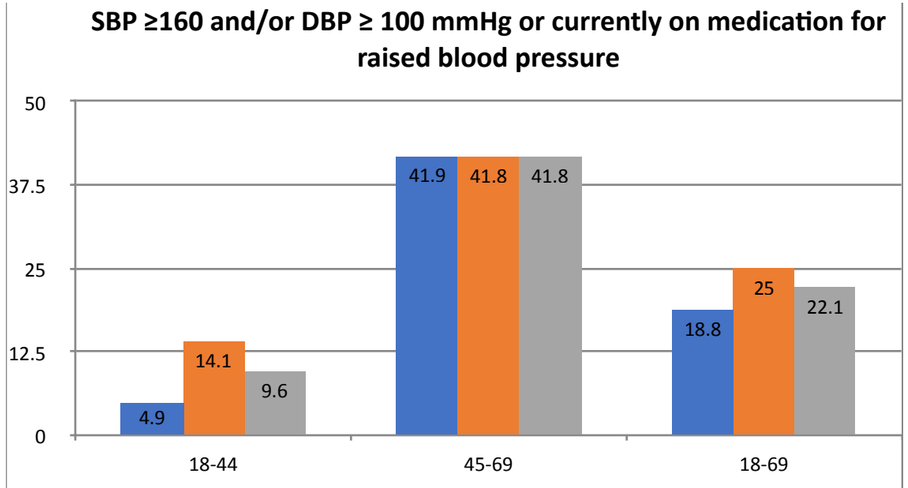


For participants of both sexes and age groups whose blood pressure was measured (n=2208), 8.8% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg. Among participants 18-44 years (n=1165), 4.5% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg, and for participants aged 45-69 years (n=1043), the percentage was 15.8%.

Among male participants of both age groups (n=858), 9.4% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg. Among male participants 18-44 years (n=429), 3.9% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg, and for male participants aged 45-69 years (n=429), the percentage was 18.5%.

Among female participants of both age groups (n=1350), 8.3% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg. Among female participants 18-44 years (n=736), 5.0% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg, and for female participants aged 45-69 years (n=614), the percentage was 13.3%

Figure 196. Percentage of respondents aged 18-69 years with measured SBP ≥160 and/or DBP ≥ 100 mmHg or currently on medication for raised blood pressure, by both sexes and age groups.

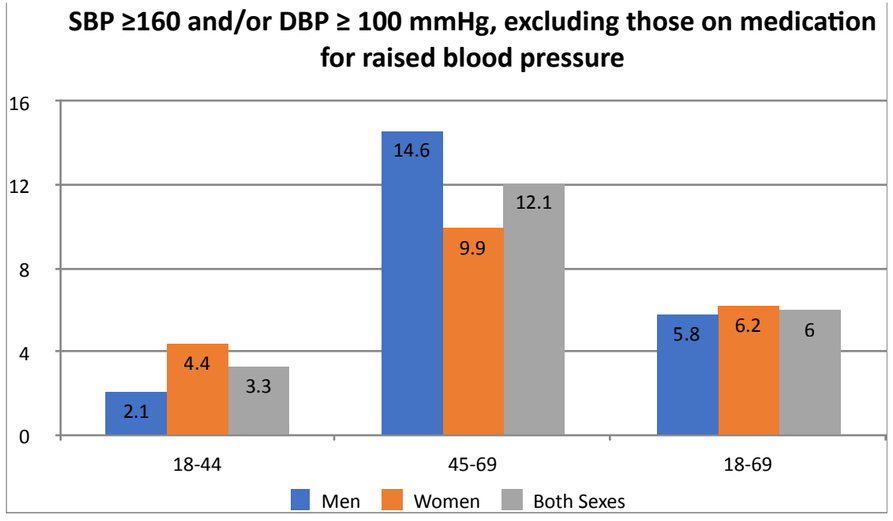


For participants currently on medications and whose blood pressure was measured (n=2208), 22.1% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg. Among participants 18-44 years (n=1165) who were currently on medications, 9.6% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg, and for participants aged 45-69 years (n=1043), the percentage was 41.8%.

Among male participants currently on medications and whose blood pressure was measured (n=858), 18.8% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg. Among male participants 18-44 years (n=429), who were currently on medications, 4.9% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg, andfor male participants aged 45-69 years (n=429), the percentage was 41.9%.

Among female participants currently on medications and whose blood pressure was measured (n=858), 25.0% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg. Among female participants 18-44 years (n=736), who were currently on medications, 14.1% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg, andfor female participants aged 45-69 years (n=614), the percentage was 41.8%.

Figure 197. Percentage of respondents aged 18-69 years with measured SBP ≥160 and/or DBP ≥ 100 mmHg excluding those on medication for raised blood pressure, by both sexes and age groups.

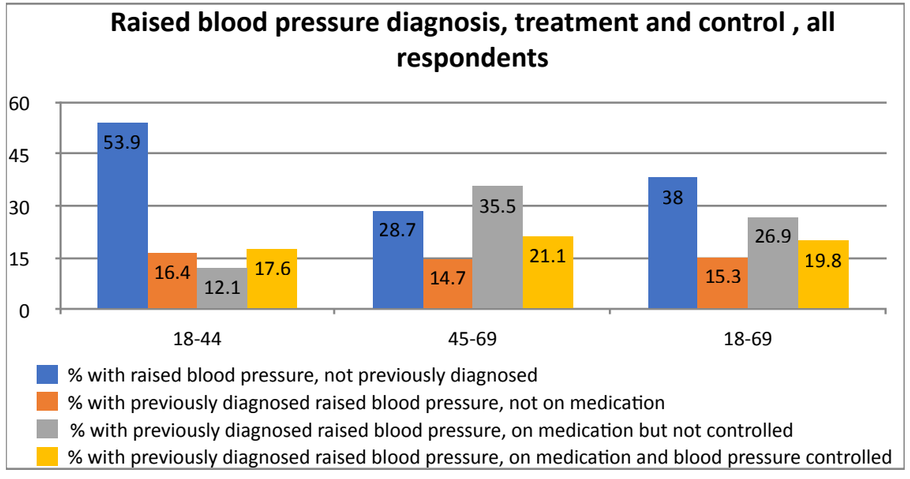


For participants of both sexes and age groups not currently on medications and whose bloodpressure was measured (n=1776), 6.0% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg. Among participants 18-44 years (n=1080) who were currently noton medications, 3.3% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg, and for participants aged 45-69 years (n=696), the percentage was 12.1%.

Among male participants of both age groups not currently on medications and whose bloodpressure was measured (n=733), 5.8% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg. Among male participants 18-44 years (n=410), who were currently not on medications, 2.1% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg, and for male participants aged 45-69 years (n=323), the percentage was 14.6%.

Among female participants of both age groups not currently on medications and whose blood pressure was measured (n=1043), 6.2% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg. Among female participants 18-44 years (n=670), who were currently not on medications, 4.4% had blood pressure readings with results that were SBP ≥160 and/or DBP ≥ 100 mmHg, and for female participants aged 45-69 years (n=373), the percentage was 9.9%.

Figure 198. Percentage and status of respondents aged 18-69 years with respect to raised bloodpressure, diagnosis, treatment, and control, by both sexes and age groups.

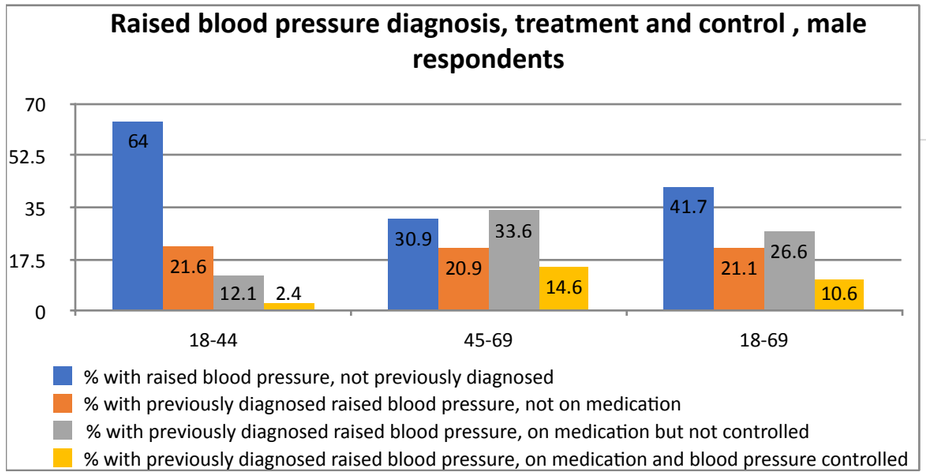


There were 921 survey participants whose blood pressure levels were measured during their participation in Step 2. Of this number, 38.0% was determined to have raised blood pressure readings but reported that they had never been diagnosed with hypertension, 15.3% had raisedblood pressure readings and reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, but were not compliant with the prescribed treatment, 26.9%had raised blood pressure readings, reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, and were but were determined to have raised blood pressure readings while 19.8% had controlled blood pressure readings, reported a diagnosis of hypertension and compliance with prescribed medications.

There were 292 survey participants aged 18-44 years, whose blood pressure levels were measured during their participation in Step 2. Of this number, 53.9% was determined to have raised blood pressure readings but reported that they had never been diagnosed with hypertension, 16.4% had raised blood pressure readings and reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, but were not compliant with the prescribed treatment, 12.1% had raised blood pressure readings, reported that they hadbeen diagnosed with hypertension, and prescribed antihypertensive drugs, and were but were determined to have raised blood pressure readings while 17.6% had controlled blood pressure readings, reported a diagnosis of hypertension and compliance with prescribed medications.

There were 629 survey participants whose blood pressure levels were measured during their participation in Step 2. Of this number, 28.7% was determined to have raised blood pressure readings but reported that they had never been diagnosed with hypertension, 14.7% had raisedblood pressure readings and reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, but were not compliant with the prescribed treatment, 35.5%had raised blood pressure readings, reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, and were but were determined to have raised blood pressure readings while 21.1% had controlled blood pressure readings, reported a diagnosis of hypertension and compliance with prescribed medications.

Figure 199. Percentage and status of male respondents aged 18-69 years with respect to raised blood pressure, diagnosis, treatment, and control, by both age groups.

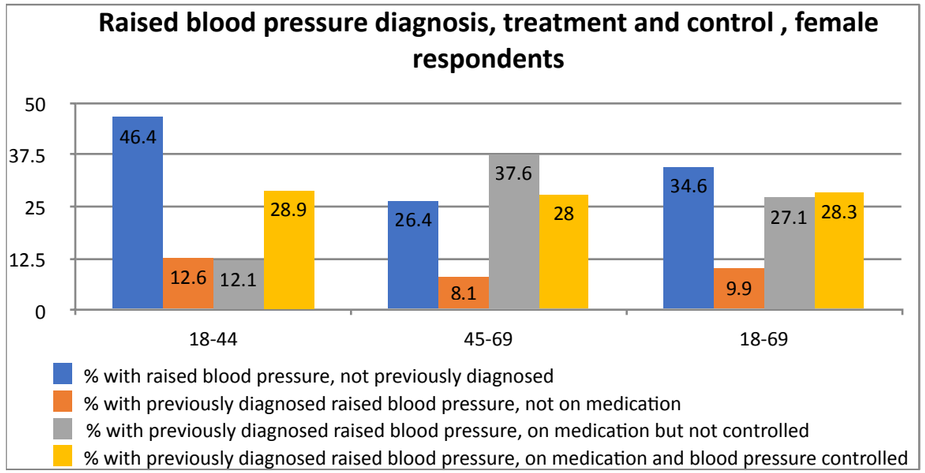


There were 388 male survey participants whose blood pressure levels were measured during their participation in Step 2. Of this number, 41.7% was determined to have raised blood pressure readings but reported that they had never been diagnosed with hypertension, 21.1% had raised blood pressure readings and reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, but were not compliant with the prescribed treatment, 26.6% had raised blood pressure readings, reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, and were but were determined to have raised blood pressure readings while 10.6% had controlled blood pressure readings, reported a diagnosis of hypertension and compliance with prescribed medications.

There were 118 male survey participants aged 18-44 years, whose blood pressure levels were measured during their participation in Step 2. Of this number, 64.0% was determined to have raised blood pressure readings but reported that they had never been diagnosed with hypertension, 21.6% had raised blood pressure readings and reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, but were not compliant with the prescribed treatment, 12.1% had raised blood pressure readings, reported that they hadbeen diagnosed with hypertension, and prescribed antihypertensive drugs, and were but were determined to have raised blood pressure readings while 2.4% had controlled blood pressure readings, reported a diagnosis of hypertension and compliance with prescribed medications.

There were 270 male survey participants aged 45-69 years, whose blood pressure levels were measured during their participation in Step 2. Of this number, 30.9% was determined to have raised blood pressure readings but reported that they had never been diagnosed with hypertension, 20.9% had raised blood pressure readings and reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, but were not compliant with the prescribed treatment, 33.6% had raised blood pressure readings, reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, and were but were determined to have raised blood pressure readings while 14.6% had controlled blood pressure readings, reported a diagnosis of hypertension and compliance with prescribed medications.

Figure 200. Percentage and status of female respondents aged 18-69 years with respect to raisedblood pressure, diagnosis, treatment, and control, by both age groups.

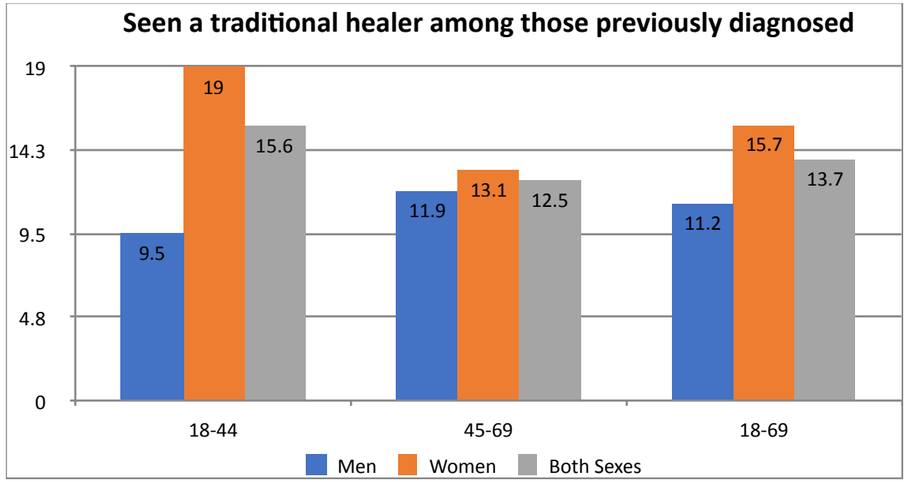


There were 533 female survey participants whose blood pressure levels were measured during their participation in Step 2. Of this number, 34.6% was determined to have raised blood pressure readings but reported that they had never been diagnosed with hypertension, 9.9% hadraised blood pressure readings and reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, but were not compliant with the prescribed treatment, 27.1% had raised blood pressure readings, reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, and were but were determined to have raised blood pressure readings while 28.3% had controlled blood pressure readings, reported a diagnosis of hypertension and compliance with prescribed medications.

There were 174 female survey participants aged 18-44 years, whose blood pressure levels were measured during their participation in Step 2. Of this number, 46.4% was determined to have raised blood pressure readings but reported that they had never been diagnosed with hypertension, 12.6% had raised blood pressure readings and reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, but were not compliant with the prescribed treatment, 12.1% had raised blood pressure readings, reported that they hadbeen diagnosed with hypertension, and prescribed antihypertensive drugs, and were but were determined to have raised blood pressure readings while 28.9% had controlled blood pressure readings, reported a diagnosis of hypertension and compliance with prescribed medications.

There were 359 female survey participants aged 45-69 years whose blood pressure levels were measured during their participation in Step 2. Of this number, 26.4% was determined to have raised blood pressure readings but reported that they had never been diagnosed with hypertension, 8.1% had raised blood pressure readings and reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, but were not compliant with the prescribed treatment, 37.6% had raised blood pressure readings, reported that they had been diagnosed with hypertension, and prescribed antihypertensive drugs, and were but were determined to have raised blood pressure readings while 28.0% had controlled blood pressure readings, reported a diagnosis of hypertension and compliance with prescribed medications.

Figure 201. Percentage of those with diabetes who have seen a traditional healer, by both sexes and age groups.



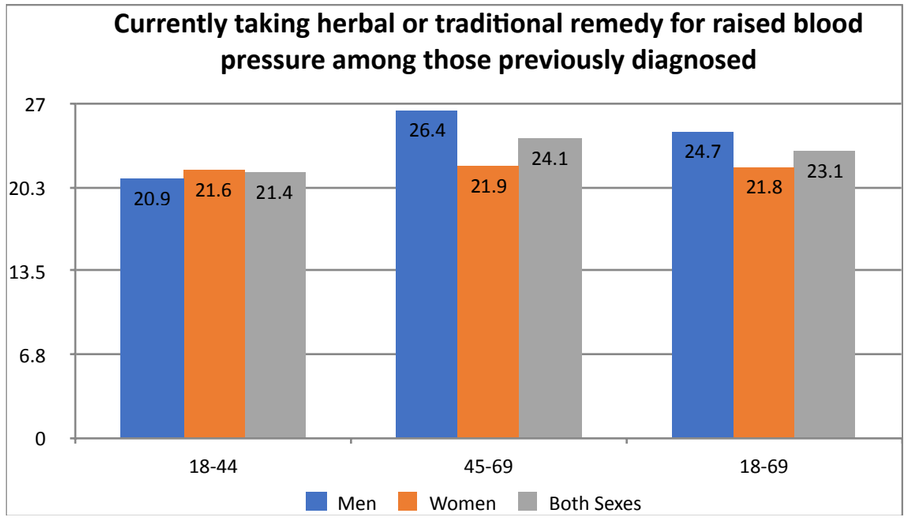
For the question which inquired on whether the respondents had seen a traditional healer after being previously diagnosed with high blood pressure, responses were recorded for 727 persons. For all respondents, 13.7% reported that had seen a traditional healer after being previously diagnosed with high blood pressure. This was reported as occurring in 15.6% of respondents aged 18-44 years (n=199) and reported to occur among 12.5% of respondents aged 45-69 years (n=528).

Of male respondents (n=254), 11.2% reported that they had seen a traditional healer after being previously diagnosed with high blood pressure. This was reported as occurring in 9.5% of respondents aged 18-44 years (n=57) and reported to occur among 11.9% of respondents aged 45-69 years (n=197).

Of female respondents (n=473), 15.7% reported that they had seen a traditional healer after being previously diagnosed with high blood pressure. This was reported as occurring in 19.0% of respondents aged 18-44 years (n=142) and reported to occur among 13.1% of respondents aged45-69 years (n=331).

The survey questionnaire also inquired about the practice of using an herbal or traditional remedyas art of the treatment of hypertension. The following Figure provides the results of the analysisof those questions.

Figure 202. Percent of respondents aged 18-69 years diagnosed with hypertension and currently taking an herbal or traditional remedy, by both sexes and age groups



For the question which inquired on whether the respondents had a practice of sometimes usingbush or herbal medicines instead of prescribed medications to treat high blood pressure, responses were recorded for 727 persons. For all respondents, 23.1% reported that they sometimes used bush/herbal medicines instead of high blood pressure medications. This was reported as occurring in 21.4% of respondents aged 18-44 years (n=199) and reported to occur among 24.1% of respondents aged 45-69 years (n=528).

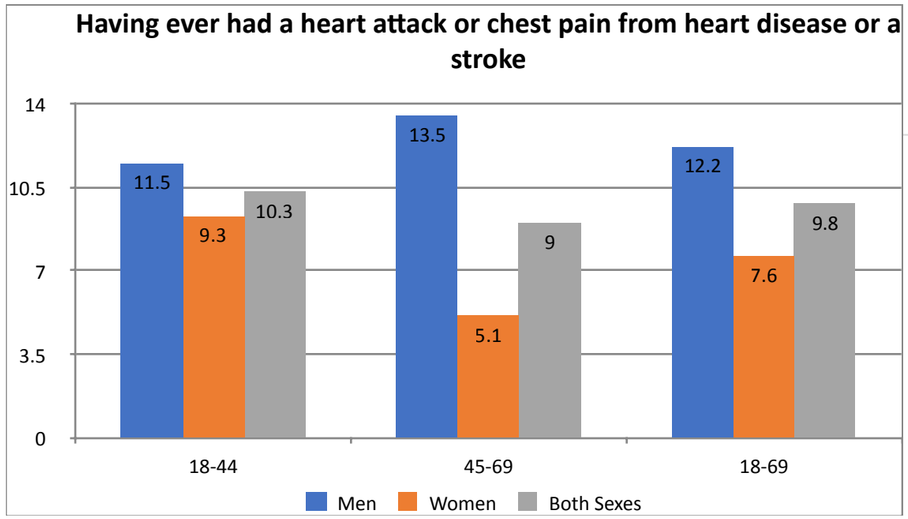
Of male respondents (n=254), 24.7% reported that they sometimes used bush/herbal medicines instead of high blood pressure medications. This was reported as occurring in 20.9% of respondents aged 18-44 years (n=57) and reported to occur among 26.4% of respondents aged 45-69 years (n=197).

Of female respondents (n=473), 21.8% reported that they sometimes used bush/herbal medicines instead of high blood pressure medications. This was reported as occurring in 21.6% of respondents aged 18-44 years (n=142) and reported to occur among 21.9% of respondents aged45-69 years (n=331).

Cardiovascular Disease

The survey questionnaire included questions that sought to ascertain the rate of cardiovascular disease among respondents. Specific parameters used to indicate such included heart attack, chest pain from heart disease and stroke. Additionally, questions were included that sought to obtain the use of aspirin or statins to prevent or treat heart disease.

Figure 203. Percentage of respondents aged 18-69 years who has ever had a heart attack or chestpain from heart disease or a stroke, both sexes and age groups.

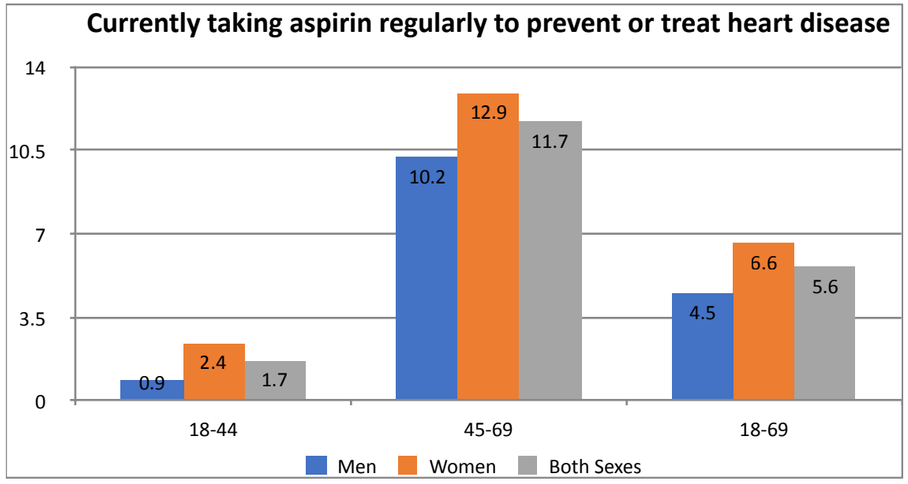


Among respondents (n=2360) of both sexes and age groups, 9.8% reported having ever had a heart attack or chest pain from heart disease or a stroke. For those aged 18-44 years (n=1236), these events were reported among 10.3% and for those aged 45-69 years (n=1124) - 9.0%.

Of male respondents of both age groups (n=931), 12.2% reported having ever had a heart attackor chest pain from heart disease or a stroke. Of male respondents aged 18-44 years (n=463), these events were reported among 11.5% and for those aged 45-69 years (n=468) – 13.5%.

Of female respondents of both age groups (n=1429), 7.6% reported having ever had a heart attack or chest pain from heart disease or a stroke. Of female respondents aged 18-44 years (n=773), these events were reported among 9.3% and for those aged 45-69 years (n=656) – 5.1%.

Figure 204. Percentage of respondents aged 18-69 years currently taking aspirin regularly to prevent or treat heart disease, by both sexes and age groups.

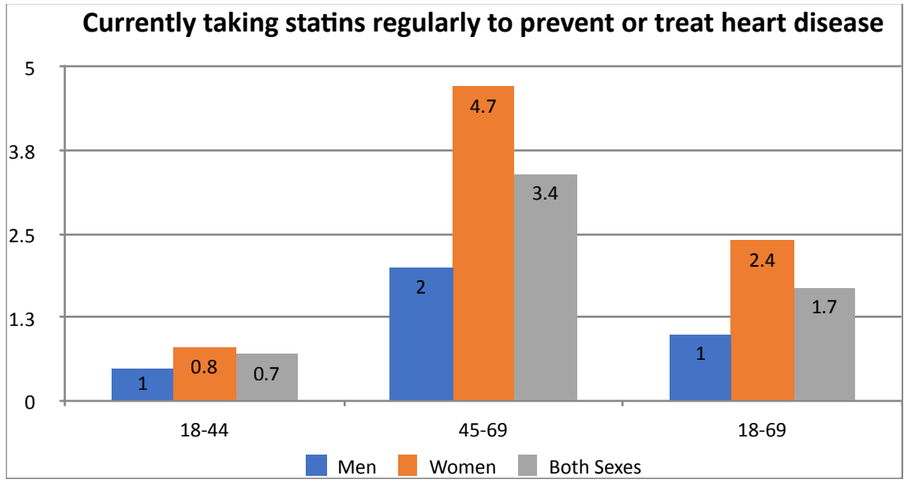


Of respondents of both sexes and age groups who responded to the question (n=2360), 5.6% reported that they were currently taking aspirin regularly to prevent or treat heart disease. For those aged 18-44 years (n=1236), the percentage was 1.7% and for those 45-69 years (n=1124), 111.7%.

Of male respondents of both age groups who responded to the question (n=931), 4.5% reportedthat they were currently taking aspirin regularly to prevent or treat heart disease. Of male respondents aged 18-44 years (n=463), the percentage was 0.9% and for those 45-69 years (n=468), 10.2%.

Of female respondents of both age groups who responded to the question (n=1429), 6.6% reported that they were currently taking aspirin regularly to prevent or treat heart disease. Of female respondents aged 18-44 years (n=773), the percentage was 2.4% and for those 45-69 years (n=656), 12.9%.

Figure 205. Percentage of respondents aged 18-69 years currently taking statins regularly to prevent or treat heart disease, by both sexes and age groups.



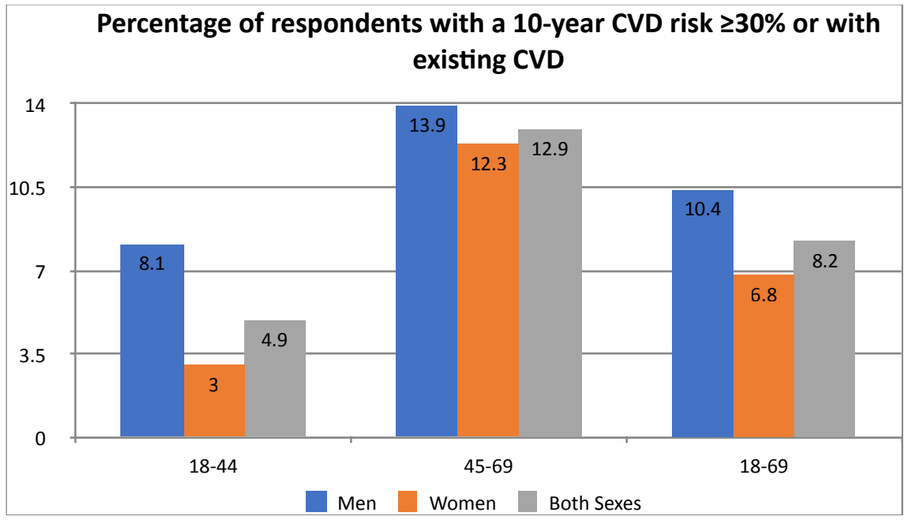
Of respondents of both sexes and age groups who responded to the question (n=2360), 1.7% reported that they were currently taking statins regularly to prevent or treat heart disease. For those aged 18-44 years (n=1236), the percentage was 0.7% and for those 45-69 years (n=1124), 3.4%.

Of male respondents of both age groups who responded to the question (n=931), 1.0% reportedthat they were currently taking statins regularly to prevent or treat heart disease. Of male respondents aged 18-44 years (n=463), the percentage was 0.5% and for those 45-69 years (n=468), 2.0%.

Of female respondents of both age groups who responded to the question (n=1429), 2.4% reported that they were currently taking statins regularly to prevent or treat heart disease. Of female respondents aged 18-44 years (n=773), the percentage was 0.8% and for those 45-69 years (n=656), 4.7%.

Figure 206. Cardiovascular risks of respondents aged 18-69 years, by both sexes and age groups.

A 10-year CVD risk of ≥30% is defined according to age, sex, blood pressure, smoking status (current smokers OR thosewho quit smoking less than 1 year before the assessment), total cholesterol, and diabetes (previously diagnosed OR a fastingplasma glucose concentration >7.0 mmol/l (126 mg/dl)).



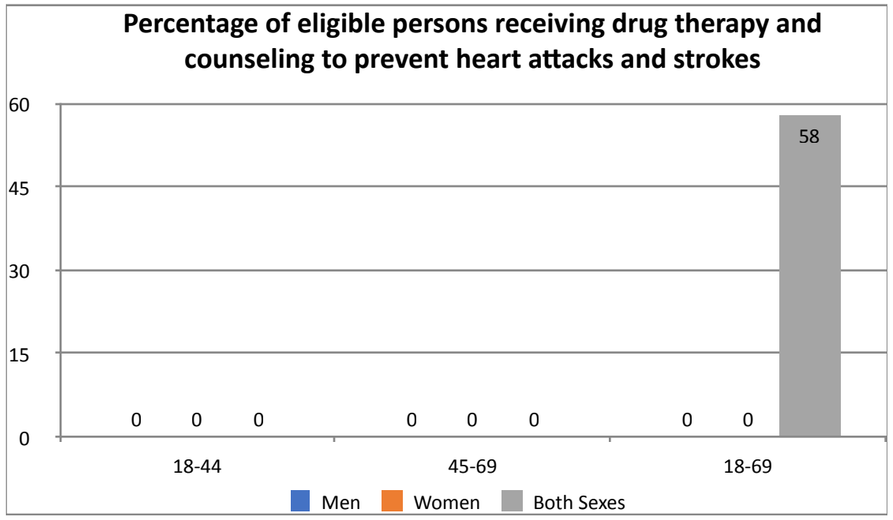
The percentage of respondents aged 40-69 years with a 10-year CVD risk ≥30% or with existing CVD (n=723) was 8.2%. The percentage of respondents aged 40-54 years (n=428) with a 10-yearCVD risk ≥30% or with existing CVD was 4.9% while that of respondents aged 45-69 years (n=295)was 12.9%.

Of male respondents aged 40-69 years (n=270), 10.4% had a calculated 10-year CVD risk ≥30% orwith existing CVD. The percentage of male respondents aged 40-54 years (n=160 with acalculated 10-year CVD risk ≥30% or with existing CVD was 8.1% while that of respondents aged45-69 years (n=108) was 13.9%.

Of female respondents aged 40-69 years (n=455), 6.8% had a calculated 10-year CVD risk ≥30% or with existing CVD. The percentage of female respondents aged 40-54 years (n=268) with a calculated 10-year CVD risk ≥30% or with existing CVD was 3.0% while that of respondents aged45-69 years (n=374) was 12.3%

For the purposes of the data below on treatment and/or counselling, counselling is defined as receiving advice from a doctor or other health worker to quit using tobacco or not start, reduce salt in diet, eat at least five servings of fruit and/or vegetables per day, reduce fat in diet, start ordo more physical activity, maintain a healthy body weight or lose weight.

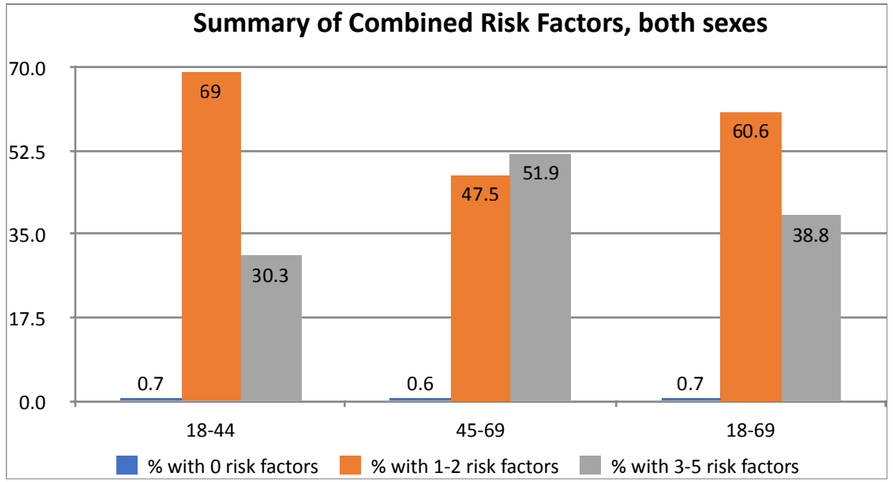
Figure 207. Cardiovascular risks with treatment and/or counselling, both sexes and age groups.



Validity for the data that was available for the percentage of eligible persons receiving drug therapy and counselling to prevent heart attacks and strokes description could not be assured tofacilitate commentary.

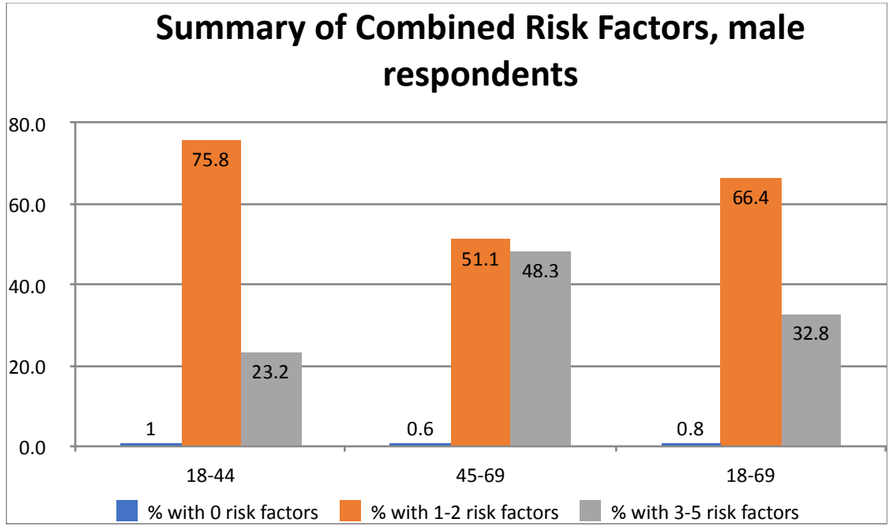
Combined Risk Factors

Figure 208. Summary of risk factors of respondents aged 18-69 years, by both sexes and agegroups.



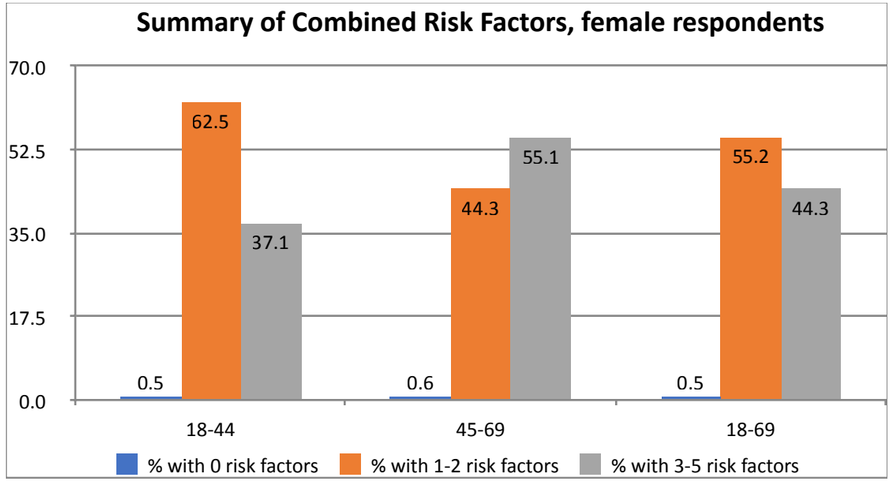
Of respondents with data collected (n=1949), evaluation of the risk factors revealed that 0.7% reported no risk factors, 60.6% reported 1-2 risk factors and 38.8% reported 3-5 risk factors. Ofrespondents aged 18-44 years (n=1013), evaluation of the risk factors revealed that 0.7% reported no risk factors, 69.0% reported 1-2 risk factors and 30.3% reported 3-5 risk factors. Ofmale respondents aged 45-69 years (n=936), evaluation of the risk factors revealed that 0.6% reported no risk factors, 47.5% reported 1-2 risk factors and 51.9% reported 3-5 risk factors.

Figure 209. Summary of risk factors of male respondents aged 18-69 years, by age groups.



Of male respondents with data collected (n=753), evaluation of the risk factors revealed that 0.8% reported no risk factors, 66.4% reported 1-2 risk factors and 32.8% reported 3-5 risk factors.Of male respondents aged 18-44 years (n=371), evaluation of the risk factors revealed that 1.0% reported no risk factors, 75.8% reported 1-2 risk factors and 23.2% reported 3-5 risk factors. Of male respondents aged 45-69 years (n=382), evaluation of the risk factors revealed that 0.6% reported no risk factors, 51.1% reported 1-2 risk factors and 48.3% reported 3-5 risk factors.

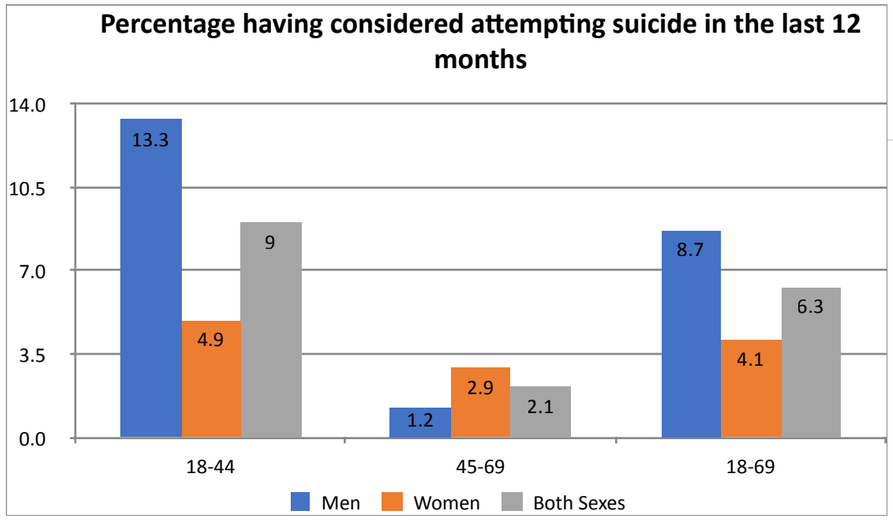
Figure 210. Summary of risk factors of female respondents aged 18-69 years, by age groups.



Of female respondents with data collected (n=1196), evaluation of the risk factors revealed that0.5% reported no risk factors, 55.2% reported 1-2 risk factors and 44.3% reported 3-5 risk factors.Of female respondents aged 18-44 years (n=642), evaluation of the risk factors revealed that 0.5% reported no risk factors, 62.5% reported 1-2 risk factors and 37.1% reported 3-5 risk factors.Of female respondents aged 45-69 years (n=554), evaluation of the risk factors revealed that 0.6% reported no risk factors, 44.3% reported 1-2 risk factors and 55.1% reported 3-5 risk factors.

Mental Health

Figure 211. Percentage of respondents aged 18-69 years having considered attempting suicide in the last 12 months, by both sexes and age groups.

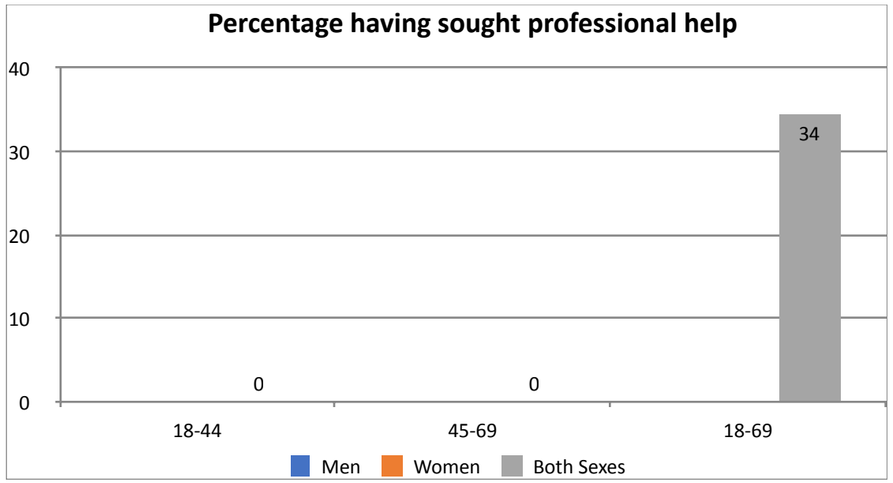


A question inquired whether a respondent considered attempting suicide in the past 12 months.For 2345 respondents of both age groups, 6.3% reported that this occurred. The percentage of respondents aged 18-44 years (n=1229) that reported having considered attempting suicide in the past 12 months was 9.0% and 2.1% of respondents aged 45-69 years (n=1116).

Of male respondents of both age groups (n=925), 8.7% reported that this occurred. Thepercentage of respondents aged 18-44 years (n=462) that reported having considered attempting suicide in the past 12 months was 13.3% and 1.2% of respondents aged 45-69 years (n=463).

Of female respondents of both age groups (n=1420), 4.1% reported that this occurred. The percentage of respondents aged 18-44 years (n=767) that reported having considered attempting suicide in the past 12 months was 4.9% and 2.9 of respondents aged 45-69 years (n=653).

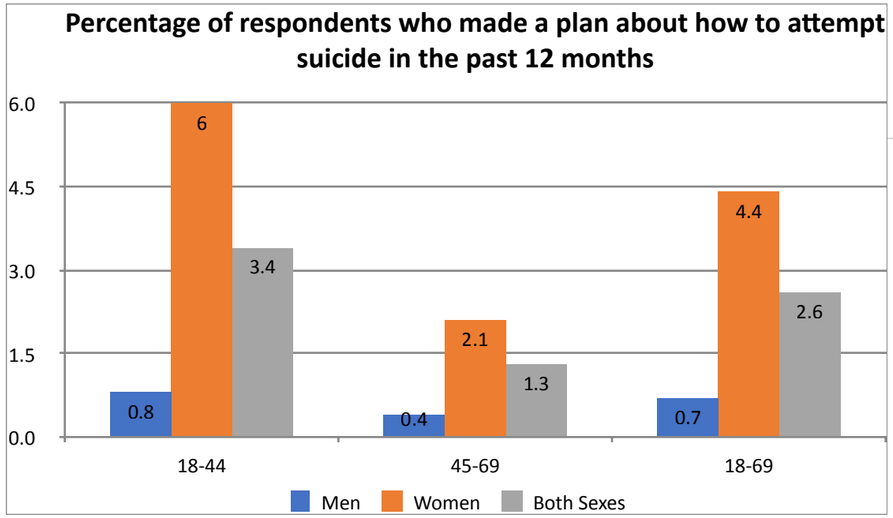
Figure 212. Percentage of respondents aged 18-69 years having considered attempting suicide inthe last 12 months and sought professional help, by both sexes and age groups.



A question inquired whether a respondent considered attempting suicide in the past 12 monthsand subsequently sought help for those thoughts. For 61 respondents, 34.4% reported having considered attempting suicide in the past 12 months and subsequently sought help for those thoughts.

The validity for the data that was available for respondents that had considered attempting suicide in the last 12 months and sought professional help by both sexes and age groups could not be assured to facilitate commentary.

Figure 213. Percentage of respondents aged 18-69 years having considered attempting suicide in the last 12 months and made a plan to do so, by both sexes and age groups.

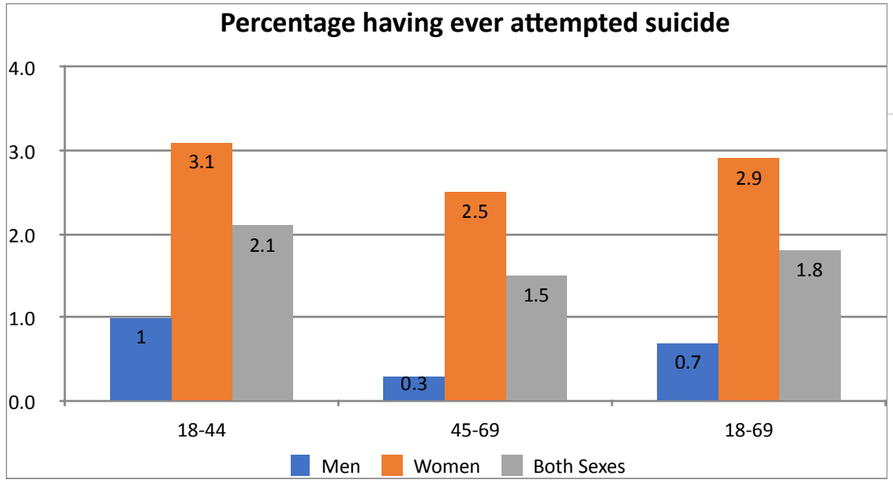


A question inquired whether a respondent made a plan about how to attempt suicide in the past 12 months. For 2344 respondents of both sexes and age groups, 2.6% reported that this occurred.The percentage of respondents aged 18-44 years (n=1223) that reported having considered attempting suicide in the past 12 months was 3.4% and 1.3% of respondents aged 45-69 years (n=1121).

Of male respondents of both age groups (n=924), 0.7% reported that this occurred. Thepercentage of respondents aged 18-44 years (n=454) that reported having considered attempting suicide in the past 12 months was 0.8% and 0.4% of respondents aged 45-69 years (n=470).

Of female respondents of both age groups (n=1420), 4.4% reported that this occurred. The percentage of respondents aged 18-44 years (n=769) that reported having considered attempting suicide in the past 12 months was 6.0% and 2.1% of respondents aged 45-69 years (n=651).

Figure 214. Percentage of respondents aged 18-69 years having ever attempted suicide, by both sexes and age groups.

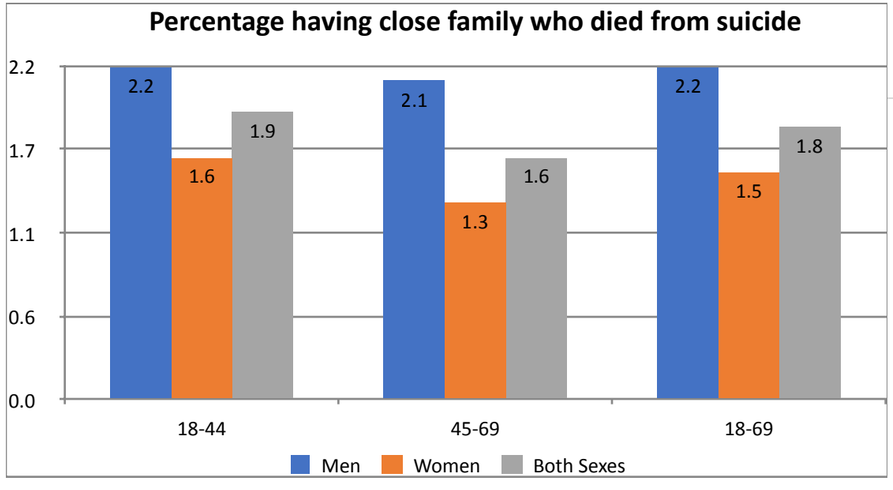


A question inquired whether a respondent ever attempted suicide. For 2348 respondents by bothsexes and age groups, 1.8% reported that this occurred. The percentage of respondents aged 18-44 years (n=1230) that reported ever having attempted suicide in the past 12 months was 2.1% and 1.5% of respondents aged 45-69 years (n=1118).

Of male respondents of both age groups (n=927), 0.7% reported that this occurred. Thepercentage of respondents aged 18-44 years (n=462) that reported ever having attempted suicide in the past 12 months was 1.0% and 0.3% of respondents aged 45-69 years (n=465).

Of female respondents of both age groups (n=1421), 2.9% reported that this occurred. The percentage of respondents aged 18-44 years (n=768) that reported ever having attempted suicide in the past 12 months was 3.1% and 2.5% of respondents aged 45-69 years (n=653).

Figure 215. Percentage of respondents aged 18-69 years who have ever had anyone in their closefamily die from suicide, by both sexes and age groups.



A question inquired whether a respondent had a close family member that died from committingsuicide. For 2348 respondents, 1.8% reported that this occurred. The percentage of respondentsaged 18-44 years (n=1229) that reported having had a close family member that died from committing suicide was 1.9% and 1.6% of respondents aged 45-69 years (n=1119).

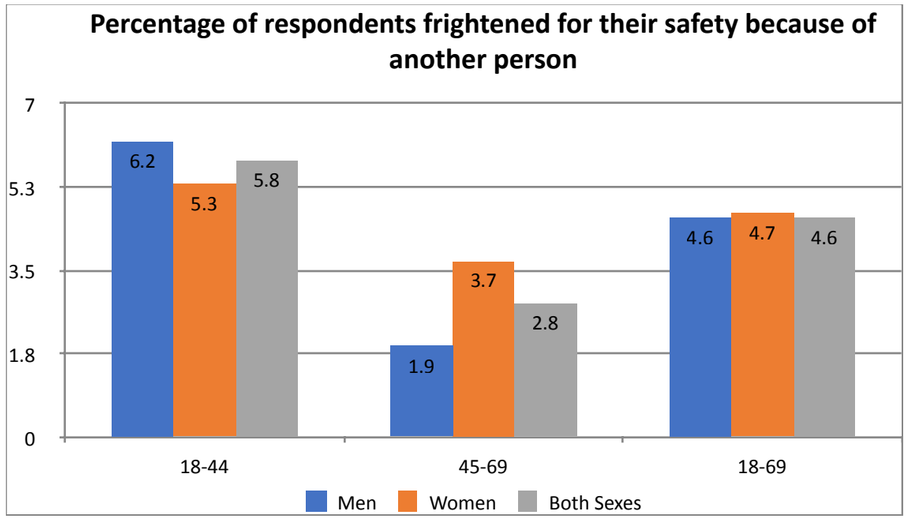
Of male respondents (n=927), 2.2% reported that this occurred. The percentage of respondentsaged 18-44 years (n=462) that reported having had a close family member that died from committingsuicide was 2.2% and 2.1% of respondents aged 45-69 years (n=465).

Of female respondents (n=1421), 1.5% reported that this occurred. The percentage of respondents aged 18-44 years (n=767) that reported having had a close family member that diedfrom committing suicide was 1.6% and 1.3% of respondents aged 45-69 years (n=654).

Violence and Injury

Interpersonal Events

Figure 216. Percentage of respondents frightened for their safety because of another person.

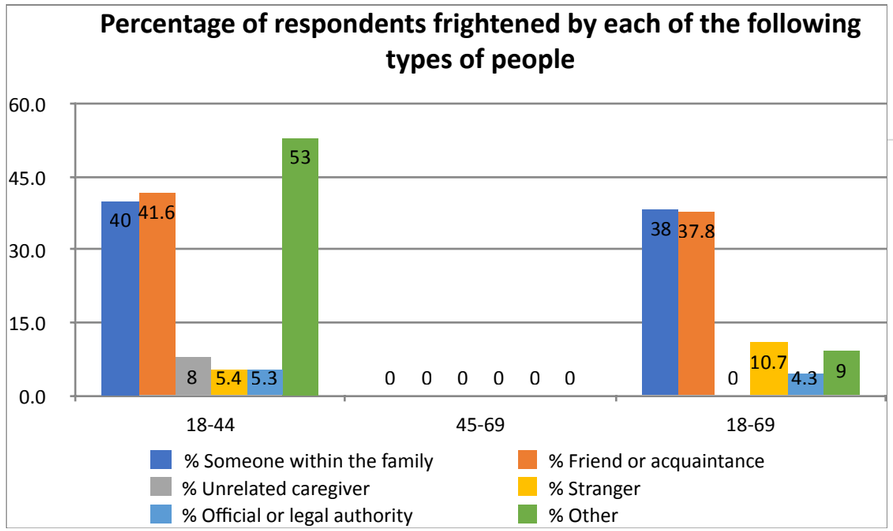


A question inquired whether a respondent ever felt frightened for his/her safety. For 2334 respondents by both sexand age groups, 4.6% reported that this occurred. The percentage of respondents aged 18-44 years (n=1223) that reported ever felt frightened for his/her safety in the past 12 months was 5.8% and 2.8% of respondents aged 45-69 years (n=1111).

Of male respondents of both age groups (n=917), 4.6% reported that this occurred. Thepercentage of respondents aged 18-44 years (n=459) that reported ever felt frightened for his/her safety in the past 12 months was 6.2% and 1.9% of respondents aged 45-69 years (n=458).

Of female respondents of both age groups (n=1417), 4.7% reported that this occurred. The percentage of respondents aged 18-44 years (n=764) that reported ever felt frightened for his/her safety in the past 12 months was 5.3% and 3.7% of respondents aged 45-69 years (n=653).

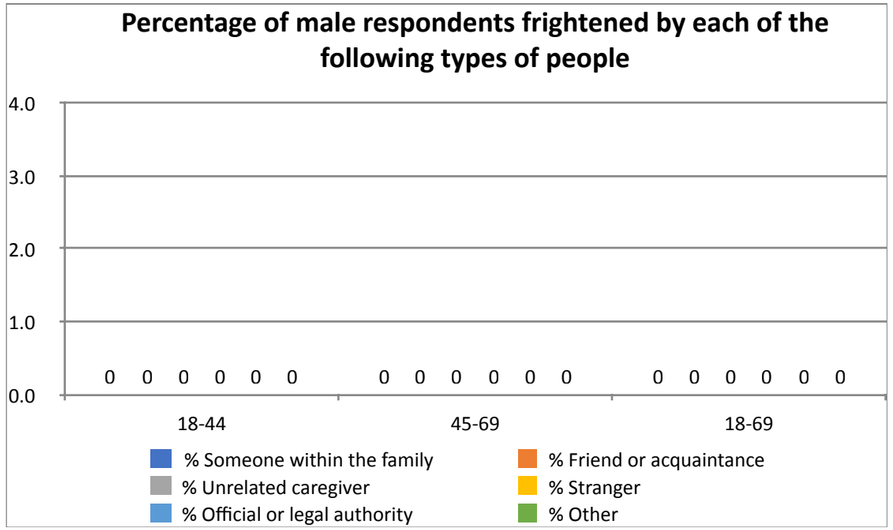
Figure 217. Percentage of respondents aged 18-69 years frightened by each of the followingtypes of people, by both sexes and age groups.



Another question on the survey questionnaire inquired about the incidence of being frightened for personal safety or the safety of family because of the anger or threats of another person(s) and the identification of the person who caused the threat. The following responses were reported by 89 respondents. Someone in the family was reported by 38.2%, by a from acquaintance in 37.8% of incidents, by an unrelated caregiver in 0.0% of occasions, by a stranger in 10.7% of cases, by an official or legal authority figure in 4.3% of incidents and by other in 9.0% of cases. Of respondents ages 18-44 years (n=53), 40.0% were frightened by some within the family, 41.6% were frightened by a friend of acquaintance, 7.7.% were frightened by an unrelated caregiver, 5.4% were frightened by a stranger, 5.3% were frieghtened by an official or legal authority, and 53.0% were frieghtened by another type of person

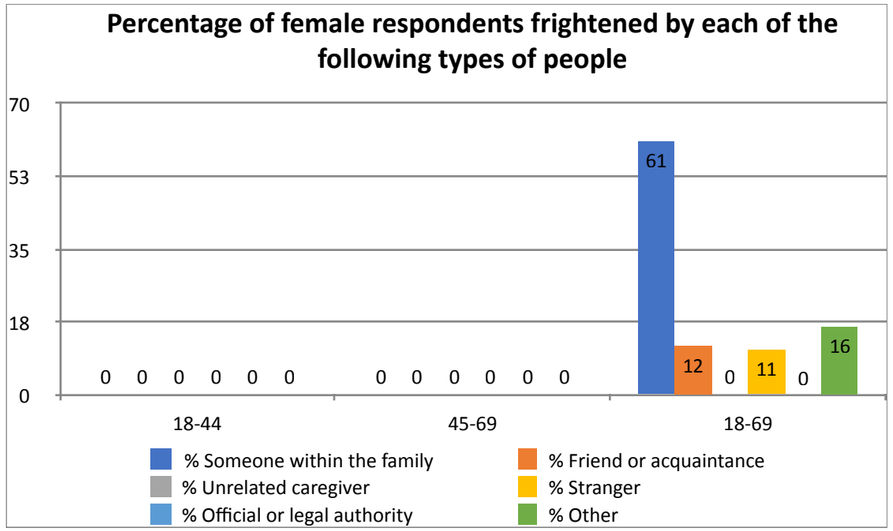
Validity for the data that was available for respondents aged 45-69 years who frightened by different types of people could not be assured to facilitate commentary.

Figure 218. Percentage of male respondents frightened by each of the followingtypes of people, by both age groups.



Validity for the data that was available for male respondents when about the incidence of being frightened for personal safety or the safety of family because of the anger or threats of another person(s) and the identification of the person who caused the threat could not be assured to facilitate commentary.

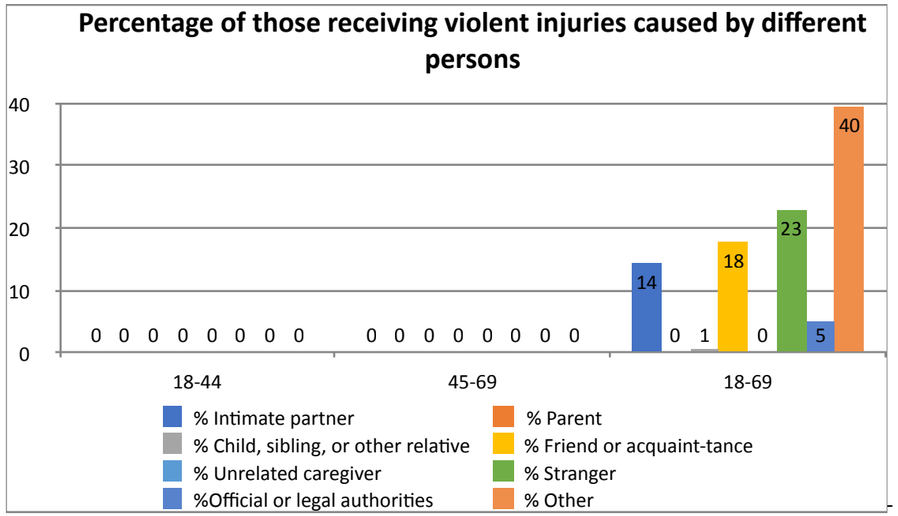
Figure 219. Percentage of female respondents frightened by each of the followingtypes of people, by both age groups.



The responses from female respondents to the question on the survey questionnaire that inquired about the incidence of being frightened for personal safety or the safety of family because of the anger or threats of another person(s) and the identification of the person who caused the threat were as follows- for all female respondents (n=54), someone in the family was reported by 60.9% (n=54); by a friend or acquaintance in 11.6%; by an unrelated caregiver in 0.0% of occasions, by a stranger in 10.8% of cases, by an official or legal authority figure in 0.3% of incidents and by other in 16.4% of cases.

Validity for the data that was available for female respondents in both age groups who frightened by different types of people could not be assured to facilitate commentary.

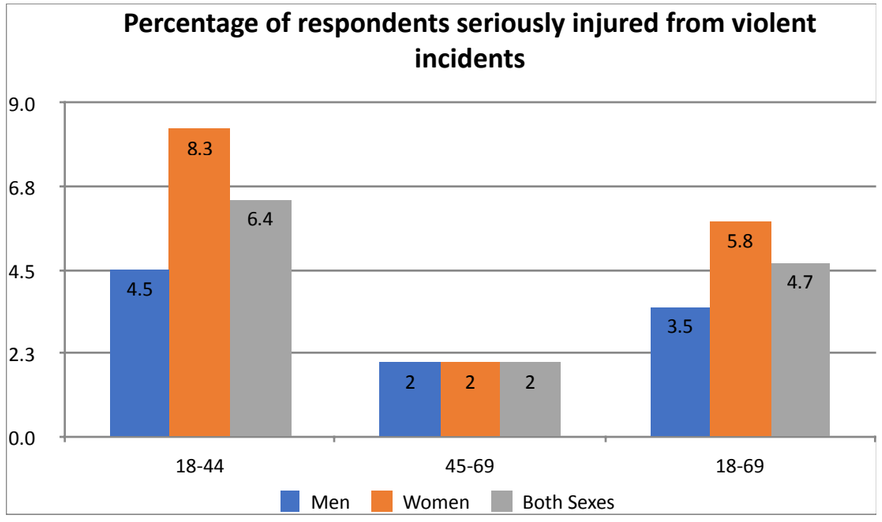
Figure 220. Percentage of respondents aged 18-69 years who experienced violent injuries and category of person causing same, both sexes and age groups.



One of the questions on the survey questionnaire inquired about the incidence of having received violent injuries caused by different persons in the past 12 months and the identification of the relationship of the perpetrator of same. The following responses were reported by 54 respondents. Intimatepartner was reported as the perpetrator in 14.3% of incidents, 0% by a parent, by a child, siblingor other relative in 0.5% of instances, by a friend or acquaintance in 17.8% of incidents, by an unrelated caregiver in 0.0% of occasions, by a stranger in 22.9% of cases by an official or legal authority figure in 5.1% of incidents and by other in 39.5% of cases.

Validity for the data that was available for respondents who experienced violent injuries and category of person causing same, by both sexes and age groups could not be assured to facilitatecommentary.

Figure 221. Percentage of respondents aged 18-69 years reporting having been seriously injuredfrom violent incidents, by both sexes and age groups.



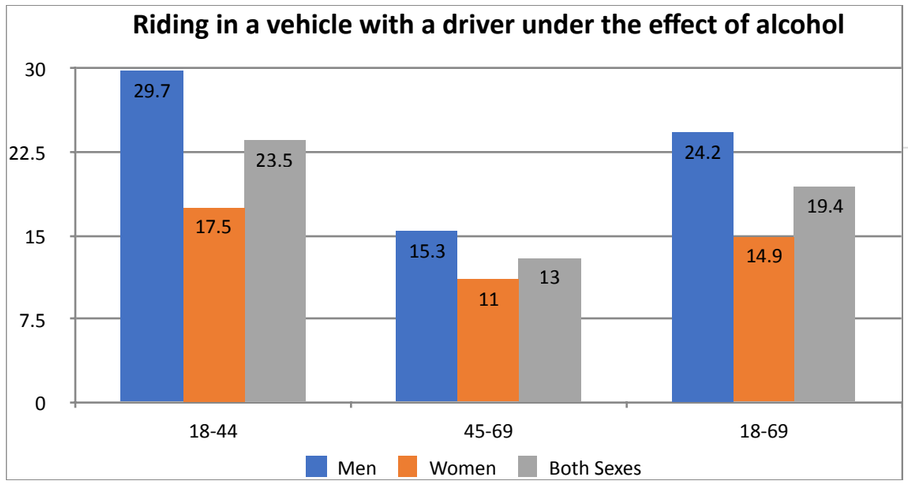
A question inquired on the frequency with which a respondent was in a violent incident in whichhe/she was injured and required medical attention in the past 12 months. For 2333 respondents,4.7% reported that this occurred. The percentage of respondents aged 18-44 years (n=1219) thatreported having been in a violent incident in which an injury resulted that required medical attention in the past 12 months was 6.4% and 2.0% of respondents aged 45-69 years (n=1114).

Of male respondents (n=920), 3.5% reported that this occurred. The percentage of respondentsaged 18-44 years (n=458) that reported having been in a violent incident in which an injury resulted that required medical attention in the past 12 months was 4.5% and 2.0% of respondents aged 45-69 years (n=462).

Of female respondents (n=1413), 5.8% reported that this occurred. The percentage of respondents aged 18-44 years (n=765) that reported having been in a violent incident in which an injury resulted that required medical attention in the past 12 months was 8.3% and 2.0% of respondents aged 45-69 years (n=648).

Transportation-related Risk Behavior

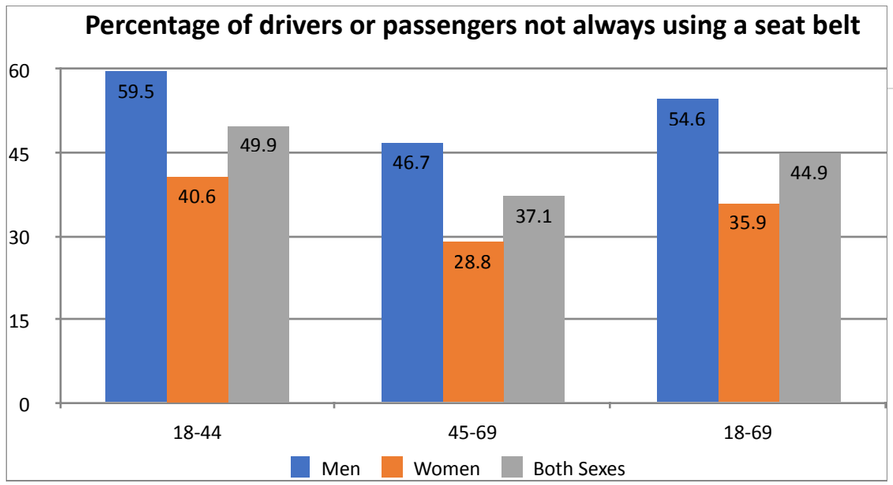
Figure 222. Percentage of respondents aged 18-69 years who rode in a vehicle with a driver under the effect of alcohol, by both sexes and age groups.



A question inquired on the frequency with which a respondent rode as a passenger in a motorizedvehicle with a driver that had consumed 2 or more alcoholic drinks in the past 30 days. For 2347respondents, 19.4% reported that this occurred. The percentage of respondents aged 18-44 years (n=1226) that reported having rode as a passenger in a motorized vehicle with a driver thathad consumed 2 or more alcoholic drinks was 23.5% and 13.0% of respondents aged 45-69 years(n=1121).

Of male respondents (n=924), 24.2% reported having rode as a passenger in a motorized vehiclewith a driver that had consumed 2 or more alcoholic drinks. The percentage of male respondentsaged 18-44 years (n=459) that reported having rode as a passenger in a motorized vehicle with adriver that had consumed 2 or more alcoholic drinks was 29.7% and 15.3% of male respondentsaged 45-69 years (n=465).

Figure 223. Percentage of respondents aged 18-69 years who did not always use a seatbelt wheneither a driver or passenger, by both sexes and age groups.

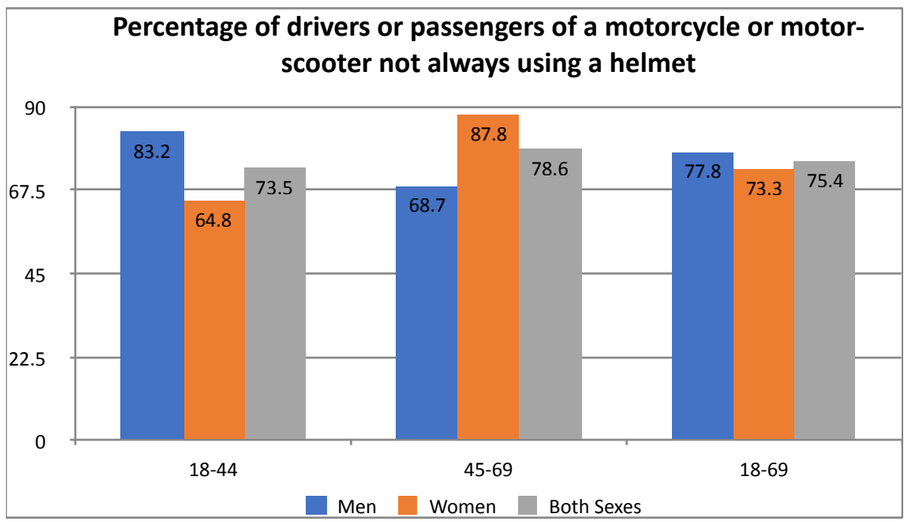


A question inquired on the frequency with which a respondent did not always wear a seatbelt when either days the driver or passenger of a motorized vehicle in the past 30 days. For 2281 respondents of both sexes and age groups, 44.9% reported having not always using a seatbelt when a driver or passenger of a motorized vehicle in the past 30 days. The percentage of respondents aged 18-44 years (n=1199) that reported having not always using a seatbelt when a driver or passenger of a motorized vehicle in the past 30 days was 49.9% and 37.1% of respondents aged 45-69 years (n=1082).

Of male respondents of both age groups (n=896), 54.6% reported having not always using a seatbelt when a driver or passenger of a motorized vehicle in the past 30 days. The percentage of respondents aged 18-44 years (n=451) that reported having not always using a seatbelt whena driver or passenger of a motorized vehicle in the past 30 days was 59.5% and 46.7% of respondents aged 45-69 years (n=445).

Of female respondents of both age groups (n=1385), 35.9% reported having not always using a seatbelt when a driver or passenger of a motorized vehicle in the past 30 days. The percentage of respondents aged 18-44 years (n=748) that reported having not always using a seatbelt whena driver or passenger of a motorized vehicle in the past 30 days was 40.6% and 28.8% of respondents aged 45-69 years (n=637).

Figure 224. Percentage of respondents aged 18-69 years who did not always wear a helmet during the past 30 days when either a driver or passenger of a motorcycle or motor-scooter, by both sexes and age groups.



A question inquired on the frequency with which a respondent was a driver or passenger of a motorcycle or motor-scooter and did not always wear a helmet during the past 30 days. For 835respondents, 75.4% reported having not always worn a helmet as a driver or passenger of a motorcycle or motor-scooter in the past 30 days. The percentage of respondents aged 18-44 years (n=431) that reported having not always worn a helmet when a driver or passenger of a motorcycle or motor-scooter in the past 30 days was 73.5% and 78.6% of respondents aged 45- 69 years (n=404).

Of male respondents (n=334), 77.8% reported having not always worn a helmet as a driver or passenger of a motorcycle or motor-scooter in the past 30 days. The percentage of male respondents aged 18-44 years (n=176) that reported having not always worn a helmet when a driver or passenger of a motorcycle or motor-scooter in the past 30 days was 83.2% and 68.7% of male respondents aged 45-69 years (n=158).

Of female respondents (n=501), 73.3% reported having not always worn a helmet as a driver or passenger of a motorcycle or motor-scooter in the past 30 days. The percentage of female respondents aged 18-44 years (n=255) that reported having not always worn a helmet when a driver or passenger of a motorcycle or motor-scooter in the past 30 days was 64.8% and 87.8% of female respondents aged 45-69 years (n=246).

DISCUSSION

Demographics

There are many social stratifiers influencing health and quality of life. These stratifiers, also known as the social determinants of health, include sex, age, education, employment, income and others. Inequities along any of these stratifiers fuel ill-health. Other determinants that impact health relate to environmental, climate and commercial determinants. The male to female sex distribution in the study population is 1:1.5. In the general population this distribution is approximately 1:1. Notwithstanding the social construct of men being considered the head of households, women are thought to be the glue and centre of the Bahamian family with influence not only her personal consumption and activity patterns, but also that of her children and extended family.

Literature shows that lower education levels are associated with increased risks of NCDs.
The majority (97.5%) of respondents has at least a baseline high-school education, with no notable variances between the sexes. Of these, 26.8% had achieved a tertiary level degree. For those who self-reported 'high-school' as their highest level of achievement, the study did not make a distinction between those receiving a high-school diploma versus a leaving certificate. This distinction, had it been made, may have given additional insights and unfolded additional implications for the level of health literacy within the Bahamian adult population.

The study showed that respondents were more likely to have never been married (51.4%) than to have been married. There were 37.3% of respondents in legal unions (married or separated) while another 11.3% had been previously married but are now either widowed or divorced.

The survey reflected that the Civil Service (public sector) contributes the most to employment of the respondents at 56.3%. This presents an opportunity for government to create workplace policies that can influence the health and wellbeing of the average working individual.

Interactions with Health Care Providers

For the following discussion, survey responses were examined to determine if, during the interactions with healthcare workers, habits, practices and behaviours that lend themselves to higher disease risk were discussed with respondents. Specifically, these behaviours included tobacco consumption,salt consumption, the consumption of fruits and vegetables, levels of physical activity, the maintenance of healthy body weights and the consumption of sugary beverages. Among all respondents across both sexes and age groups, advice given on key behavioural risk factors, as recalled by respondents, was low. A ten

(10) percentage point or more variance was observed for reported discussions/advice for the following:

- On advice to quit using tobacco or not to start, 13.4% [male, 18.8%; females, 9.4%] reported being advised to quit or not start. A male was twice likely to receive this kind of advice.
- Advice about reducing fat intake in the diet – 33.8% [male, 25.5%; female, 39.9%] of all respondents across both sexes and age groups were advised by a health care worker to reduce fat intake. Females are more likely to be advised by a health care worker on the consumption of fat. This may be a result of the fact that women are more likely to have higher BMIs ratios that characterize them as obese. This indicates a potential area for education among health providers to ensure that this advice is evenly spread among both sexes, and increased as a part of the health consultation as a rule as males have higher 10-year CVD risk [males, 10.4%; females, 6.8%];
- When asked if a health care worker raised the issue of maintaining a healthy body weight or losing weight, 38.1% [male, 32.8%; female, 42.0%] of all respondents across both sexes and age groups reported that this was so. The noticeable 10% difference between both sexes reporting having received this advice may be a consequence of the body mass indices evaluation which reflect that more likely than not, female participants have a greater likelihood of having unhealthy BMI assessment results.

Other lifestyle advice topics were also low but showed smaller sex variances.

- 32.4% [male, 34.0%; females, 31.3%] of all respondents across both sexes and age groups reported having been advised by a health care worker to reduce the amount of salt in their diets.
- When assessing whether there was advice given by a healthcare worker to eat at least five servings of fruits and/or vegetables each day, 39.7% [males, 37.2%; female, 41.5%] of all respondents across both sexes and age groups reported having received such advice.
- Regarding receiving advice on the level of physical activity, 44.6% [male, 40.3%; female, 47.8%] of all respondents across both sexes and age groups reported having been advised by a health careworker to either begin or increase their level of physical activity.
- Related to advice on the consumption of sugary beverages, among all respondents, 30.8% [male, 26.7%; female, 33.9%] reported having had received such advice.

Oral Health

In more recent times, there is increasing acceptance and recognition of the role oral health may play as a significant risk factor for non-communicable diseases. It has been reported by the FDI World Dental Federation in its publication entitled *Accelerating Action on Oral Health and NCDs: Achieving an Integrated Response* that not only does oral diseases affect approximately 3.9 billion people worldwide,

untreated tooth decay or dental caries impacts about 44% of the world's population. It cannot be understated that the impact of oral diseases on the quality of life is significant, and in the worst cases, can lead to malnutrition and social isolation in adults. Oral health preserving behaviour should be geared toward caries, periodontal (gum) disease and oral cancer. Studies have concluded that all major NCDs, including most oral diseases, share similar social determinants and common modifiable risk factors. These include poor diet, especially one that is high in sugars (which is one of the main causes of tooth decay); tobacco use (which is associated with periodontal disease); and the harmful use of alcohol. Whereas many of the causes of oral diseases are said to lie outside the direct influence of health professionals, it remains imperative that an integrated approach to tackle the combined burden of oral diseases and other NCDs be adopted, by addressing the identified common modifiable risk factors and social determinant.

Cancer Screenings

An important part of the prevention and control of non-communicable diseases is the participation in screening programmes. The Bahamas, through the NHI standard benefits package, has begun to formalize and increase the affordability and availability of health screening.

The earlier cancers are detected through proven screening modalities, the higher the cure rates and the more favourable the prognosis. Cervical cancer screening was explored, revealing that 67.5% of women reported having been screened at least once in their lifetime.

Health Behaviours and Nutrition Risk Factors

STEPS 2019 makes attempts to understand factors that may influence the appropriateness of diet.

Without contradiction, Bahamians are unhealthy eaters – males more disproportionally so than females. Moreover, there are significant gaps between knowledge and practices; and most strikingly, gaps as well as limited insights into personal behaviours against what are healthy intake levels. For example, 94.3% of respondents believed too much salt is harmful to health; 66.5% indicated they consumed the right amount of salt. Yet the objective, biochemical measure done in STEPS 3 disagrees, showing that participants on average consumed double the amount (10 grams) of salt versus the recommended 5 grams or less per day.

Science throughout the decades have linked the consumption of too much sodium (through intake of salt) and not enough potassium, are responsible for increasing incidence of hypertension, heart disease and stroke. It is well established that main culprits of dietary salt over-consumption are prepared cheese, pre-packaged and processed foods (pre-cooked meals, and processed meats like bacon, ham, and salami) and salty snacks as well as breads. Practical steps to reduce salt intake when preparing, cooking and consuming foods will be to avoid or minimize intake of these items. Also limiting or avoiding high-sodium condiments (e.g., ketchup, soy sauce, fish sauce and bouillon), removing saltshakers from food tables (both in homes

and restaurants), and choosing products with lower sodium content. Potassium levels were not measured in STEPS 2019. Some foods high in potassium are spinach, broccoli, lentils, beans, avocado and banana. But STEPS 2019 found that no age group nor sex consume the daily recommended amounts of fruits and vegetables. Therefore, the potential mitigating effect of potassium is either blunted or nullified.

The diets of respondents are further characterized by too much fat and too much consumption of sugary beverages.

Food quality is multi-factorial. One factor that improves food quality is where and how it is prepared. It is generally believed and accepted that meals prepared at home are more healthy than meals prepared outside the home. Respondents seem to be poised to benefit from this belief as the practice reported by respondents were that 50.5% of respondents mentioned that a step taken to reduce high salt consumption was the avoidance of consuming food prepared outside of the home. However, about 65% of respondents who prepared food at home always or often added salt. This suggests greater education on how to improve the healthiness of meals prepared at home through education and possible food preparation demonstrations. The Bahamas Household Expenditure Survey (2013), showed that 64.1% of the population ate from a fast-food restaurant between 1 to 3 times per week – the poor (77.9%) more so than those otherwise categorized (62.4%). One approach to reducing the availability of unhealthy foods prepared outside of the home include the combined approach of placing a moratorium of the number of fast-food restaurants; and creating and sharing re-formulated recipes of typical Bahamian food delights that use less sugar, lower amounts of fats and healthy flavour inducing alternatives that do not compromise significantly the rich flavour Bahamian (and Caribbean) delicacies.

Other NCD Risk Factors

Physical Activity

Research affirms that physical activity improves an individual's overall well-being while reducing symptoms of depression and anxiety. Even though persons who are insufficiently active have a 20% to 30% increased risk of death compared to people who are sufficiently active, the World Health Organization notes that one in four adults do not meet the global recommended levels of physical activity.

The benefits of both moderate- and vigorous-intensity physical activity include healthimprovement and can take the form of activities such as walking, cycling, jogging, running, or anyactive recreation and play. In addition, regular physical activity is proven to help prevent and manage noncommunicable diseases such as heart disease, stroke, diabetes, and several cancers.It also helps prevent hypertension, maintain healthy body weight, and can improve mental health,quality of life and well-being.

What was encouraging was that 59.7% of STEPS respondents reported that they were sufficiently active and met the WHO criteria for sufficient physical activity – with older respondents being more active than younger ones. This encouraging level of physical activity is likely the direct result of increasing numbers of outdoor fitness clubs as well as government investment in community parks outfitted with gym equipment in some communities, walking/jogging paths, basketball courts as well as a public swimming facility. Improvements in the level of physical activity within communities may be realized through addressing issues related to community safety and the overall walkability within local communities.

Body Mass Index

The mean BMI of respondents was borderline obese at 29.8 kg/m^2. As mentioned previously, females were mor likely to be classified by BMI as obese with 54.8% having that a BMI greater than29.9 kg/m^2. For more than a decade, public health professionals and health care workers have raised the alarm on the observation of an increasingly more overweight. This alarm has not been supported by sufficient systematic and system-derived initiatives and programmes to be classified as a coordinated and sustained action to halt or reverse the obesity problem.

STEPS 2 results reveal that 43.7% of all participants meet the obese criterion, with a sex variance of females (54.8%) and males (31.8%). It is a much-accepted reality that females have a harder time losing weight than males due to a myriad of factors, not least among them is stress-induced cortisol levels. And as such provides a research opportunity to understand the cofounders to maintaining healthy weight among females.

Alcohol Consumption

Alcohol consumption has historically been a challenge in West Indian society, and The Bahamas is no exception. The STEPS 2019 results shows that the lifetime prevalence (meaning the prevalence of ever drinking alcohol) is 78.4% for male, and 63.7% for females. Of all with lifetime prevalence, 49.5% of respondents are current alcohol drinkers (males, 59%; females, 40.7%).

Males are more likely to be heavy episodic 'binge' drinkers (males, 1 in 7 [or 12.5%]; and females, 1 in five [or 23.1%]). Overall, and for both sexes, binge drinking occurred among 1 in 6 current drinkers (17.6%). Eleven percent of current male drinkers and 9.6% of current female drinkers could not control their drinking once they started.

Findings in the 2017 Bahamas Household Drug Survey adds to the binge drinking context. One-fifth (or 20.8%) males binge drank two to three times in a 14-day period; while a similar percentage (20.1%) of females binge drank just once in a 14-day period. This study also found that the most drinking occurred on

weekends across all alcoholic beverage types (low[1], medium[2] and heavy[3] alcohol types). This is opposed to the risk perception among current alcohol users in that survey, with 61.4% agreeing that drinking too often is risky.

Despite the public awareness campaigns to 'Don't Drink and Drive', 1 in 5 respondents (or 21.3%) drove a vehicle after consuming two or more standard drinks of alcohol. Males (29.6%) were twice more likely to drive under this condition than females (14.2%).

As other areas of health to gain a foothold in convincing senior policy makers in enacting simple policies and initiatives that would help to reduce the rate of alcohol-related issues in the country,it is hoped that systems deployed for data collection will be more attuned to capture the indicators of risks related to alcohol consumption, so that the impact of alcohol consumption canbe accurately studied and reflected on.

In conclusion, the drinking problem is predominantly a male-centric one regionally and in The Bahamas. This has implications on the awareness messaging, approach to intervention programmes and design of policies to reduce the consumption of alcohol or access to alcohol.

Data systems however, to collect data on both the risk factors and societal impact of consumption, need to be strengthened. Also, the Royal Bahamas Police Force needs to be adequately empowered and resourced to give meaningful effect/enforcement to provisions of the Road Traffic Act specific to driving under the influence of alcohol. This would also been removal of all policy and structural enablers to mandate testing for alcohol levels in all incidents of vehicular accidents and domestic violence and abuse reports as well as the prohibition of a policy by insurance companies to refuse to pay claims related to accidents that involved intoxicated drivers.

Tobacco Consumption and Exposure

Tobacco use is a major risk factor for cardiovascular and respiratory non-communicable diseases. It is the only legal drug that kills more than half of those who use it. Tobacco use does not only kill those who use it, but unfortunately has as victims those who do not smoke, but are exposed to secondhand smoke. Tobacco use, which has no safe use, costs the U.S. economy $626 billion each year. Added to the financial cost is the human cost. Every year, 8 million people globally die from direct tobacco use and its illnesses. Secondhand smoke exposure (SSE) has also been implicated in adverse health outcomes, causing an

[1] Beverages considered to have low alcohol content were beers and Guinness.

[2] Beverages considered to have medium alcohol content were wine and Baileys.

[3] Beverages considered to have heavy alcohol content were rum, vodka and gin.

estimated 1.2 million global deaths each year.
Exposure to secondhand smoke cannot be ignored. In the STEPS 2019 study, 12.1% of all respondents across both sexes and age groups reported tobacco smoke exposure in the home.

The four major U.S. cigarette companies spent $7.62 billion each year on cigarette advertising and promotion in 2019. The five major smokeless tobacco manufacturers spent $576.1 million on smokeless tobacco advertising and promotion in the same year. The power and magnitude of these dollars have had the effect of feminizing the tobacco epidemic and in attracting younger and younger age groups to this unhealthy and deathly practice. In The Bahamas, STEPS 2019 highlighted that, among smokers, 45.3% were males and 32.4% of females are current daily smokers.

Significant tobacco industry dollars have also been pumped into research and design to diversify and improve its product offerings. These products include:

- Heated tobacco products (HTPs) contain tobacco and expose users to toxic emissions, many of which cause cancer and are harmful to health; and
- Electronic nicotine delivery systems (ENDS) and electronic non-nicotine delivery systems (ENNDS), commonly known as e-cigarettes, do not contain tobacco and may or may not contain nicotine, but are harmful to health and undoubtedly unsafe.

The tobacco industry falsely gives the impression that as it improves it product, risk to ill-health is lowered. This is untrue. Cigars, cheroot and cigarillo carry the same risk on health as they do not have filters, nor do they contain combustion aids in their manufacture. As such they expose a large portion of the respiratory system to greater amounts of carcinogenic agents. In fact, both cigars and cigarillos (which included bidis for the purposes of this survey) have higher amounts of nicotine than cigarettes and are known to be indicated as an aetiological agent in a wider number of cancers than cigarettes.

Regular mass media campaigns that bombard the radio, television and social media airwaves will go a long way in diluting the effect of this industry either by preventing debut or encouraging smokers to quit. WHO has advanced policy measures to curb the consumption of tobacco products at its core. They include:

1. Effective surveillance and monitoring to track the extent and character of the tobacco epidemic and how the system responds to implemented policies.
2. Promote the message that secondhand smoke kills, and then implement policies that reduce exposure to second-hand smoke – such as smoke-free public spaces for example.
3. The placement of large pictorial or graphic health warnings, including plain packaging, with hard hitting messages can persuade smokers to protect the health of non-smokers by not smoking inside the home, increase compliance with smoke-free laws and encourage more people to quit tobacco

use. Mass media campaigns can also reduce demand for tobacco by promoting the protection of non-smokers and by convincing people to stop using tobacco.

4. A comprehensive ban on tobacco advertising, promotion and sponsorship that covers both direct and indirect varieties of promotion can reduce tobacco consumption.
5. Introduction of taxes in a way that is effective in reducing tobacco use. Taxation will provide information on the types of tobacco products used and improve the effectiveness of policies and initiatives to reduce the rates at which they are used.
6. Provision of tobacco cessation counseling programmes
7. Control and eradicate the illicit trade of tobacco products
8. Introduce entities to regulate the introduction of new and emerging nicotine products in-country such as heated tobacco products and e-cigarettes.
9. regular and mass media campaigns about tobacco and health impacts of tobacco

The Bahamas, as a signatory to the WHO FCTC, could seek to implement several of the best-buys, or key cost-effective interventions such as restrictions on smoking in public places andworkspaces, along with an intensive ban on advertising, promotion, and sponsorship. The role of these actions is to assist in reducing the social acceptance of tobacco consumption.

Tobacco cessation counselling has been an area of weakness in the health system that still has not been comprehensively addressed. There is a need for primary care providers to become more aware of the tools and services that exist that may assist individuals who are desirous of quitting the use of tobacco products. These include cessation programmes sponsored by civil society as well as chemical aids to reduce the impact of nicotine withdrawal. More can also be done by the public health financing mechanisms to support increased access to both cessation counselling services and therapeutic aids. This is relevant because STEPS 2019 revealed that 44.6% of currentsmokers attempted to quit smoking (females, 60.3% and males, 41.7%). Regrettably, only 36.1% of respondents who identified as current smokers reported thatthey were advised to stop smoking by a doctor.

Given the reality that second-hand smoke is attributed to significant number of deaths globally, each year, and as an aid to support the need for banning of smoking in public spaces, it would be interesting to review a data table that spoke to the number of never smokers who reported exposure to secondhand smoke in the various settings explored by the questionnaire.

Selected NCD Conditions

When unhealthy diets co-exist with other risk factors, a multiplying effect occurs, drastically increasing the chance of developing the NCD lifestyle diseases.

Questions were asked about whether individuals had ever been diagnosed with a NCD – assessingthe presence of elevated blood cholesterol levels, diabetes/elevated blood sugar, hypertension,cardiovascular disease, and mental health problems – with associated markers for adherence to accepted management guidelines, including therapeutic regimens and screening for complications.

Hypercholesterolaemia

Raised total blood cholesterol levels is another risk factor of cardiovascular, known to increase the risks of heart disease and stroke. Globally, the World Health Organization reports that a thirdof ischaemic heart disease is attributable to high cholesterol with elevated cholesterol being estimated to cause 2.6 million deaths. Consequently, raised total cholesterol is considered to be a major cause of disease burden in both the developed and developing world as a risk factor for ischemic heart disease and stroke. Raised total blood cholesterol is assigned to an individualwith total cholesterol ≥ 5.0 mmol/l or 190mg/dl).

STEP 2 of the survey revealed that 4.3% had elevated blood cholesterol levels (measured total cholesterol ≥ 240 mg/dl). STEP 1 questions revealed that two in five persons (40.0%) reported tohave never had an assessment of the level of the total cholesterol in their blood. About one in two respondents (50.2%) reported that they would have had their total blood cholesterol levelsmeasured, but that there was no diagnosis. 5.2% respondents admitted to having been diagnosed more than 12 months ago with a further 4.7% having been diagnosed in the past 12 months. Of those diagnosed with raised total cholesterol, about a quarter (25.1%) was taking medications as prescribed. This was reflected as 29.7% among female respondents and 16.8% among male respondents. Further, those that had raised total cholesterol and were taking an herbal or traditional remedy amounted to 8.7% across both sexes and age groups, while 6.5% ofall respondents across both sexes and age groups reported that the were compliant with taking the prescribed medication for their hypercholesterolaemia diagnosis – female respondents(7.0%) more so than male respondents (5.8%).

Diabetes

The World Health Organization notes that globally more than 400 million people worldwide havediabetes, with most living in low-and middle-income countries. WHO further estimates that diabetes is responsible for about 1.6 million deaths each year? Both the incidence and mortality associated with of diabetes have been steadily increasing over the past few decades. If poorly treated, diabetes can lead to significant morbidity such as blindness, kidney failure, heart attacks, stroke, and lower limb amputation.

Diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. Insulin is a hormone thatregulates blood sugar. Hyperglycaemia, or raised blood sugar, is a common effect of uncontrolled diabetes and over time leads to serious damage to many of the body's systems, especially the nerves and blood vessels.
There are two types of diabetes -Type 1 and Type 2. Type 1 diabetes (previously known as insulin-

dependent, juvenile or childhood-onset) is characterized by deficient insulin production and requires daily administration of insulin. Neither the cause of Type 1 diabetes nor the means to prevent it are known. Type 2 diabetes (formerly called non-insulin-dependent, or adult-onset) results from the body's ineffective use of insulin. The majority of people with diabetes have type2 diabetes. This type of diabetes is largely the result of excess body weight and physical inactivity.

Diabetes is another risk factor for cardiovascular diseases with adults with diabetes have a two- to three-fold increased risk of heart attacks and strokes. Other morbidities are common also were combined with reduced blood flow, neuropathy (nerve damage) in the feet increases thechance of foot ulcers, infection, and eventual need for limb amputation. There are the complications of blindness caused by diabetic retinopathy, and kidney failure

STEP 1 questions revealed that one in five persons (22.8%) reported to have never had an assessment of the level of the sugar in their blood. About two in three respondents (64.5%) reported that they would have had their blood sugar levels measured, but that there was no diagnosis. 5.1% respondents admitted to having been diagnosed more than 12 months ago witha further 7.7% having been diagnosed in the past 12 months. Of those diagnosed with raised blood sugar, 44.7% of respondents with diabetes that responded (n=246) indicated that they were taking medications as prescribed. This was reflected as 50.9% among female respondents and 37.4% among male respondents. Further, those that had raised blood sugar and were taking insulin amounted to 18.0% across both sexes and age groups, while 17.7%across both sexes and age groups had raised blood sugar and were taking an herbal or traditionalremedy.

Impaired glucose readings were obtained for 6.8% of those assessed in STEP 2, which reflected as 7.7% among female respondents and 5.4% of male respondents. 11.6% of all respondents across both sexes and age groups reported that they either had raised blood glucose or currentlyon medication for diabetes, while 7.1% of persons were currently on medications for a diagnosisof diabetes.

When reviewing the experience of participants with raised blood glucose, 5.9% reported that they had not been diagnosed with diabetes, 6.9% was previously diagnosed with elevated bloodglucose and were not on medications. 11.6% reported having been diagnosed with diabetes andwere on medication. A further question was asked to assess which persons - diagnosed with diabetes -who sometimes use bush or herbal medicines instead of prescribed medications. Thenumber of respondents were too small to provide a generalisable response.

Hypertension

Hypertension– or elevated blood pressure– is a medical condition that is caused when the force of blood pressure force against the walls of the major blood vessels in the body is too high/or increased resulting in significant risks to the heart, brain, kidney, and other organs.

Blood pressure is written as two numbers. The first (systolic) number represents the pressure inblood vessels when the heart contracts or beats. The second (diastolic) number represents the pressure in the vessels when the heart rests between beats. The diagnosis of hypertension is applied when the blood pressure is measured on two different days, and the systolic blood pressure readings on both days is ≥140 mmHg and/or the diastolic blood pressure readings on both days is ≥90 mmHg.

According to the World Health Organization, there are an estimated 1.13 billion people worldwidewith hypertension, and most (two-thirds) living in low- and middle-income countries. The reportfurther stated in 2015, one in four men and one in five women had hypertension. It furthernoted that less than one in five persons with hypertension have the problem under control. It isnot a surprise then that hypertension is a major cause of premature death worldwide.

The diagnosis of hypertension is but one of the important factors in its management. The successof the management of raised blood pressure, a risk factor for cardiovascular disease, depends onadherence of the patient to treatment - taking prescribed medications as directed, as well as compliance with screening procedures for the early identification of markers for morbidity.

For the purpose of discussion, the consideration of the application of the term of raised blood pressure is taken into account for persons with systolic blood pressures readings above 140 mmHG and diastolic blood pressure readings above 90 mm Hg. For participants who had their bloodpressure measured and whose results were SBP ≥140 and/or DBP ≥ 90 mmHg, among all respondents across both sexes and age groups, the proportion was 29.4%, reflected as 26.0% offemale respondents and 33.1% of male respondents. There were 36.7% of all respondents acrossboth sexes and age groups with SBP ≥140 and/or DBP ≥ 90 mmHg or currently on medication forraised blood pressure. This was reflected as 36.3% among female respondents and 37.1% amongmale respondents. across both sexes and age groups, a rate of approximately one in three persons. For all respondents across both sexes and age groups, 23.6% had elevated blood pressure readings and reported that they were not on medications for raised blood pressure. Offemale respondents the proportion was 20.2% and of male respondents 27.0%. These alarming rates suggest the possibility that as much as one in five females and one in four males may have hypertension and not diagnosed as so. This demands a policy that all persons be screened for hypertension on a regular basis – using the annual medical assessment is the best method of doing so.

With the blood pressure readings taken as part of STEP 2, further evaluation of the data was undertaken to assess the disposition persons. The evaluation revealed that for all respondents across both sexes and age groups, 38.0% reportedly were not previously diagnosed with high blood pressure, 15.3% were previously diagnose, but were not on medication, 26.9% were on medication but not controlled, and 19.8% were previously diagnosed with high blood pressure, were taking medications and blood pressure readings were controlled.

As a measure of compliance with medications, the question of whether survey participants whowere diagnosed with hypertension were taking an herbal or traditional remedy to manage their hypertension. Among this grouping, 23.1% of all respondents across both sexes and age groupsreported that they were taking herbal or traditional remedies. This was reflected as 21.7% among female respondents and 24.8% among male respondents. A further question was asked to assess which persons - diagnosed with hypertension -who sometimes use bush or herbal medicines instead of prescribed medications. The proportion of all respondents across both sexes and age groups, was 66.0% reflecting 70.7% of female respondents and 60.7% of male respondents.

Cardiovascular diseases (CVDs)

It is widely accepted and known that cardiovascular diseases (CVDs) are the leading cause of deaths across the globe. In 2019, CVD was said to contribute to the death of 17.9 million peopleor 32% of all global deaths. Heart attacks and strokes accounted for 85% of these deaths, and more than three-quarters of deaths due to CVD occurring in low- and middle-income countries. Heart attacks and strokes are usually acute events and are primarily the result of a blockage thatprevents blood from flowing to the heart or brain. The most common cause is a build-up of fattydeposits on the inner walls of blood vessels that supply the heart or brain. Strokes can be causedby either bleeding from a blood vessel in the brain or from blood clots.

The World Health Organization notes that 38% of the 17 million premature deaths in 2019 wasdue to noncommunicable diseases in 2019. However, by addressing behavioural risk factors suchas tobacco use, unhealthy diet and obesity, physical inactivity and harmful use of alcohol, cardiovascular diseases can be prevented.

It is important to detect cardiovascular disease as early as possible so that they receive appropriate treatment and management such as counselling and medicines to prevent premature deaths. It remains crucial that access to essential medicines and basic health technologies be made available through universal health coverage packages in primary health care facilities to reduce the incidence of cardiovascular events such as heart attacks and strokes.

Basic medicines that are available include aspirin, beta-blockers, angiotensin-converting enzymeinhibitors and statins. The 2019 study revealed that 9.8% of all respondents across both age groups and both sexes reported having ever had a heart attack or chest pain from heart diseaseor a stroke which reflected 7.6% among female respondents and 12.2% among male respondents. Among all respondents across both sexes and age groups, 5.6% reported taking aspirin regularly and 1.6% reported taking statins regularly to protect or prevent heart disease respectively. Among female respondents, 6.6% reported taking aspirin and 2.4% reported takingstatins regularly to prevent or treat heart disease respectively. Among male respondents, 4.4% reported taking aspirin and 1.0% reported taking statins regularly to prevent or treat heart disease respectively.

An analysis of data received from across the three STEPS was undertaken to project persons whomay have varying levels for a 10-year cardiovascular disease (CVD) risk. Responses used in the analysis included the sex, age, current and former history of smoking, history of diabetes and/orcardiovascular disease, whether the respondent had reported receiving advice about healthy lifestyles, systolic blood pressure measurements and the fasting glucose and total cholesterol measurements. The percentage of respondents across both sexes and age groups with a 10-yearCVD risk greater than or equal to 30% or with existing CVD was 8.1%, reflecting 6.8% among female respondents and 10.4% among male respondents respectively. Further data analysis pertaining to the experience with cardiovascular risks with treatment and/or counseling among the surveyed population was not statistically possible.

A further risk determination was made to determine the prevalence of risk factors for non- communicable diseases among the survey respondents. The risk factors assessed included current daily smoking, consuming less than five servings of fruit and/or vegetables per day, not meeting WHO recommendations on physical activity for health (<150 minutes of moderate activity per week, or equivalent), being either overweight or obese (BMI ≥ 25 kg/m2) and havingraised BP (SBP ≥ 140 and/or DBP ≥ 90 mmHg or currently on medication for raised BP. Most respondents across both sexes and age groups (60.5%) had 1-2 risk factors, while 38.8% had 3-5risk factors. Less than 1% (0.7%) of respondents were assessed as having zero risk factors.

Mental Health

Questions were asked to determine the experience with the respondents and ideas that are aligned with suicidal ideation. When asked whether attempting suicide was considered, 6.3% ofall respondents across both sexes and age groups reported having considered attempting suicidein the past 12 months reflecting 4.1% of female respondents and 8.7% of male respondents. Forthe question of having considered attempting suicide in the 12 months and sought professional help for both sexes and age groups percentage was 34.4%. Another question explored whetherrespondents had considered suicide in the last 12 months as well as made a plan to do so and devils were reported as 2.6% for all respondents across both age groups and sex is reflected as 4.4% of female respondents and 0.7% of male respondents. For the question regarding whetheran individual had ever attempted suicide the results revealed that all respondents across both sexes and age groups the percentage was 1.8% reflected as 2.9% among female respondents and0.7% among male respondents. A further question was asked of respondents if they had ever had a close family member that had died from committing suicide and the percentage that affirmed that this was the case was 1.8% of all respondents across both sexes and age groups, reflected as 1.5% among female respondents and 2.2% among male respondents.

Violence and Injury

The World Health organization reports that together - unintentional and violence-related injuriesaccount for the death of 8% of all deaths in the world annually – totaling about 4.4 million. Of these 4.4 million deaths, it is estimated that 3.16 million deaths are the result of unintentional injuries, while 1.25 million deaths result from violence-related injuries.

Approximately one in three deaths result from road traffic accidents, one in six from suicide andone in ten from homicide. Further, it is estimated that tens of millions more people suffer non- fatal injuries each year which lead to emergency department and acute care visits,hospitalizations or treatment by general practitioners and often result in temporary or permanent disability and the need for long-term physical and mental health care and rehabilitation. From an economic perspective, injuries and violence are responsible for anestimated 10% of all years lived with disability costing countries billions of US dollars each year in health care, lost productivity, and law enforcement.

Interpersonal Events

In responding to whether the respondent was seriously injured from violent incidents, among all respondents across both sexes and age groups, 4.7% reported that this was so - with the result being 5.8% among female respondents and 3.5% among male respondents. For the question as to who was the person that would have caused the injury(ies), the results from all respondents across both sexes and age groups indicated that the rate was 22.9% by a stranger, 17.8% by a friend or acquaintance, 14.3% by an intimate partner, 5% by official legal authority and 39.5% byother. It is important to note that the “n” number for this question was 54. For the question inquiring the incident of whether an individual had experienced an involuntary sex act. For all respondents across both sexes and age groups, the report was confirmed for 13.1%, reflecting 17.6% among female respondents and 8.1% among male respondents. For the question regarding whether a respondent had been frightened by either someone in the family or friend or acquaintance and unrelated caregiver a stranger or official or legal authority or other, the result indicated that for all respondents across both sexes and age groups, the percentage was 76.0% for an individual that was someone in the family, a friend or acquaintance, 10.7% for a stranger and 4.3% by an official or legal authority. The “n” number for this indicator was 89.

Transportation-related Risky Behaviors

In the Americas in 2016, road traffic accidents accounted for 15.6 deaths per 100,000 people. These deaths were constituted 26% caused by users of 2-3 wheeled vehicles and 34% caused bydrivers or passengers of 4-wheeled vehicles. In reviewing best practices for legislation, there are five risk factors that should be reflected – guidance and penalties that regulate speed, drunk- driving, the use of seatbelts, the wearing of helmets and the use of child restraints. The Road Traffic Act addresses all these risks.

A question was asked on the percentage of respondents who rode in vehicle with a driver who was believed to be under the influence of alcohol and the response received was 19.4% for all respondents across both sexes and age groups reflected as 14.9% among female respondents and 24.2% among male respondents. As it pertained to driving or riding in a vehicle without not always using a seat belt, 44.9% across all respondents across both sexes and age groups reflecting35.8% among female respondents and 54.6% among male respondents. Those individuals that used motorcycle were question as to how often they rode motorcycles without always using a helmet. The response was 75.4% for all respondents across both sexes and age groups, reflecting73.3% among female respondents and 77.8% among male respondents. Among all respondents across both sexes and age groups, more than three quarters (78.4%) reporting that they rarely or never use their cell phone while driving a motorized vehicle while using a cell phone, reflectedas 82.9% among female respondents and 75.6% among male respondents.

CONCLUSION

The STEPS 2019 survey confirms that there are areas of improvement that The Bahamas needs to work toward. It further confirms that as a people, Bahamian residents are less healthy, with more co-morbidities that were reported in the 2012 STEPS Survey Report. Layered on the generally increasing trends among the poor health status indicators are gender, education, and income disparities which further impact the nation's health profile. The gravity of and unrelenting assault by NCDs are sufficient (as evidenced in the STEPS 2019 data) to declare NCDs a national emergency; and to issue a clarion call to national action that harnesses the intellect, innovation, voices and resolve of every age group, every sector and every faith for a whole-of-society response.

Joint work with all similarly leaning stakeholders in planning, evaluating and charting forward to reverse the NCD trends based on shared knowledge of the health situation would be a necessary first step. The health-in-all-policies approach needs to receive more than token homage. It should be deliberately and strategically reflected in policies, programmes and initiatives that strengthen the social determinants and health-enabling environments that reflect integration of stakeholders and partners in the health planning processes. More must be done to 'make the healthy choice the easy choice". If current prevalence trends continue, the human, social and economic costs of NCDs and their associated risk factors, are likely to arrest national development and snuff the brightness of our banner.

STEPS 2019 revealed that both Bahamian males and females consume alcohol at levels considered harmful to health. This represents an opportunity for more gender-specific interventions; and for additional probing research on gender variances in knowledge, attitudes and practices on alcohol use.

Another myth challenged by the STEPS 2019 data was smoking is not prevalent in The Bahamas. Current smoking prevalence in The Bahamas exceeds the Regional average (which is). Additionally, current smoking shows an increasing trend. The conscious and deliberate decisions of non-smokers not to smoke should be protected. This means that exposure to secondhand smoke, in any setting, should be deemed a violation and prevented through enacting Tobacco Control legislation.

Continuous media campaigns on the dangers of alcohol and tobacco use should support any legislative measure(s). Health promotional efforts should be funded from the proceeds of these fines and should be aimed at warning persons about the dangers of alcohol and tobacco use and exposure to environmental tobacco smoke.

The importance of increasing physical activity to reduce the incidence and impact of non-communicable diseases cannot be over-emphasized. The Bahamas' climate provides ample opportunity and occasion for outdoor activities that also can add a boost to one'smental health while engaging in physical activity. The proposed national physical activityguidelines should be formally adopted and promoted, as well as used to prescribe physical activity to patients who are assessed as not having the requisite amount as per WHO guidelines.Additionally, a public awareness campaign on the importance of physical activity during all stages of life should be promoted. Efforts should also be made to improve the accessibility, acceptabilityand safety of individuals engaging in such activities. A call must be made for the standing up of a national physical activity task force to provide additional strategies that would increase accessand participation in physical activity across the country, including in the workplace and in communities.

NCD surveillance systems must be strengthened to begin with collating and digitizing existing patient databases that are known to the government and who receive funding through the publicpurse. These surveillance systems should be designed to capture the experience of persons diagnosed with a targeted NCD with respect to health care giver interaction, compliance with appointments, recommended treatment and management guidelines, screening for secondary complications, general health maintenance screening as well as contain an alert system supported by the requisite numbers of staff who are tasked with re0engaging and preventing defaulters. These staff must be supported by and have access to the vital change management skills bank. The envisioned ultimate goal is for this surveillance system to provide on a more regular and sustainable source of information which will form the basis of programme-decision making processes.

With the consumption of fried foods being so prominent in the community, there should be further consideration on the banning or restriction through taxation on the importation of oils with industrially produced trans fats. With the reality that cooking oil is not produced locally, thiswould have an immediate impact on the health of fried foods that are consumed within The Bahamas. The World Health Organization's REPLACE Programme is an action package to eliminate industrially produced trans-fat from the global food supply and should prove a useful resource in proposing policies to pursue this. Other floated polices that should be intentionally implemented include increased tariffs on sugar sweetened beverages, discussion with simple polices with respect to salt access in restaurants and perhaps in bread formulae.

The Ministry of Health in recent times committed to a policy here only healthy alternatives would be entertained for refreshments and snacks for all meetings held on its premises. It went furtherto declare a policy restricting the purchase and sale of sugar-sweetened beverages on its facilities
– impacting as well vending machine contracts., as well as banned smoking and the consumptionof alcohol. The Department of Education announced a policy restricting the sale of sugar- sweetened beverages on its campuses for about the same period. It would herald a sentinel stepin the commitment toward a healthier country should a mandate from the Cabinet be deliveredthat sought to mirror these policies across the public sector. This potentially could have a great effect on the health of the country given the results of the analysis of the survey respondents which leaned toward the average respondent being a middle-aged

female employed at a government agency.

Healthcare providers should be engaged as crucial partners to the trek toward a healthier nation. The inclusion of health provider associations, the active and public engagement of healthy initiatives and the demonstration of activism and active participation at the community level willmore than likely add to the level of credence and gravitas required to mobilize the nation's psyche to adopting healthier lifestyles. Specifically, health care providers, especially primary careproviders should be engaged to use and provided access to skills and expertise in engaging patients in healthier practices such as increased physical activity or the adoption of healthier diets. Incentives and disincentives related to reporting also need to be built into the health system to increase cancer screening rates as well as adherence to management guidelines for targeted and prioritized non-communicable diseases. From a public health system perspective, cost-effective interventions should be available at all levels of care and the health care workforcecapacity should be expanded, regulated and strengthened to support the comprehensive management of NCDs. This information, once collected and analysed, will assist with providing the necessary intelligence to guide the crafting of targeted policy formulation.

Mental health remains a poorly resourced, underrecognized yet crucial component in the management of non-communicable diseases. Policies need to be enacted to include the access and provision of mental health and counselling services as a corollary/adjunct to primary care services, especially as they relate to non-communicable diseases. This includes the strengtheningof regulation to recognized and regulate all major groups of mental health providers, therecognition of their role in the management and counselling of persons with histories of

hypertension, diabetes, cancer, long-standing obesity, and the addictions linked to alcoholism, tobacco consumption and food.

Obesity management has not received the level of attention that it deserves, primarily because if the risk of being perceived as judgmental and discriminatory. The reality is though, that with more than three quarters of the sample population being classified as either overweight or obese. And with more than half of the population being classified on the BMI scale – using objective measurements, as obese, the time has arrived to step purposefully, even if it means stepping on the proverbial 'toes. The prevalence and rate of increase of obesity among the Bahamian population is a national risk – if not a national emergency and must be aggressively treated as so. The use of dietary modifications and increased physical activity by themselves cannot realistically address the challenge. There needs to be an obesity task force convened to address the use of adjunctive therapies and procedures including therapeutics and surgical interventions. There must also be the recognition of the role of nutritionists, nutrition counsellorsand health educators in addressing the obesity epidemic.

The foregoing paragraphs highlight the reality that the results of the 2019 Bahamas Non- Communicable Diseases Risk Factors STEPS Survey reflect a worsening picture for the prevalenceof non-communicable diseases as well as increasing prevalence of modifiable behavioural and biological NCD risk factors. There is a need for both the urgent creation and the intentional implementation and/or expansion of existing health-inuring policies to address these realities. The data that has been collected and collated is rich and provides opportunities for additional analysis to provide further insight to specific areas of risk and disease prevalence among targetedgroupings.

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Annexes

a. Annex – 2019 Bahamas STEPS Factsheet

The Bahamas STEPS Survey 2019
Fact Sheet

The STEPS survey of noncommunicable disease (NCD) risk factors in The Bahamas was carried out from January 2019 to April 2019. The Bahamas carried out Step 1, Step 2 and Step 3. Socio demographic and behavioural information was collected in Step 1. Physical measurements such as height, weight and blood pressure were collected in Step 2. Biochemical measurements were collected to assess blood glucose, cholesterol and urinary salt levels in Step 3. The survey was a population-based survey of adults aged 18-69. A stratified multi-stage cluster sample design was used to produce representative data for that age range in The Bahamas. The total sample size was 3,840 adults. The overall response rate was 61.6%. The next iteration of STEPS is expected in 2024.

Results for adults aged 18-69 years (incl. 95% CI)	**Both Sexes**	**Males**	**Females**
Step 1 Tobacco Use			
Percentage who currently smoke tobacco	**17.4%** (13.8 – 21.1)	**32.4%** (26.7 – 38.1)	**3.6%** (0.7 – 6.5)
Percentage who currently use tobacco daily	**7.7%** (5.6-9.7)	**14.7%** (10.6-18.8)	**1.2%** (0.5-1.9)
Average (mean) age started smoking (years) among current smokers	**19.0** (18.5-19.5)	**18.8** (18.2-19.4)	**21.2** (20.0-22.4)
Percentage of current smokers who smoke manufactured cigarettes	**49.4%** (37.4-61.4)	**50.6%** (36.3-64.9)	**38.9%** (21.2-56.7)
Step 1 Alcohol Consumption			
Percentage who are lifetime abstainers	**29.3%** (24.1-34.5)	**21.6%** (16.2-27.1)	**36.4%** (29.4-43.4)
Percentage who are past 12 month abstainers	**9.5%** (5.8-13.2)	**9.9%** (4.4-15.3)	**9.2%** (5.9-12.5)
Percentage who currently drink (drank alcohol in the past 30 days)	**49.5%** (45.3-53.7)	**59.0%** (51.7-66.4)	**40.7%** (35.4-46.0)
Percentage who engage in heavy episodic drinking (6 or more drinks on any occasion in the past 30 days)	**17.6%** (11.2-23.9)	**23.1%** (13.3-32.9)	**12.5%** (6.3-18.6)
Step 1 Diet			
Mean number of days fruit consumed in a typical week	**3.6**	**3.3**	**3.8**
	(3.3-3.9)	(2.9-3.7)	(3.4-4.3)
Mean number of servings of fruit consumed on average per day	**1.2** (1.0-1.3)	**1.1** (0.8-1.3)	**1.3** (1.0-1.5)
Mean number of days vegetables consumed in a typical week	**4.3** (4.0-4.7)	**4.4** (4.0-4-8)	**4.3** (3.8-4.7)
Mean number of servings of vegetables consumed on average per day	**1.5** (1.1-1.9)	**1.5** (1.0-2.0)	**1.5** (1.1-1.9)
Percentage who ate less than 5 servings of fruit and/or vegetables on average per day	**85.3%** (78.9-91.7)	**85.3%** (77.1-93.5)	**85.4%** (79.2-91.6)
Percentage who always or often add salt or salty sauce to their food before eating or as they are eating	**16.4%** 10.7-22.0	**15.3%** 8.0-22.6	**17.4%** 11.8-23.0
Percentage who always or often eat processed foods high in salt	**25.7%** (21.5-30.0)	**25.0%** (19.4-30.7)	**26.4%** (21.0-31.8)
Step 1 Physical Activity			
Percentage with insufficient physical activity (defined as < 150 minutes of moderate-intensity activity per week, or equivalent) *	**30.2%** (20.6-39.8)	**20.0%** (10.9-29.1)	**39.5%** (28.8-50.2)
Median time spent in physical activity on average per day (minutes) (presented with inter-quartile range)	**77.1** (1.4-315.0)	**180.0** (31.4-412.0)	**40.0** (0.0-205.7)
Percentage not engaging in vigorous activity	**57.9%** (49.0-66.9)	**40.4%** (33.3-47.5)	**73.9%** (61.3-86.5)
Step 1 Cervical Cancer Screening			
Percentage of women aged 30-49 years who have ever had a screening test for cervical cancer			**76.6%** (69.9-83.3)

* For complete definitions of insufficient physical activity, refer to the GPAQ Analysis Guide (http://www.who.int/chp/steps/GPAQ/en/index.html) or to the WHO Global recommendations on physical activity for health (http://www.who.int/dietphysicalactivity/factsheet_recommendations/en/index.html)

The Bahamas STEPS Survey 2019
Fact Sheet

Results for adults aged 18-69 years (incl. 95% CI)	Both Sexes	Males	Females
Step 2 Physical Measurements			
Mean body mass index - BMI (kg/m^2)	**29.8** (29.1-30.5)	**27.6** (26.6-28.5)	**31.9** (30.7-33.0)
Percentage who are overweight (BMI ⩾ 25 kg/m^2)	**71.6%** (66.8-76.4)	**62.0%** (53.4-70.7)	**80.6%** (74.6-86.6)
Percentage who are obese (BMI ⩾ 30 kg/m^2)	**43.6%** (39.9-47.4)	**31.8%** (25.4-38.2)	**54.8%** (48.0-61.6)
Average waist circumference (cm)		**93.6** (91.1-96.1)	**95.4** (92.2-98.5)
Mean systolic blood pressure - SBP (mmHg), including those currently on medication for raised BP	**125.4** (123.1-127.7)	**128.8** (125.0-132.6)	**122.4** (120.7-124.0)
Mean diastolic blood pressure - DBP (mmHg), including those currently on medication for raised BP	**81.3** (79.4-83.1)	**81.6** (78.9-84.4)	**80.9** (79.3-82.5)
Percentage with raised BP (SBP ⩾ 140 and/or DBP ⩾ 90 mmHg or currently on medication for raised BP)	**36.7%** (32.7-40.6)	**37.1%** (31.9-42.2)	**36.3%** (31.9-40.6)
For those with raised BP (SBP ⩾ 140 and/or DBP ⩾ 90 mmHg or currently on medication for raised BP)			
Percentage with raised BP, not previously diagnosed	**38.0%** (29.8-46.3)	**41.7%** (30.5-52.9)	**34.6%** (23.6-45.6)
Percentage with raised BP, previously diagnosed, not currently on medication	**15.3%** (10.2-20.5)	**21.1%** (12.1-30.1)	**9.9%** (4.0-15.9)
Percentage with raised BP, previously diagnosed, currently on medication, not controlled	**26.9%** (23.6-30.1)	**26.6%** (17.9-35.3)	**27.1%** (21.6-32.7)
Percentage previously diagnosed, currently on medication, controlled (SBP < 140 and DBP < 90 mmHg)	**19.8%** (14.8-24.7)	**10.6%** (4.0-17.2)	**28.3%** (21.4-35.3)
Step 3 Biochemical Measurements (unweighted) **			
Mean fasting blood glucose, including those currently on medication for raised blood glucose (mg/dl)	**88.1**	**87.8**	**88.2**
Percentage with impaired fasting glycaemia (plasma venous value ⩾110 mg/dl and <126 mg/dl)	**6.8%**	**5.4%**	**7.6%**
Percentage with raised fasting blood glucose or currently on medication for raised blood glucose (plasma venous value ⩾ 126 mg/dl)	**11.5%**	**12.1%**	**11.2%**
Mean total blood cholesterol, including those currently on medication for raised cholesterol (mg/dl)	**153.1**	**151.9**	**153.7**
Percentage with raised total cholesterol (⩾ 190 mg/dl or currently on medication for raised cholesterol)	**25.3%**	**28.5%**	**23.5%**
Mean intake of salt per day (in grams)	**10.5**	**12.7**	**9.2**
Cardiovascular disease (CVD) risk (unweighted)**			
Percentage aged 40-69 years with a 10-year CVD risk ⩾30%, or with existing CVD***	**8.2%**	**10.4%**	**6.8%**
Summary of combined risk factors			
current daily smokers less than 5 servings of fruits or vegetables per day insufficient physical activity	overweight (BMI ⩾ 25 kg/m^2) raised BP (SBP ⩾ 140 and/or DBP ⩾ 90 mmHg or currently on medication for raised BP)		
Percentage with none of the above risk factors	**0.7%** (0.2-1.2)	**0.8%** (0.0-1.7)	**0.5%** (0.0-1.0)
Percentage with three or more of the above risk factors, aged 18 to 69 years	**38.8%** (31.2-46.3)	**32.8%** (26.9-38.6)	**44.3%** (34.2-54.5)

- ** Tables for biochemical measurements and CVD risk are presented unweighted, given that the response rate for Step 3 was lower than 60%
  *** A 10-year CVD risk of ≥30% is defined according to age, sex, blood pressure, smoking status (current smokers OR those who quit smoking less than 1 year before the assessment), total cholesterol, and diabetes (previously diagnosed OR a fasting plasma glucose concentration 126 mg/dl.

For additional information, please contact:
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b. Annex – Questionnaire

Pan American Version of STEPS Instrument 3.2

The Bahamas' STEPS 2018

Final version, October 24, 2018

The WHO STEPwise approach to noncommunicable disease risk factor surveillance (STEPS)

PAN AMERICAN STEPS Instrument for Noncommunicable Disease
Risk Factor Surveillance
THE BAHAMAS

For further information: www.who.int/chp/steps

Survey Information

Location and Date	Response	Code
Island		I0
Supervisory District		I1
Enumeration District		I2
Household Number		I2a
Interviewer ID	⌊_⌋⌊_⌋⌊_⌋	I3
Date of completion of the instrument	⌊_⌋⌊_⌋ dd ⌊_⌋⌊_⌋ mm ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ year	I4

Consent, Interview Language and Name	Response	Code
Consent has been read and obtained	Yes 1 No 2 **If NO, END**	I5
Interview Language	English 1	I6
Time of interview (24 hour clock)	⌊_⌋⌊_⌋: ⌊_⌋⌊_⌋ hrs mins	I7
Family Surname		I8
First Name		I9
Additional Information that may be helpful		
Contact phone number where possible		I10

Step 1 Demographic Information

CORE: Demographic Information		
Question	**Response**	**Code**
Sex (*Record Male / Female designation at birth)*	Male 1 Female 2	C1
What is your date of birth? *Don't Know 77 77 7777*	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ *If known, Go to C4* mm year dd	C2
How old are you?	Years ⌊_⌋⌊_⌋	C3
In total, how many years have you spent at school and in fulltime study (excluding pre-school)?	Years ⌊_⌋⌊_⌋	C4
EXPANDED: Demographic Information		
What is the **highest level of education** you have completed?	No formal schooling 1 Less than primary school 2 Primary school 3 Junior high school (7-9) 4 Senior high school (10-12) 5 College/University 6 Post graduate degree 7 Refused 88	C5
In what country were you born?	he Bahamas The U.S.A. 1 China 2 Haiti 3 Jamaica 4 5 Other Caribbean country 6 Latin American country 7 Other 8 Refused 88	X1
What is your **marital status**?	Never married/Single 1 Currently married 2 Separated 3 Divorced 4 Widowed 5 Common-law 6 Refused 88	C7
Which of the following best describes your /**main work** status over the past 12 months?	Employed full-time 1 Employed part-time 2 Self-employed 3 ntary work Student 4 5 Homemaker 6 Retired 7 Unemployed (able to work) 8 unable to work) 9 Refused 88	C8

Can you give an estimate of the annual household income if I read some options to you? In Bahamian dollars, is it: (READ OPTIONS)	0-5,000 1 5,001-10,000 2 3 10,001-15,000 4 5 15,001-20,000 6 7 20,001-40,000 8 9 40,001-60,000 77 88 60,001-80,000 80,001-100,000 100,001 and over Don't know Refused	C11
Do you have private health insurance?	Yes 1 No 2 on't know Refused 77 88	X2

Step 1 Behavioural Measurements

CORE: Tobacco Use

Now I am going to ask you some questions about tobacco use.

Question	Response	Code
Do you **currently** smoke any **tobacco** products, such as cigarettes, cigars, pipes, bidis? *(USE SHOWCARD)*	Yes1 No2 *If No, go to T8*	T1
Do you currently smoke tobacco products **daily**?	Yes1 No2	T2
How old were you when you **first started** smoking?	Age (years) ⌊_⌋⌊_⌋ *If Known, go to T5a/T5aw* Don't know 77	T3
Do you remember how long ago it was? *(RECORD ONLY 1, NOT ALL 3)* *Don't know 77*	In Years ⌊_⌋⌊_⌋ *If Known, go to T5a/T5aw*	T4a
	OR in Months ⌊_⌋⌊_⌋ *If Known, go to T5a/T5aw*	T4b
	OR in Weeks ⌊_⌋⌊_⌋	T4c
On average, **how many** of the following products do you smoke **each day/week?** *(IF LESS THAN DAILY, RECORD WEEKLY)* *(RECORD FOR EACH TYPE, USE SHOWCARD)* *Don't Know 77*	DAILY↓ WEEKLY↓	
	Manufactured cigarettes ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	T5a/T5aw
	Hand-rolled cigarettes ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	T5b/T5bw
	Pipes full of tobacco ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	T5c/T5cw
	Cigars, cheroots, cigarillos ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	T5d/T5dw
	Number of Shisha sessions ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	T5e/T5ew
	Bidis ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	T5g/T5gw
	Other ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ *If Other, go to T5other, else go to T6*	T5f/T5fw
	Other (please specify): ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋	T5other/ T5otherw
During the past 12 months, have you tried to **stop smoking**?	Yes1 2 No	T6

During any visit to a doctor or other health worker in the past 12 months, were you advised to quit smoking tobacco?	Yes 1 *If T2=Yes, go to T12; if T2=No, go to T9* No visit during the past 12 months 2 *If T2=Yes, go to T12; if T2=No, go to T9* 3 *If T2=Yes, go to T12; if T2=No, go to T9*	T7
In the past, did you **ever smoke** any tobacco products? *(USE SHOWCARD)*	Yes 1 No 2 *If No, go to T12*	T8
In the past, did you **ever** smoke **daily**?	Yes 1 *If T1=Yes, go to T12, else go to T10* No 2 *If T1=Yes, go to T12, else go to T10*	T9

EXPANDED: Tobacco Use		
Question	**Response**	**Code**
How old were you when you **stopped** smoking?	Age (years) Don't Know 77 ⌊_⌋⌊_⌋ *If Known, go to T12*	T10
How **long ago** did you stop smoking?	Years ago ⌊_⌋⌊_⌋ *If Known, go to T12*	T11a
(RECORD ONLY 1, NOT ALL 3)	OR Months ago ⌊_⌋⌊_⌋ *If Known, go to T12*	T11b
Don't Know 77	OR Weeks ago ⌊_⌋⌊_⌋	T11c
Do you **currently use** any **smokeless tobacco** products such as snuff, chewing tobacco, betel? *(USE SHOWCARD)*	Yes 1 No 2 If No, go to X3	T12
Do you **currently use smokeless tobacco** products **daily**?	Yes 1 No 2	T13
Do you currently use electronic nicotine or non-nicotine delivery system commonly known as electronic cigarettes or vaporizers?	Yes 1 No 2	X3
During the past 30 days, did someone smoke **in your home**?	Yes 1 No 2	T17
During the past 30 days, did someone smoke in enclosed areas**/spaces of your workplace** (in the building, in a work area or a specific office)?	Yes 1 No 2 Don't work in a closed area 3	T18

During the past 30 days, did someone smoke in enclosed spaces such as restaurants, night clubs, bars, gaming facilities while you were there?	Yes 1 No 2 Haven't been in restaurants, night clubs, bars, gaming facilities in the past 30 days 3	X4

CORE: Alcohol Consumption		
The next questions ask about the consumption of alcohol.		
Question	**Response**	**Code**
Have you **ever** consumed any alcohol such as beer, wine, spirits? *(USE SHOWCARD OR SHOW EXAMPLES)*	Yes 1 No 2 *If No, go to A16*	A1
Have you consumed any alcohol within the **past 12 months**?	Yes 1 *If Yes, go to A4* No 2	A2
Have you stopped drinking due to health reasons, such as a negative impact on your health or on the advice of your doctor or other health worker?	Yes *If Yes, go to A16* No *If No, go to A16*	A3
During the past 12 months, **how frequently** have you had at least one standard alcoholic drink? *(READ RESPONSES, USE SHOWCARD)*	Daily 5-6 days per week 1 3-4 days per week 2 1-2 days per week 3 1-3 days per month 4 Less than once a month 5 Never 6 7	A4
Have you consumed any alcohol within the **past 30 days**?	Yes 1 No 2 *If No, go to A13*	A5
During the past 30 days, on how many **occasions** did you have at least one standard alcoholic drink?	Number Don't know 77 ⌊_⌋⌊_⌋	A6
During the past 30 days, when you drank alcohol, how many **standard drinks on average** did you have during one drinking occasion? *(USE SHOWCARD)*	Number Don't know 77 ⌊_⌋⌊_⌋	A7
During the past 30 days, what was the **largest number** of standard drinks you had on a single occasion, counting all types of alcoholic drinks together?	Largest number Don't Know 77 ⌊_⌋⌊_⌋	A8

During the past 30 days, how many times did you have **six or more** standard drinks in a single drinking occasion?	Number of times Don't Know 77 ⌊_⌋⌊_⌋	A9
During each of the **past 7 days**, how many standard drinks did you have each day? *(USE SHOWCARD)* *Don't Know 77*	Monday ⌊_⌋⌊_⌋	A10a
	Tuesday ⌊_⌋⌊_⌋	A10b
	Wednesday ⌊_⌋⌊_⌋	A10c
	Thursday ⌊_⌋⌊_⌋	A10d
	Friday ⌊_⌋⌊_⌋	A10e
	Saturday ⌊_⌋⌊_⌋	A10f
	Sunday ⌊_⌋⌊_⌋	A10g

CORE: Alcohol Consumption, continued

I have just asked you about your consumption of alcohol during the past 7 days. The questions were about alcohol in general, while the next questions refer to your consumption of homebrewed alcohol, alcohol brought over the border/smuggled from another country, any alcohol not intended for drinking or other untaxed alcohol. Please only think about these types of alcohol when answering the next questions.

Question	Response	Code
During the **past 7 days**, did you consume any **homebrewed** alcohol, any alcohol **brought over the border/from another country**, any alcohol **not intended for drinking** or other **untaxed** alcohol?	Yes 1 No 2 *If No, go to A13*	A11
On average, **how many standard drinks** of the following did you consume **during the past 7 days**? *Don't Know 77*	Homebrewed spirits, e.g. moonshine ⌊_⌋⌊_⌋	A12a
	Homebrewed beer or wine, e.g. beer, palm or fruit wine ⌊_⌋⌊_⌋	A12b
	Alcohol brought over the border/from another country ⌊_⌋⌊_⌋	A12c
	Alcohol not intended for drinking, e.g. alcohol-based medicines, perfumes, after shaves, cough syrup ⌊_⌋⌊_⌋	A12d
	Other untaxed alcohol in the country ⌊_⌋⌊_⌋	A12e

EXPANDED: Alcohol Consumption		
During the **past 12 months,** how often did you find you continued drinking and could not stop once you had started?	Daily or almost daily 1 Weekly 2 Monthly 3 Less than monthly 4 Never 5 *If "Never", go to A14*	A13
During the **past 12 months, before** you took the first drink on days you continued drinking and couldn't stop, how would you best describe your mood?	Sad 1 Stressed/Overwhelmed 2 Hopeless 3 Lonely/Unimportant 4 Fine 5 Other 6 Don't know 77	X5
During the **past 12 months,** how often have you failed to do what was normally expected of you because of your drinking?	Daily or almost daily 1 Weekly 2 Monthly 3 Less than monthly 4 Never 5	A14
During the **past 12 months,** how often have you needed a drink first thing in the morning to get yourself going after a heavy drinking session?	Daily or almost daily 1 Weekly 2 Monthly Less than 3 monthly 4 Never 5	A15
During the **past 12 months**, have you had family problems, or problems with your partner due to **someone else's** drinking?	Yes, more than monthly 1 Yes, monthly 2 3 Yes, several times but less than monthly Yes, once or twice 4 No 5	A16

CORE: Diet

The next questions ask about the fruits and vegetables that you usually eat. I have a nutrition card here that shows you some examples of local fruits and vegetables. Each picture represents the size of a serving. As you answer these questions please think of a typical week in the last year.

Question	Response	Code
In a typical week, on how many days do you **eat fruit**? *(USE SHOWCARD)*	Number of days Don't Know 77 ⌊_⌋⌊_⌋ *If Zero days, go to D3*	D1
How many **servings** of fruit do you eat on **one** of those days? (*USE SHOWCARD)*	Number of servings Don't Know 77 ⌊_⌋⌊_⌋	D2

In a typical week, on how many days do you **eat vegetables**? *(USE SHOWCARD)*	Number of days Don't Know 77 ⌊_⌋⌊_⌋ *If Zero days, go to D5*	D3
How many **servings** of vegetables do you eat on one of those days? *(USE SHOWCARD)*	Number of servings Don't know 77 ⌊_⌋⌊_⌋	D4
Dietary salt		
With the next questions, we would like to learn more about salt salt, iodized salt, salty stock cubes and powders, and salty sau questions are on adding salt to the food right before you eat it, salt such as hot dogs, sandwich meats, pizza, chips, ramen no controlling your salt intake. Please answer the questions even i	in your diet. Dietary salt includes ordinary table salt, ch as sea unrefined salt su ces such as soya sauce, fish sauce or ketchup (see ollowing showcard). The f on how food is prepared in your home, on eating t are high processed foods tha in odles, canned soups, patties, Sammy's, Bamboo questions Shack, Keith's, and on f you consider yourself to eat a diet low in salt.	
How often do you **add salt or a salty sauce such as soya sauce or seasoned salt** to your food right **before** you eat it or as you are eating it? *(SELECT ONLY ONE)* *(USE SHOWCARD)*	Always 1 Often 2 3 Sometimes 4 Rarely 5 Never Don't know 77	D5
How often is **salt, salty seasoning or a salty sauce added** in **cooking or preparing** foods in your household?	Always 1 Often 2 3 Sometimes 4 Rarely Never 5 Don't know 77	D6
How often do you eat **processed food high in salt**? By processed food high in salt, I mean foods that have been altered from their natural state, such as packaged salty snacks, canned salty food including pickles, preserves and canned soups, salty food prepared at a fast food restaurant, cheese, bacon and processed meat? *(USE SHOWCARD)*	Always 1 Often 2 3 Sometimes 4 Rarely 5 Never Don't know 77	D7
How much salt or salty sauce do you think you consume?	Far too much 1 Too much 2 Just the right amount 3 Too little 4 Far too little 5 Don't know 77	D8

EXPANDED: Diet		
Question	**Response**	**Code**
Do you think that too much salt or salty sauce in your diet could cause a **health problem**? [SHOW CARD SALT SAUCES]	Yes 1 No Don't know 2 77	D10
Do you do any of the following on a regular basis to **control your salt intake**? *(RECORD FOR EACH)*		
Limit consumption of processed foods	Yes 1 No 2	D11a
Look at the salt or sodium content on food labels	Yes 1 No 2	D11b
Buy low salt/sodium alternatives	Yes 1 No 2	D11c
Use spices other than salt when cooking	Yes 1 No 2	D11d
Avoid eating foods prepared outside of a home	Yes 1 No 2	D11e
Do other things specifically to control your salt intake	Yes 1 *If Yes, go to D11 other* No 2	D11f
Other (please specify)	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋	D11other
Diet routine: country questions		
In a typical week, on how many days you eat breakfast?	Number of days Don't Know 77 ⌊_⌋⌊_⌋	X6
In a typical week, on how many days do you eat your meals with one or more members of your household?	Number of day Don't Know 7 s 7 ⌊_⌋⌊_⌋	X7
In a typical week, where are most of your meals prepared?	At your home 1 At the home of a family or friend 2 At restaurant, take-away, fast-food 3 Side of the road vendor 4 Other 5	X8
On average, how many meals do you eat each day? [Meals do not include snacks]	1 meal per day 2 meals per day 1 2 3 meals per day 3 4 meals per day 5 or more meals per day 4 5	X9

How much sugar do you add to your hot beverage, such as a cup of tea or coffee/espresso/cappuccino?	None 1 teaspoon 2 teaspoons 3 teaspoons 4 or more teaspoons 1 2 3 4 5	X10
In a typical week, how often do you eat 'sweets' like donuts, chocolate bars, candy, baked treats, benny cake, cookies, tarts, cakes?	Everyday 2- 3 days per week Special functions only Rarely Never 1 2 3 4 5	X11
In a typical week, how often do you drink beverages like soda, fruit juices, malts, sweetened teas?	Everyday 2- 3 days per week Special functions only Rarely Never 1 2 3 4 5 *If Never, go to X14*	X12
How many cans/bottles (12 ounces) per day do you drink? *(USE SHOWCARD)*	1 – 3 cans/bottles 4 – 6 cans/bottles 7 – 9 cans/bottles 10 or more cans 1 2 3 4	X13
Do you think that too much sugar in your diet could cause a **health problem**?	Yes No Don't know 1 2 77	X14
In a typical week, how often do you eat fried foods?	Less than once per week 1 – 3 times per week 4– 6 times per week Daily 1 2 3 4	X15
How often do you read nutrition facts on food labels when shopping?	Always Often Sometimes Rarely Never Don't do the grocery shopping 1 2 3 4 5 *If Never, go to X18* *If Don't do the grocery shopping, go to X18*	X16
Does the information about sugar and/or salt content influence your choice/decision to purchase?	Yes No 1 2	X17
How much water do you typically drink in a day? [USE SHOWCARD]	1 - 3 cups 4 – 6 cups 7 – 8 cups More cups None 1 2 3 4 5	X18

CORE: Physical Activity

Next, I am going to ask you about the time you spend doing different types of physical activity in a typical week. Please answer these questions even if you do not consider yourself to be a physically active person. Think first about the time you spend doing work of any kind. Think of work as the things that you have to do such as paid or unpaid work, study/training, household chores, harvesting food/crops, fishing for food, seeking employment. In answering the following questions 'vigorousintensity activities' are activities that require hard physical effort and cause large increases in breathing or heart rate, 'moderate-intensity activities' are activities that require moderate physical effort and cause small increases in breathing or heart rate.

Question	Response	Code
Work		
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? *(USE SHOWCARD)*	Yes 1 No 2 *If No, go to P4*	P1
In a typical week, on how many days do you do vigorousintensity activities as part of your work?	Number of days ⌊_⌋	P2
How much time do you spend doing vigorous-intensity activities at work on a typical day?	⌊_⌋⌊_⌋ : ⌊_⌋⌊_⌋ Hours : minutes hrs mins	P3 (a-b)
Does your work involve moderate-intensity activity, that causes small increases in breathing or heart rate such as brisk walking, carrying light loads, cleaning, gardening for at least 10 minutes continuously? *(USE SHOWCARD)*	Yes 1 No 2 *If No, go to P7*	P4
In a typical week, on how many days do you do moderateintensity activities as part of your work?	Number of days ⌊_⌋	P5
How much time do you spend doing moderate-intensity activities at work on a typical day?	⌊_⌋⌊_⌋ : ⌊_⌋⌊_⌋ Hours : minutes hrs mins	P6 (a-b)
Travel to and from places		
The next questions exclude the physical activities that you have already mentioned. Now I would like to ask you about the usual way you travel to and from places. For example, to your place of employment, for shopping, to market, to church, to the bank.		

Do you walk or use a bicycle *(pedal cycle)* for at least 10 minutes continuously to get to and from places?	Yes1 No2 *If No, go to P10*	P7
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?	Number of days ⌊⌋	P8
How much time do you spend walking or bicycling for travel on a typical day?	Hours : minutes ⌊⌋⌊⌋ : ⌊⌋⌊⌋ hrs mins	P9 (a-b)
Recreational activities		
The next questions exclude the work and transport activitie Now I would like to ask you about sports, fitness and recrea	s that you have already mentioned. tional activities (leisure),	
Do you do any vigorous-intensity sports, fitness or recreational *(leisure)* activities that cause large increases in breathing or heart rate like running, touch football, cross-fit, basketball, spin fit for at least 10 minutes continuously? *(USE SHOWCARD)*	Yes1 No2 *If No, go to P 13*	P10
In a typical week, on how many days do you do vigorousintensity sports, fitness or recreational *(leisure)* activities?	Number of days ⌊⌋	P11
How much time do you spend doing vigorous-intensity sports, fitness or recreational activities on a typical day?	⌊⌋⌊⌋ : ⌊⌋⌊⌋ Hours : minutes hrs mins	P12 (a-b)
Do you do any moderate-intensity sports, fitness or recreational *(leisure)* activities that cause a small increase in breathing or heart rate such as brisk walking, cycling, swimming, volleyball, dancing, low-impact aerobics for at least 10 minutes continuously? *(USE SHOWCARD)*	Yes1 No2 *If No, go to P16*	P13
In a typical week, on how many days do you do moderateintensity sports, fitness or recreational *(leisure)* activities?	Number of days ⌊⌋	P14
How much time do you spend doing moderate-intensity sports, fitness or recreational *(leisure)* activities on a typical day?	⌊⌋⌊⌋ : ⌊⌋⌊⌋ Hours : minutes hrs mins	P15 (a-b)

EXPANDED: Physical Activity

Sedentary behaviour		
The following question is about sitting or reclining at work, at home, getting to and from places, or with friends including time spent sitting at a desk, sitting with friends, traveling in car, bus, train, reading, playing cards or watching television, but do not include time spent sleeping. *(USE SHOWCARD)*		
How much time do you usually spend sitting or reclining on a typical day?	utes ⌊⌋⌊⌋ : ⌊⌋⌊⌋ hrs mins	P16 (a-b)
On average, how many hours of sleep do you get in a 24-hour period?	utes ⌊⌋⌊⌋ : ⌊⌋⌊⌋ hrs mins	X19 (a-b)

CORE: History of Raised Blood Pressure		
Question	**Response**	**Code**
Have you ever had your blood pressure measured by a doctor or other health worker?	Yes 1 No 2 *If No, go to H6*	H1
Have you ever been told by a doctor or other health worker that you have raised blood pressure or hypertension?	Yes 1 No 2 *If No, go to H6*	H2a
Have you been told in the past 12 months?	Yes 1 No 2	H2b
In the past two weeks, have you taken any drugs (medication) for raised blood pressure prescribed by a doctor or other health worker?	Yes 1 No 2	H3
Have you ever seen an herbal doctor/bush medicine doctor/natural doctor for raised blood pressure or hypertension?	Yes 1 No 2	H4
Are you currently taking any herbal or bush remedy for your raised blood pressure?	Yes 1 No 2 *If No, go to H6*	H5
Do you sometimes take bush or herbal medicines instead of the high blood pressure medication prescribed by a doctor?	Yes 1 No 2	X20

CORE: History of Diabetes			
Have you ever had your blood sugar measured by a doctor or other health worker?	Yes 1 No 2 *If No, go to H12*		H6
Have you ever been told by a doctor or other health worker that you have raised blood sugar or diabetes?	Yes 1 No 2 *If No, go to H12*		H7a
Have you been told in the past 12 months?	Yes 1 No 2		H7b
In the past two weeks, have you taken any drugs (medication) for diabetes prescribed by a doctor or other health worker?	Yes 1 No 2		H8
Are you currently taking insulin for diabetes prescribed by a doctor or other health worker?	Yes 1 No 2		H9
Have you ever seen an herbal doctor/bush medicine doctor/natural doctor for diabetes or raised blood sugar?	Yes 1 No 2		H10
Are you currently taking any herbal or bush remedy for your diabetes?	Yes 1 No 2 *If No, go to H11a*		H11
Do you sometimes take bush or herbal medicines instead of the diabetic medication prescribed by a doctor?	es No	1 2	X21
Have you taken at least two HbA1C (glycated hemoglobin) tests in the past year as part of your diabetes management?	No Don't know	Yes 1 2 77	H11a
In the past 12 months, were your eyes examined as part of your diabetes management?	Yes No	1 2	X22
In the past 12 months, were your feet examined as part of your diabetes management?	Yes No	1 2	X23
FOR PERSONS WITH HYPERTENSION AND/OR DIABETES ONLY (H2a=1 or H7a=1)			
After you were told you have raised blood glucose/diabetes and/or raised blood pressure/hypertension, did any of the following arise as a result of these conditions? (READ ALL THE OPTIONS)			
Limb amputation	Yes 1 No 2		X24a
Digit amputation	Yes 1 No 2		X24b
Eye problems	Yes 1 No 2		X24c
Kidney problems	Yes 1 No 2		X24d
Heart problems	Yes 1 No 2		X24e
Sexual problems	Yes 1 No 2		X24f
Circulation problems	Yes 1 No 2		X24g

CORE: History of Raised Total Cholesterol		
Question	**Response**	**Code**
Have you ever had your cholesterol (fat levels in your blood) measured by a doctor or other health worker?	Yes 1 No 2 *If No, go to H17*	H12
Have you ever been told by a doctor or other health worker that you have raised cholesterol?	Yes 1 No 2 *If No, go to H17*	H13a
Have you been told in the past 12 months?	Yes 1 No 2	H13b
In the past two weeks, have you taken any oral treatment (medication) for raised total cholesterol prescribed by a doctor or other health worker?	Yes 1 No 2	H14
Have you ever seen an herbal doctor/bush medicine doctor/natural doctor for raised cholesterol?	Yes 1 No 2	H15
Are you currently taking any herbal or bush remedy for your raised cholesterol?	Yes 1 No 2	H16

CORE: History of Cardiovascular Diseases		
Have you ever had a heart attack or chest pain from heart disease (angina)?	Yes 1 2 No	H17a

Have you ever had a stroke (cerebrovascular accident or incident)?	Yes 1 No 2	H17b
Are you currently taking aspirin regularly to prevent or treat heart disease?	Yes 1 No 2	H18
Are you currently taking statins (Lovastatin/Simvastatin/Atorvastatin or any other statin) regularly to prevent or treat heart disease?	Yes 1 No 2	H19

EXPANDED: Family history		
Questions	**Response**	**Code**
To your knowledge, has any of your family members been diagnosed with the following diseases?		
Diabetes or raised blood sugar	Yes 1 No 2	F1a
Raised blood pressure	Yes 1 No 2	F1b
Stroke	Yes 1 No 2	F1c
Cancer or malignant tumor	Yes 1 No 2	F1d
Raised Cholesterol	Yes 1 No 2	F1e
Early heart attack (below age 55 for men and below age 65 for women)	Yes 1 No 2	F1f

CORE: Lifestyle Advice		
During the past 12 months, have you visited a doctor or other health worker?	Yes 1 No 2 *If No and C1=1 go to S1* *If No and C1=2 go to CX1*	H20
During any of your visits to a doctor or other health worker in the past 12 months, were you advised to do any of the following? (RECORD FOR EACH)		
Quit using tobacco or don't start	Yes 1 No 2	H20a
Reduce salt in your diet	Yes 1 No 2	H20b
Eat at least five servings of fruit and/or vegetables each day	Yes 1 No 2	H20c
Reduce fat in your diet	Yes 1 No 2	H20d
Start or do more physical activity	Yes 1 No 2	H20e
Maintain a healthy body weight or lose weight	Yes 1 No 2	H20f
Reduce sugary beverages in your diet	Yes 1 *If C1=1 go to S1* No 2 *If C1=1 go to S1*	H20g

CORE (for women only): Cervical Cancer Screening		
The next question asks about cervical cancer prevention. Screening tests for cervical cancer prevention can be done in different ways, including Visual Inspection with Acetic Acid/vinegar (VIA), pap smear and Human Papillomavirus (HPV) test. VIA is an inspection of the surface of the uterine cervix after acetic acid (or vinegar) has been applied to it. For both pap smear and HPV test, a doctor or nurse uses a swab to wipe from inside your vagina, take a sample and send it to a laboratory. The laboratory checks for abnormal cell changes if a pap smear is done, and for the HP virus if an HPV test is done.		
Question	**Response**	**Code**
Have you ever had a screening test for cervical cancer, using any of these methods described above?	Yes 1 No 2 Don't know 77	CX1
When was the last time you had a Pap smear?	1 year or less 1 Between 1 and 2 years 2 More than 2 years 3 Never 4 *If Never, go to S1* Don't know 77 *If Don't know, go to S1*	X25
Were the results normal?	Yes 1 No 2 3 I did not receive the results Don't know 77	X26
Step 1 – Pan-Am Optional Module	**Response**	**Code**

Have you ever had your feces/stool examined to look for hidden blood?	Yes 1 2 No Don't know 77	S1
Have you ever had a colonoscopy?	Yes 1 *If C1=1 go to S3; C1=2 go to S4* No 2 *If C1=1 go to S3; C1=2 go to S4*	S2
FOR MEN ONLY: Have you ever had an examination of your prostate?	Yes No 1 2	S3
When was the last time you had a prostate exam?	1 year or less 1 Between 1 and 2 years 2 More than 2 years 3 Never 4 Don't know 77	X27
FOR WOMEN ONLY: Have you ever been shown how to examine your breasts?	Yes 1 No 2	S4
When was the last time you had an examination of your breasts by a doctor/health professional?	1 year or less 1 Between 1 and 2 years 2 More than 2 years 3 Never 4 Don't know 77	S5
When was the last time you had a mammogram?	1 year or less 1 Between 1 and 2 years 2 More than 2 years 3 Never 4 Don't know 77	S6

Optional module: Oral Health		
The next questions ask about your oral health status and related behaviours.		
Question	**Response**	**Code**
Are any of your natural teeth missing?	Yes1 No2 No natural teeth3	X28

How would you describe the state of your gums?	Excellent Very Good 1 2 Good3 Average4 Poor5 Very Poor6	O3
Have you experienced any of the following during the last 12 months?		
Difficulty chewing foods	Yes1 No2	O13a
Bleeding gums	Yes1 No2	O13b
Difficulty eating cold foods or drinking cold beverages	Yes1 No2	O13c
Pain in your mouth	Yes1 No2	O13d
Persistent bad breath	Yes1 No2	O13e
Difficulty with speech/trouble pronouncing words	Yes1 No2	O13f
Embarrassed about appearance of teeth	Yes1 No2	O13g
Avoided smiling because of teeth	Yes1 No2	O13h
Reduced participation in social activities because of teeth	Yes1 No2	O13i
Interruption in sleep because of your teeth or gums	Yes1 No2	O13j
Do you have any of the following? (RECORD FOR EACH)		
An upper jaw denture	Yes 1 No 2	X29a
A lower jaw denture	Yes 1 No 2	X29b
Implants	Yes 1 No 2	X29c
Fillings	Yes 1 No 2	X29d
Extractions	Yes 1 No 2	X29e

How long has it been since you last saw/visited a dentist/dental hygienist?	Less than 6 months 1 6-12 months 2 More than 1 year but less than 2 years 3 2 or more years but less than 5 years 4 5 or more years 5 Never received dental care 6 *If Never, go to X30*	O7
What was the main reason for your last visit to the dentist?	Consultation / advice 1 ı teeth, gums or 2 mouth Treatment / Follow-up treatment 3 Routine check-up treatment 4 Other 5 I*f Other, go to O8other*	O8
	Other (please specify)	O8other
In a typical day, how many times do you brush your teeth?	More than 3 times per day 1 Three times per day2 Twice per day3 Once per day4 I don't brush my teeth everyday 5	X30
Do you use any of the following to clean your teeth?		
Toothpaste without fluoride	Yes1 No2	X31a
Toothpaste with fluoride	Yes1 No2	X31b
Dental floss/Thread	Yes1 No2	X31c
Baking soda	Yes1 No2	X31d
Charcoal	Yes1 No2	X31e
Wooden toothpicks	Yes1 No2	X31f
Plastic toothpicks	Yes1 No2	X31g
Chewsticks/miswak	Yes1 No2	X31h
Other	Yes1 No2	X31i
Do you use dental floss every day?	Yes1	X32

	No2	

Optional module: Sexual Health		
The next questions ask about different experiences and behaviours that are related to sexual and reproductive health.		
Question	**Response**	**Code**
Have you ever had sexual intercourse?	Yes 1 No 2 *If No, go to V1* Refused 88 *If Refused, go to V1*	SH1
How old were you when you first had sexual intercourse?	Age in years ⌊_⌋⌊_⌋ Don't remember 77 Refused 88	SH2
During the past 12 months, with how many people have you had sex (that is, oral, anal or vaginal sex)?	Number ⌊_⌋⌊_⌋ *If 1, go to SH8* Don't remember77 Refused 88	SH6
During the last 12 months, was there a period during which you were having sex with more than one partner?	Yes 1 No 2 Don't remember 77 Refused 88	SH7
During the past 12 months, did you give money, gifts or favours in exchange for sex?	Yes 1 No 2 Don't know 77 Refused 88	SH8
The last time you had sexual intercourse, were any of the following methods of protection against pregnancy and/or infection used? (RECORD FOR EACH)		
A condom	Yes1 No2 Don't remember77	SH10a
The pill	Yes1 No2 Don't remember77	SH10b
A different method	Yes1 *If Yes, go to X33* No2 Don't remember77	SH10c

Which method was used?	IUD 1 The shot (e.g. Depo 2 Provera) 3 Withdrawal 4 Don't remember Other 5 *If Other, go to SH10cOther*	X33
	Other (please specify) ⌊_⌊_⌊_⌊_⌊_⌊_⌋	SH10cOther
Have you ever had a disease/infection which you got through sexual contact?	Yes 1 No Don't remember 2 77 Refused 88	SH12

Optional module: Violence and injury		
The following questions are about different experiences and behaviours that are related to violence.		
Question	**Response**	**Code**
In the past 30 days, how often did you use a seat belt when you were the driver or passenger of a motor vehicle?	All of the time 1 Sometimes 2 Never 3 ehicle in past 30 4 days No seat belt in the car I usually am in 5 Don't know 77 Refused 88	V1
In the past 30 days, how often did you wear a helmet when you drove or rode as a passenger on a motorcycle, motor-scooter or quad bike?	All of the time 1 Sometimes 2 Never 3 Have not been on a motorcycle or motor- 4 scooter or quad bike in past 30 days Do not have a helmet 5 Don't know 77 Refused 88	V2
In the past 30 days, how many times have you **driven** a motorized vehicle when you have had 2 or more alcoholic drinks? (USE SHOWCARD)	Number of times ⌊_⌊_⌊_⌋ Don't Know 77 Refused 88	9
In the past 30 days, how many times have you **ridden in** a motorized vehicle where the driver has had 2 or more alcoholic drinks? (USE SHOWCARD)	Number of times ⌊_⌊_⌊_⌋ on't Know 77 Refused 88	V10

In the past 12 months, how many times were you in a violent incident in which you were injured and required medical attention?	Never 1 *If never, go to X34* Rarely (1- 2 times) 2 Sometimes (3 - 5 times) 3 Often (6 or more times) 4 Don't know 77 *If don't know, go to X34* Refused 88 *If Refused, go to X34*	V11
The next questions ask about the most serious violent incidence you have had in the past 12 months.		
Please indicate which of the following caused your most serious injury in the last 12 months. (USE SHOWCARD)	Being shot with a firearm [1] apon (other than a firearm) was used by the person who injured me 2 Being injured without any weapon (slapped, pushed) [3] Don't know 77 Refused 88	V12
Please indicate the relationship between yourself and the person(s) who caused your injury.	Intimate partner 1 Parent 2 Child, sibling, or other relative 3 Friend or acquaintance 4 Unrelated caregiver 5 Stranger 6 Official or legal authorities 7 Other (specify) 8 Refused 88	V13
	Other (please specify)	V13other
Have you ever experienced a sex act involving either vaginal, oral, anal penetration, or fondling/groping **against your will**?	Yes 1 No 2 Don't know 77 Refused 88	X34

The next questions ask about behaviours related to your safety.		
Question	**Response**	**Code**
In the past 12 months, have you been frightened for the safety of yourself or your family because of the anger or threats of another person(s)?	Yes 1 No Refused 2 If no, go to X35 88 If refused, go to X35	V17
Please specify of whom you were most often frightened.	Intimate partner 1 Parent 2 Child, sibling, or other relative 3 Friend or acquaintance 4 Unrelated caregiver 5 Stranger 6 Official or legal authority 7 Other (specify) 8 Refused 88	V18
	Other (please specify)	V18other
In the past 30 days, how often did **you drive** a motorized vehicle while using your cellphone?	Never 1 Very rarely 2 Often 3 Daily 4 Don't know 77 Refused 88	X35
In the past 30 days, how often did you **travel in/were a passenger in** a motorized vehicle where the driver was distracted (cellphone, applying make-up, reading, other)?	Never 1 Very rarely 2 Often Daily 3 4 Don't know 77 Refused 88	X36

Optional module: Mental health / Suicide		
The next questions ask about thoughts, plans, and attempts of suicide. Please answer the questions even if no one usually talks about these issues.		
Question	**Response**	**Code**
During the past 12 months, have you seriously considered attempting suicide?	Yes 1 No Refused 2 *If No, go to MH3* 88	MH1
Did you seek professional help for these thoughts?	Yes 1 No 2 Refused 88	MH2
During the past 12 months, have you made a plan about how you would attempt suicide?	Yes 1 No 2 Refused 88	MH3
Have you ever attempted suicide?	Yes 1 No 2 *If No, go to MH10* Refused 88	MH4
During the past 12 months, have you attempted suicide?	Yes 1 No Refused 2 88	MH5
Has anyone in your close family (mother, father, brother, sister or children) ever died from suicide?	Yes 1 No 2 Refused 88	MH10

Step 2 Physical Measurements

CORE: Blood Pressure		
Question	**Response**	**Code**
Interviewer ID	⌊_⌋⌊_⌋⌊_⌋	M1
Device ID for blood pressure	⌊_⌋⌊_⌋	M2
Cuff size used	Small Medium 1 2 Large 3	M3
Reading 1	Systolic (mmHg) ⌊_⌋⌊_⌋⌊_⌋	M4a

	Diastolic (mmHg) ⌊_⌋⌊_⌋⌊_⌋	M4b
Reading 2	Systolic (mmHg) ⌊_⌋⌊_⌋⌊_⌋	M5a
	Diastolic (mmHg) ⌊_⌋⌊_⌋⌊_⌋	M5b
Reading 3	Systolic (mmHg) ⌊_⌋⌊_⌋⌊_⌋	M6a
	Diastolic (mmHg) ⌊_⌋⌊_⌋⌊_⌋	M6b
During the past two weeks, have you been treated for raised blood pressure with drugs (medication) prescribed by a doctor or other health worker?	Yes 1 No 2	M7
EXPANDED: Heart Rate		
Heart Rate		
Reading 1	Beats per minute ⌊_⌋⌊_⌋⌊_⌋	M16a
Reading 2	Beats per minute ⌊_⌋⌊_⌋⌊_⌋	M16b
Reading 3	Beats per minute ⌊_⌋⌊_⌋⌊_⌋	M16c
CORE: Height and Weight		
For women: Are you pregnant?	Yes 1 *If Yes, go to M16* No 2	M8
Interviewer ID	⌊_⌋⌊_⌋⌊_⌋	M9
Device IDs for height and weight	Height ⌊_⌋⌊_⌋ Weight ⌊_⌋⌊_⌋	M10a M10b
Height	in Centimetres (cm) ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋	M11
Weight *If too large for scale 666.6*	in Kilograms (kg) ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋	M12
CORE: Waist and Hip		
Device ID for waist and hip	⌊_⌋⌊_⌋	M13
Waist circumference	in Centimetres (cm) ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋	M14
Hip circumference	in Centimetres (cm) ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋	M15

Step 3 Biochemical Measurements

CORE: Blood Glucose		
Question	**Response**	**Code**
During the past 12 hours have you had anything to eat or drink, other than water?	Yes 1 No 2	B1
Technician ID	⌊_⌋⌊_⌋⌊_⌋	B2
Device ID	⌊_⌋⌊_⌋	B3
Time of day blood specimen taken (24-hour clock)	Hours : minutes ⌊_⌋⌊_⌋ : ⌊_⌋⌊_⌋ hrs mins	B4
Fasting blood glucose	⌊_⌋⌊_⌋⌊_⌋.⌊_⌋ mg/dl	B5
Today, have you taken insulin or other drugs (medication) that have been prescribed by a doctor or other health worker for raised blood glucose?	Yes 1 No 2	B6
CORE: Blood Lipids		
Device ID	⌊_⌋⌊_⌋	B7
Total cholesterol	⌊_⌋⌊_⌋⌊_⌋.⌊_⌋ mg/dl	B8
During the past two weeks, have you been treated for raised cholesterol with drugs (medication) prescribed by a doctor or other health worker?	Yes 1 2 No	B9
CORE: Urinary sodium and creatinine		
Had you been fasting prior to the urine collection?	Yes 1 No 2	B10
Technician ID	⌊_⌋⌊_⌋⌊_⌋	B11
Device ID	⌊_⌋⌊_⌋	B12
Time of day urine sample taken (24-hour clock)	Hours : minutes ⌊_⌋⌊_⌋ : ⌊_⌋⌊_⌋ hrs mins	B13
Urinary sodium	mmol/l ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋	B14
Urinary creatinine	mmol/l ⌊_⌋⌊_⌋.⌊_⌋⌊_⌋	B15

c. Annex – STEPS Data Book (complete)

PAHO/WHO STEPS

Noncommunicable Disease Risk Factor Survey

DATA BOOK FOR THE BAHAMAS

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IMPORTANT:

- ALL weighted programs use the variables **PSU, Stratum,** and one of either **WStep1, WStep2,** or **WStep3**.
- Unweighted tables do not have confidence intervals associated with them.
- Tables for biochemical measurements (including CVD risk) are presented unweighted, given that the response rate for Step 3 was lower than 60%.

Introduction

Purpose of the data book

This data book is a tool used to compile a complete set of data results relating to each question and measurement in the STEPS Instrument. The STEPS data book

Provides detailed information for the data analyst on producing the results for the tables.

Provides examples of which tables to use in the country report.

Provides examples and suggestions on the layout of tables.

Format of the data book

Each page in the data book contains a different table with:
Title and description of the table
Data tables for men, women and both sexes
Questions used to produce the table (actual question text)
Analysis information (Epi Info program name to produce the table).

Global Action Plan 2013-2020 and Global Monitoring Framework

STEPS captures 11 of the 25 indicators outlined in the Global Action Plan 2013-2020 and the Comprehensive Global Monitoring Framework for the Prevention and Control of NCDs[1], relating to 7 of the 9 global targets.

Indicators captured in STEPS are marked in **bold** and *italic* in the table below.

Tables in the data book relating to the Global Monitoring Framework

Tables in the data book relating to the Global Monitoring Framework are identified with this symbol:

Framework Element	Target	Indicator
MORTALITY AND MORBIDITY		
Premature mortality from noncommunicable disease	1. A 25% relative reduction in the overall mortality from CVDs, cancer, diabetes, or chronic respiratory diseases	1. Unconditional probability of dying between ages of 30 and 70 from cardiovascular diseases, cancer, diabetes or chronic respiratory diseases
Additional indicator		2. Cancer incidence, by type of cancer, per 100 000 population
BEHAVIOURAL RISK FACTORS		
Harmful use of alcohol	2. At least 10% relative reduction in the harmful use of alcohol, as appropriate, within the national context	3. Total (recorded and unrecorded) alcohol per capita (aged 15+ years old) consumption within a calendar year in litres of pure alcohol, as appropriate, within the national context ***4. Age-standardized prevalence of heavy episodic drinking among*** adolescents and ***adults***, as appropriate, within the national context 5. Alcohol-related morbidity and mortality among adolescents and adults, as appropriate, within the national context
Physical inactivity	3. A 10% relative reduction in prevalence of insufficient physical activity	6. Prevalence of insufficiently physically active adolescents, defined as less than 60 minutes of moderate to vigorous intensity activity daily ***7. Age-standardized prevalence of insufficiently physically active persons aged 18+ years (defined as less than 150 minutes of moderate-intensity activity per week, or equivalent)***
Salt/sodium intake	4. A 30% relative reduction in mean population intake of salt/sodium	***8. Age-standardized mean population intake of salt (sodium chloride) per day in grams in persons aged 18+ years***
Tobacco use	5. A 30% relative reduction in prevalence of current tobacco use	9. Prevalence of current tobacco use among adolescents ***10. Age-standardized prevalence of current tobacco use among persons aged 18+ years***
BIOLOGICAL RISK FACTORS		
Raised blood pressure	6. A 25% relative reduction in the prevalence of raised blood pressure or contain the prevalence of raised blood pressure, according to national circumstances	***11. Age-standardized prevalence of raised blood pressure among persons aged 18+ years (defined as systolic blood pressure ≥140 mmHg and/or diastolic blood pressure ≥90 mmHg) and mean systolic blood pressure***

[1] World Health Organization. Global action plan for the prevention and control of NCDs 2013-2020. Geneva: World Health Organization; 2013.

Diabetes and obesity	7. Halt the rise in diabetes & obesity	***12. Age-standardized prevalence of raised blood glucose/diabetes among persons aged 18+ years (defined as fasting plasma glucose concentration ≥ 7.0 mmol/l (126 mg/dl) or on medication for raised blood glucose)*** 13. Prevalence of overweight and obesity in adolescents (defined according to the WHO growth reference for school-aged children and adolescents, overweight – one standard deviation body mass index for age and sex, and obese – two standard deviations body mass index for age and sex) ***14. Age-standardized prevalence of overweight and obesity in persons aged 18+ years (defined as body mass index ≥ 25 kg/m² for overweight and body mass index ≥ 30 kg/m² for obesity)***
Additional indicators		15. Age-standardized mean proportion of total energy intake from saturated fatty acids in persons aged 18+ years ***16. Age-standardized prevalence of persons (aged 18+ years) consuming less than five total servings (400 grams) of fruit and vegetables per day*** ***17. Age-standardized prevalence of raised total cholesterol among persons aged 18+ years (defined as total cholesterol ≥5.0 mmol/l or 190 mg/dl); and mean total cholesterol concentration***
Framework Element	**Target**	**Indicator**
NATIONAL SYSTEMS RESPONSE		
Drug therapy to prevent heart attacks and strokes	8. At least 50% of eligible people receive drug therapy and counselling (including glycaemic control) to prevent heart attacks and strokes	***18. Proportion of eligible persons (defined as aged 40 years and older with a 10-year cardiovascular risk ≥30%, including those with existing cardiovascular disease) receiving drug therapy and counselling (including glycaemic control) to prevent heart attacks and strokes***
Essential noncommunicable disease medicines and basic technologies to treat major noncommunicable diseases	9. An 80% availability of the affordable basic technologies and essential medicines, including generics required to treat major noncommunicable diseases in both public and private facilities	19. Availability and affordability of quality, safe and efficacious essential noncommunicable disease medicines, including generics, and basic technologies in both public and private facilities
Additional indicators		20. Access to palliative care assessed by morphine-equivalent 21. Adoption of national policies that limit saturated fatty acids and virtually eliminate partially hydrogenated vegetable oils in the food supply, as appropriate, within the national context and national programmes 22. Availability, as appropriate, if cost-effective and affordable, of vaccines against human papillomavirus, according to national programmes and policies 23. Policies to reduce the impact on children of marketing of foods and non-alcoholic beverages high in saturated fats, trans fatty acids, free sugars, or salt 24. Vaccination coverage against hepatitis B virus monitored by number of third doses of Hep-B vaccine (HepB3) administered to infants ***25. Proportion of women between the ages of 30–49 screened for cervical cancer at least once, or more often, and for lower or higher age groups according to national programmes or policies***

Demographic Information Results

Age group by sex

Description: Summary information by age group and sex of the respondents.

Instrument question:

- Sex
- What is your date of birth?

Age group and sex of respondents						
Age Group (years)	Men		Women		Both Sexes	
	n	%	n	%	n	%
18-44	463	37.4	774	62.6	1237	52.3
45-69	469	41.7	657	58.3	1126	47.4
18-69	**932**	**39.4**	**1431**	**60.6**	**2363**	**100.0**

Analysis Information:

- Questions used: C1, C2, C3
- Epi Info program name: Cagesex (unweighted)

Education

Description: Mean number of years of education among respondents.

Instrument question:

- In total, how many years have you spent at school or in full-time study (excluding pre-school)?

Mean number of years of education						
Age Group (years)	Men		Women		Both Sexes	
	n	Mean	n	Mean	n	Mean
18-44	463	13.3	774	13.2	1237	13.2
45-69	469	12.9	657	13.0	1126	13.0
18-69	**932**	**13.1**	**1431**	**13.1**	**2363**	**13.1**

Analysis Information:

- Questions used: C4
- Epi Info program name: Ceduyears (unweighted)

Highest level of education

Description: Highest level of education achieved by the survey respondents.

Instrument question:

- What is the highest level of education you have completed?

Highest level of education — Men								
Age Group (years)	n	% No formal schooling	% Less than primary school	% Primary school completed	% Junior high school completed	% Senior high school completed	% College/ University completed	% Post graduate degree completed
18-44	463	0.4	0.0	0.9	4.1	65.0	26.8	2.8
45-69	466	0.9	0.6	2.1	11.8	60.5	20.4	3.6
18-69	**929**	**0.6**	**0.3**	**1.5**	**8.0**	**62.8**	**23.6**	**3.2**

Highest level of education — Women								
Age Group (years)	n	% No formal schooling	% Less than primary school	% Primary school completed	% Junior high school completed	% Senior high school completed	% College/ University completed	% Post graduate degree completed
18-44	773	0.5	0.0	1.0	2.8	60.5	32.2	2.8
45-69	656	2.0	0.8	2.7	7.5	54.9	28.2	4.0
18-69	**1429**	**1.2**	**0.3**	**1.8**	**5.0**	**57.9**	**30.4**	**3.4**

Highest level of education — Both Sexes								
Age Group (years)	n	% No formal schooling	% Less than primary school	% Primary school completed	% Junior high school completed	% Senior high school completed	% College/ University completed	% Post graduate degree completed
18-44	1236	0.5	0.0	1.0	3.3	62.2	30.2	2.8
45-69	1122	1.5	0.7	2.5	9.3	57.2	25.0	3.8
18-69	**2358**	**1.0**	**0.3**	**1.7**	**6.1**	**59.8**	**27.7**	**3.3**

Analysis Information:

- Questions used: C5
- Epi Info program name: Ceduhigh (unweighted)

Marital status

Description: Marital status of survey respondents.

Instrument question:

- What is your marital status?

Marital status							
	Men						
Age Group (years)	n	% Never married	% Currently married	% Separated	% Divorced	% Widowed	% Common law
18-44	463	70.8	21.4	4.1	1.5	0.0	2.2
45-69	466	25.8	42.1	10.7	11.4	7.1	3.0
18-69	**929**	**48.2**	**31.8**	**7.4**	**6.5**	**3.6**	**2.6**

Marital status							
	Women						
Age Group (years)	n	% Never married	% Currently married	% Separated	% Divorced	% Widowed	% Common law
18-44	771	65.1	21.4	6.6	3.9	0.8	2.2
45-69	653	32.5	36.4	9.0	11.6	9.3	1.1
18-69	**1424**	**50.1**	**28.3**	**7.7**	**7.4**	**4.7**	**1.7**

Marital status							
	Both Sexes						
Age Group (years)	n	% Never married	% Currently married	% Separated	% Divorced	% Widowed	% Common law
18-44	1234	67.3	21.4	5.7	3.0	0.5	2.2
45-69	1119	29.7	38.8	9.7	11.5	8.4	1.9
18-69	**2353**	**49.4**	**29.7**	**7.6**	**7.1**	**4.2**	**2.0**

Analysis Information:

- Questions used: C7
- Epi Info program name: Cmaritalstatus (unweighted)

Employment status

Description: Proportion of respondents in paid employment and those who are unpaid. Unpaid includes persons who are non-paid, students, homemakers, retired, and unemployed.

Instrument question:

- Which of the following best describes your main work status over the past 12 months?

Employment status					
	Men				
Age Group (years)	n	% Employed full-time	% Employed part-time	% Self-employed	% Unpaid
18-44	463	67.2	6.5	13.0	13.4
45-69	465	47.5	5.2	25.2	22.2
18-69	**928**	**57.3**	**5.8**	**19.1**	**17.8**

Employment status					
	Women				
Age Group (years)	n	% Employed full-time	% Employed part-time	% Self-employed	% Unpaid
18-44	773	60.4	10.1	7.1	22.4
45-69	654	49.8	5.8	8.7	35.6
18-69	**1427**	**55.6**	**8.1**	**7.8**	**28.5**

Employment status					
	Both Sexes				
Age Group (years)	n	% Employed full-time	% Employed part-time	% Self-employed	% Unpaid
18-44	1236	62.9	8.7	9.3	19.0
45-69	1119	48.9	5.5	15.5	30.0
18-69	**2355**	**56.3**	**7.2**	**12.3**	**24.2**

Analysis Information:

- Questions used: C8
- Epi Info program name: Cworkpaid (unweighted)

Unpaid work and unemployed

Description: Proportion of respondents in unpaid work.

Instrument question:

- Which of the following best describes your main work status over the past 12 months?

Unpaid work and unemployed – Men							
Age Group (years)	n	% Non-paid	% Student	% Home-maker	% Retired	Unemployed	
						% Able to work	% Not able to work
18-44	62	3.2	35.5	0.0	3.2	48.4	9.7
45-69	103	1.9	0.0	1.0	68.9	19.4	8.7
18-69	**165**	**2.4**	**13.3**	**0.6**	**44.2**	**30.3**	**9.1**

Unpaid work and unemployed – Women							
Age Group (years)	n	% Non-paid	% Student	% Home-maker	% Retired	Unemployed	
						% Able to work	% Not able to work
18-44	173	0.0	30.1	15.0	0.6	49.7	4.6
45-69	233	0.0	0.0	11.2	48.9	27.5	12.4
18-69	**406**	**0.0**	**12.8**	**12.8**	**28.3**	**36.9**	**9.1**

Unpaid work and unemployed – Both Sexes							
Age Group (years)	n	% Non-paid	% Student	% Home-maker	% Retired	Unemployed	
						% Able to work	% Not able to work
18-44	235	0.9	31.5	11.1	1.3	49.4	6.0
45-69	336	0.6	0.0	8.0	55.1	25.0	11.3
18-69	**571**	**0.7**	**13.0**	**9.3**	**32.9**	**35.0**	**9.1**

Analysis Information:

- Questions used: C8
- Epi Info program name: Cworknotpaid (unweighted)

Estimated household earnings

Description: summary of participant household earnings by ranges (in Bahamian dollars).

Instrument question:

- Can you give an estimate of the annual household income if I read some options to you?

Estimated household earnings									
n	% 0-5,000	% 5,001-10,000	% 10,001-15,000	% 15,001-20,000	% 20,001-40,000	% 40,001-60,000	% 60,001-80,000	% 80,001-100,000	% +100,001
1797	**8.5**	**9.1**	**12.0**	**15.0**	**25.4**	**13.9**	**9.4**	**5.4**	**1.3**

Analysis Information:

- Questions used: C11
- Epi Info program name: Cquintile_BHS (unweighted)

Tobacco Use

Current smoking

Description: Current smokers among all respondents.

Instrument question:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?

Percentage of current smokers									
Age Group (years)	Men			Women			Both Sexes		
	n	% Current smoker	95% CI	n	% Current smoker	95% CI	n	% Current smoker	95% CI
18-44	463	36.0	27.4-44.7	773	5.2	0.1-10.2	1236	20.3	14.7-25.8
45-69	468	26.5	20.9-32.2	656	1.2	0.5-2.0	1124	13.0	10.3-15.8
18-69	**931**	**32.4**	**26.7-38.1**	**1429**	**3.6**	**0.7-6.5**	**2360**	**17.4**	**13.8-21.1**

Analysis Information:

- Questions used: T1, T2, T8
- Epi Info program name: Tsmokestatus (unweighted); TsmokestatusWT (weighted)

Smoking Status

Description: Smoking status of all respondents.

Instrument questions:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?
- Do you currently smoke tobacco products daily?
- In the past, did you ever smoke any tobacco products?

Smoking status — Men									
Age Group (years)	n	Current smoker				Non-smokers			
		% Daily	95% CI	% Non-daily	95% CI	% Former smoker	95% CI	% Never smoker	95% CI
18-44	463	12.5	8.6-16.4	23.5	14.7-32.3	14.2	4.7-23.7	49.8	38.7-60.8
45-69	468	18.2	10.4-26.0	8.3	4.8-11.8	19.3	12.6-26.0	54.1	43.0-65.3
18-69	**931**	**14.7**	**10.6-18.8**	**17.7**	**12.1-23.4**	**16.2**	**10.2-22.1**	**51.4**	**44.1-58.8**

Smoking status — Women									
Age Group (years)	n	Current smoker				Non-smokers			
		% Daily	95% CI	% Non-daily	95% CI	% Former smoker	95% CI	% Never smoker	95% CI
18-44	773	1.4	0.4-2.4	3.7	0.0-8.8	8.9	3.9-13.9	86.0	76.8-95.1
45-69	656	0.8	0.1-1.4	0.5	0.0-0.9	4.7	1.2-8.2	94.1	90.7-97.5
18-69	**1429**	**1.2**	**0.5-1.9**	**2.4**	**0.0-5.4**	**7.2**	**4.2-10.1**	**89.2**	**84.3-94.2**

Smoking status — Both Sexes									
Age Group (years)	n	Current smoker				Non-smokers			
		% Daily	95% CI	% Non-daily	95% CI	% Former smoker	95% CI	% Never smoker	95% CI
18-44	1236	6.9	4.6-9.1	13.4	8.2-18.6	11.5	7.2-15.8	68.3	61.0-75.6
45-69	1124	8.9	5.4-12.5	4.1	2.3-6.0	11.5	7.6-15.5	75.4	69.4-81.5
18-69	**2360**	**7.7**	**5.6-9.7**	**9.8**	**6.6-13.0**	**11.5**	**8.6-14.4**	**71.1**	**66.0-76.1**

Analysis Information:

- Questions used: T1, T2, T8
- Epi Info program name: Tsmokestatus (unweighted); TsmokestatusWT (weighted)

Daily smoking

Description: Percentage of current daily smokers among smokers.

Instrument questions:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?
- Do you currently smoke tobacco products daily?

Current daily smokers among smokers									
Age Group (years)	Men			Women			Both Sexes		
	n	% Daily smokers	95% CI	n	% Daily smokers	95% CI	n	% Daily smokers	95% CI
18-44	141	34.8	22.5-47.1	--	--	--	179	33.9	22.3-45.5
45-69	118	68.7	51.4-86.0	--	--	--	135	68.3	51.5-85.1
18-69	**259**	**45.3**	**33.2-57.5**	**55**	**32.4**	**0.0-64.9**	**314**	**44.0**	**33.1-54.8**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Analysis Information:

- Questions used: T1, T2
- Epi Info program name: Tsmokefreq (unweighted); TsmokefreqWT (weighted)

Initiation and duration of smoking

Description: Mean age of initiation and mean duration of smoking, in years, among current smokers (no total age group for mean duration of smoking as age influences these values).

Instrument questions:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?
- Do you currently smoke tobacco products daily?
- How old were you when you first started smoking?
- Do you remember how long ago it was?

Mean age started smoking									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean age	95% CI	n	Mean age	95% CI	n	Mean age	95% CI
18-44	137	18.2	17.7-18.6	--	--	--	172	18.5	17.9-19.0
45-69	114	20.2	18.0-22.3	--	--	--	130	20.4	18.3-22.5
18-69	**251**	**18.8**	**18.2-19.4**	**51**	**21.2**	**20.0-22.4**	**302**	**19.0**	**18.5-19.5**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Mean duration of smoking									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean duration	95% CI	n	Mean duration	95% CI	n	Mean duration	95% CI
18-44	137	12.6	9.1-16.1	--	--	--	172	12.4	9.5-15.4
45-69	114	33.7	29.0-38.4	--	--	--	130	33.4	28.9-37.9

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Analysis Information:

- Questions used: T1, T2, T3, T4a-c
- Epi Info program name: Tsmokeagetime (unweighted); TsmokeagetimeWT_BHS (weighted)

Manufactured cigarette smokers

Description: Percentage of smokers who use manufactured cigarettes among daily smokers and among current smokers.

Instrument questions:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?
- Do you currently smoke tobacco products daily?
- On average, how many of the following products do you smoke each day?

Manufactured cigarette smokers among daily smokers									
Age Group (years)	Men			Women			Both Sexes		
	n	% Manu-factured cigarette smoker	95% CI	n	% Manu-factured cigarette smoker	95% CI	n	% Manu-factured cigarette smoker	95% CI
18-44	80	59.3	49.0-69.5	--	--	--	100	57.9	48.6-67.3
45-69	73	79.3	72.6-85.9	--	--	--	84	80.0	73.2-86.8
18-69	**153**	**68.9**	**63.0-74.8**	**--**	**--**	**--**	**184**	68.2	62.3-74.0

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Manufactured cigarette smokers among current smokers									
Age Group (years)	Men			Women			Both Sexes		
	n	% Manu-factured cigarette smoker	95% CI	n	% Manu-factured cigarette smoker	95% CI	n	% Manu-factured cigarette smoker	95% CI
18-44	137	44.4	24.8-64.0	--	--	--	174	43.1	27.0-59.2
45-69	117	64.3	54.3-74.4	--	--	--	133	64.6	54.8-74.4
18-69	**254**	**50.6**	**36.3-64.9**	**53**	**38.9**	**21.2-56.7**	**307**	**49.4**	**37.4-61.4**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Analysis Information:

- Questions used: T1, T2, T5a, T5aw
- Epi Info program name: Tsmokeman (unweighted); TsmokemanWT (weighted)

Smoked tobacco consumption

Description: Percentage of current smokers who smoke each of the following products.

Instrument questions:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?
- Do you currently smoke tobacco products daily?
- On average, how many of the following products do you smoke each day/week?

Percentage of current smokers smoking each of the following products							
Age Group (years)	Men						
	n	% Manuf. cigs.	95% CI	% Hand-rolled cigs.	95% CI	% Pipes of tobacco	95% CI
18-44	141	43.7	24.4-63.1	16.7	7.9-25.6	0.9	0.0-2.7
45-69	118	64.1	54.0-74.1	13.1	4.6-21.6	2.7	0.0-8.1
18-69	**259**	**50.1**	**35.8-64.3**	**15.6**	**8.5-22.8**	**1.5**	**0.0-3.5**

Percentage of current smokers smoking each of the following products							
	Men						
Age Group (years)	n	% Cigars, cheroots, cigarillos	95% CI	% Shisha	95% CI	% Other	95% CI
18-44	141	48.7	28.7-68.7	10.4	0.0-28.2	12.4	2.8-22.0
45-69	118	30.1	14.6-45.6	2.6	0.0-7.9	12.8	5.1-20.6
18-69	**259**	**42.9**	**28.9-56.9**	**7.9**	**0.0-20.8**	**12.5**	**5.9-19.1**

Percentage of current smokers smoking each of the following products							
	Women						
Age Group (years)	n	% Manuf. cigs.	95% CI	% Hand-rolled cigs.	95% CI	% Pipes of tobacco	95% CI
18-44	--	--	--	--	--	--	--
45-69	--	--	--	--	--	--	--
18-69	**55**	**37.9**	**21.2-54.6**	**27.4**	**19.7-35.2**	**2.8**	**0.0-7.7**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Percentage of current smokers smoking each of the following products							
	Women						
Age Group (years)	n	% Cigars, cheroots, cigarillos	95% CI	% Shisha	95% CI	% Other	95% CI
18-44	--	--	--	--	--	--	--
45-69	--	--	--	--	--	--	--
18-69	**55**	**21.5**	**0.0-43.3**	**0.8**	**0.0-2.7**	**10.7**	**0.0-23.0**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Percentage of current smokers smoking each of the following products							
	Both Sexes						
Age Group (years)	n	% Manuf. cigs.	95% CI	% Hand-roller cigs.	95% CI	% Pipes of tobacco	95% CI
18-44	179	42.5	26.6-58.4	18.2	9.7-26.8	1.0	0.0-2.6
45-69	135	64.0	54.0-73.9	13.6	5.4-21.8	3.0	0.0-8.1
18-69	**314**	**48.8**	**36.9-60.7**	**16.9**	**9.9-23.9**	**1.6**	**0.0-3.5**

Percentage of current smokers smoking each of the following products							
	Both Sexes						
Age Group (years)	n	% Cigars, cheroots, cigarillos	95% CI	% Shisha	95% CI	% Other	95% CI
18-44	179	45.2	24.4-66.1	9.1	0.0-25.0	12.1	4.0-20.2
45-69	135	29.4	15.0-43.9	2.4	0.0-7.4	12.9	5.6-20.2
18-69	**314**	**40.6**	**26.2-55.0**	**7.2**	**0.0-18.8**	**12.3**	**6.4-18.3**

Analysis Information:

- Questions used: T1, T2, T5a-T5fw
- Epi Info program name: Tsmoketypeprev (unweighted); TsmoketypeprevWT (weighted)

Frequency of daily cigarette smoking

Description: Percentage of daily cigarette smokers smoking given quantities of manufactured or hand-rolled cigarettes per day.

Instrument questions:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?
- Do you currently smoke tobacco products daily?
- On average, how many of the following products do you smoke each day?

Percentage of daily smokers smoking given quantities of manufactured or hand-rolled cigarettes per day											
	Men										
Age Group (years)	n	% <5 Cigs.	95% CI	% 5-9 Cigs.	95% CI	% 10-14 Cigs.	95% CI	% 15-24 Cigs.	95% CI	% ≥ 25 Cigs.	95% CI
18-44	57	47.8	29.1-66.5	27.2	10.4-43.9	18.4	0.0-42.0	4.0	0.0-10.6	2.7	0.0-6.7
45-69	60	17.3	5.5-29.1	23.6	6.3-40.9	7.2	0.4-13.9	26.5	0.0-57.1	25.5	0.0-63.5
18-69	**117**	**31.9**	**16.1-47.7**	**25.3**	**12.3-38.3**	**12.6**	**1.6-23.6**	**15.7**	**0.5-30.8**	**14.5**	**0.0-36.9**

Percentage of daily smokers smoking given quantities of manufactured or hand-rolled cigarettes per day											
	Women										
Age Group (years)	n	% <5 Cigs.	95% CI	% 5-9 Cigs.	95% CI	% 10-14 Cigs.	95% CI	% 15-24 Cigs.	95% CI	% ≥ 25 Cigs.	95% CI
18-44	--	--	--	--	--	--	--	--	--	--	--
45-69	--	--	--	--	--	--	--	--	--	--	--
18-69	--	--	--	--	--	--	--	--	--	--	--

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Percentage of daily smokers smoking given quantities of manufactured or hand-rolled cigarettes per day											
Age Group (years)	Both Sexes										
	n	% <5 Cigs.	95% CI	% 5-9 Cigs.	95% CI	% 10-14 Cigs.	95% CI	% 15-24 Cigs.	95% CI	% ≥ 25 Cigs.	95% CI
18-44	71	47.8	30.5-65.0	27.3	11.5-43.1	18.5	0.0-39.8	3.7	0.0-9.6	2.8	0.0-6.6
45-69	71	18.3	6.3-30.2	24.7	6.9-42.5	6.8	0.5-13.0	26.2	0.0-55.2	24.1	0.0-60.6
18-69	**142**	**32.8**	**18.0-47.6**	**26.0**	**13.4-38.6**	**12.6**	**2.4-22.7**	**15.1**	**1.0-29.2**	**13.6**	**0.0-34.3**

Analysis Information:

- Questions used: T1, T2, T5a, T5b
- Epi Info program name: Tcig (unweighted); TcigWT (weighted)

Former daily smokers and former

Description: Percentage of former daily smokers among all respondents and among ever daily smokers, and the mean duration, in years, since former smokers quit smoking.

Instrument questions:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?
- Do you currently smoke tobacco products daily?
- In the past did you ever smoke any tobacco products?
- In the past, did you ever smoke daily?
- How old were you when you stopped smoking?

Former daily smokers (who don't smoke currently) among all respondents									
Age Group (years)	Men			Women			Both Sexes		
	n	% Former daily smokers	95% CI	n	% Former daily smokers	95% CI	n	% Former daily smokers	95% CI
18-44	463	18.0	6.9-29.2	773	2.5	0.9-4.2	1236	10.1	5.2-15.0
45-69	468	15.8	8.9-22.8	656	2.6	0.5-4.7	1124	8.8	5.0-12.6
18-69	**931**	**17.2**	**10.5-23.9**	**1429**	**2.6**	**1.0-4.1**	**2360**	**9.6**	**6.5-12.6**

Former daily smokers (who don't smoke currently) among ever daily smokers									
Age Group (years)	Men			Women			Both Sexes		
	n	% Former daily smokers	95% CI	n	% Former daily smokers	95% CI	n	% Former daily smokers	95% CI
18-44	116	59.0	40.9-77.0	--	--	--	153	59.5	43.8-75.3
45-69	114	46.5	39.6-53.4	--	--	--	140	49.6	43.7-55.5
18-69	**230**	**53.9**	**40.4-67.4**	**63**	**68.8**	**47.9-89.7**	**293**	**55.6**	**44.1-67.0**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Mean years since cessation (former smokers)									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean years	95% CI	n	Mean years	95% CI	n	Mean years	95% CI
18-44	--	--	--	--	--	--	81	6.1	2.0-10.1
45-69	65	13.6	5.3-21.9	--	--	--	86	16.4	9.2-23.6
18-69	**113**	**8.7**	**4.9-12.6**	**54**	**13.3**	**7.1-19.5**	**167**	**10.2**	**7.1-13.4**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Analysis Information:

- Questions used: T1, T2, T8, T9, T10, T11a-c
- Epi Info program name: Tsmokeexdaily (unweighted); TsmokeexdailyWT_BHS (weighted)

Cessation

Description: Percentage of current smokers who have tried to stop smoking during the past 12 months.

Instrument questions:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?
- During the past 12 months, have you tried to stop smoking?

Current smokers who have tried to stop smoking									
	Men			Women			Both Sexes		
Age Group (years)	n	% Tried to stop smoking	95% CI	n	% Tried to stop smoking	95% CI	n	% Tried to stop smoking	95% CI
18-44	141	43.8	24.8-62.9	--	--	--	179	47.6	27.0-68.2
45-69	118	36.9	16.2-57.7	--	--	--	135	37.4	17.6-57.3
18-69	**259**	**41.7**	**25.0-58.3**	**55**	**69.3**	**39.1-99.4**	**314**	**44.6**	**26.4-62.8**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Analysis Information:

- Questions used: T1, T2, T6
- Epi Info program name: Tcessation (unweighted); TcessationWT (weighted)

Advice to stop smoking

Description: Percentage of current smokers who have been advised by a doctor or other health worker to stop smoking, among those smokers who have had a visit to a doctor or other health worker in the past 12 months.

Instrument questions:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?
- During any visit to a doctor or other health worker in the past 12 months, were you advised to quit smoking tobacco?

Current smokers who have been advised by doctor to stop smoking									
	Men			Women			Both Sexes		
Age Group (years)	n	% Advised to stop smoking	95% CI	n	% Advised to stop smoking	95% CI	n	% Advised to stop smoking	95% CI
18-44	109	18.4	8.5-28.3	--	--	--	140	27.8	9.8-45.8
45-69	103	54.9	31.1-78.7	--	--	--	118	53.9	31.0-76.9
18-69	**212**	**31.0**	**18.0-43.9**	**--**	**--**	**--**	**258**	**36.1**	**18.9-53.3**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Analysis Information:

- Questions used: T1, T2, T7
- Epi Info program name: Tcessation (unweighted); TcessationWT (weighted)

Current tobacco users

Description: Percentage of daily and current (daily plus non-daily) tobacco users, includes smoking and smokeless, among all respondents.

Instrument questions:

- Do you currently smoke any tobacco products, such as cigarettes, cigars, or pipes?
- Do you currently smoke tobacco products daily?
- Do you currently use any smokeless tobacco such as snuff, chewing tobacco, betel?
- Do you currently use smokeless tobacco products daily?

Current tobacco users									
	Men			Women			Both Sexes		
Age Group (years)	n	% Current users	95% CI	n	% Current users	95% CI	n	% Current users	95% CI
18-44	463	36.1	27.5-44.8	773	5.3	0.2-10.3	1236	20.3	14.8-25.9
45-69	468	26.5	20.9-32.2	656	1.3	0.5-2.1	1124	13.1	10.4-15.8
18-69	**931**	**32.5**	**26.8-38.2**	**1429**	**3.7**	**0.7-6.6**	**2360**	**17.5**	**13.9-21.1**

Daily tobacco users									
	Men			Women			Both Sexes		
Age Group (years)	n	% Daily users	95% CI	n	% Daily users	95% CI	n	% Daily users	95% CI
18-44	463	12.5	8.6-16.4	773	1.4	0.4-2.4	1236	6.9	4.6-9.1
45-69	468	18.3	10.5-26.1	656	0.8	0.2-1.5	1124	9.0	5.4-12.5
18-69	**931**	**14.7**	**10.6-18.8**	**1429**	**1.2**	**0.5-1.9**	**2360**	**7.7**	**5.6-9.7**

Analysis Information:

- Questions used: T1, T2, T12, T13
- Epi Info program name: Tdailyuser (unweighted); TdailyuserWT_BHS (weighted)

Exposure to second-hand smoke in home in past 30 days

Description: Percentage of respondents exposed second-hand smoke in the home in the past 30 days.

Instrument question:

- In the past 30 days, did someone smoke in your home?

Exposed to second-hand smoke at home during the past 30 days									
Age Group (years)	Men			Women			Both Sexes		
	n	% Exposed	95% CI	n	% Exposed	95% CI	n	% Exposed	95% CI
18-44	463	16.8	7.8-25.7	773	9.7	5.6-13.8	1236	13.2	8.8-17.6
45-69	468	13.5	5.5-21.5	656	7.6	0.0-15.3	1124	10.4	2.7-18.1
18-69	**931**	**15.5**	**9.5-21.6**	**1429**	**8.9**	**3.9-13.8**	**2360**	**12.1**	**7.5-16.6**

Analysis Information:

- Questions used: T17
- Epi Info program name: Tetshome (unweighted); TetshomeWT (weighted)

Exposure to second-hand smoke in the workplace in past 30 days

Description: Percentage of respondents exposed to second-hand smoke at the workplace in the past 30 days.

Instrument question:

- During the past 30 days, did someone smoke in closed areas in your workplace (in the building, in a work area or a specific office)?

Exposed to second-hand smoke at the workplace during the past 30 days									
Age Group (years)	Men			Women			Both Sexes		
	n	% Exposed	95% CI	n	% Exposed	95% CI	n	% Exposed	95% CI
18-44	418	33.7	20.6-46.9	718	13.6	6.4-20.8	1136	23.3	15.5-31.0
45-69	413	11.3	7.3-15.4	615	5.1	2.0-8.2	1028	7.8	5.4-10.3
18-69	**831**	**25.7**	**16.2-35.1**	**1333**	**10.2**	**6.7-13.7**	**2164**	**17.4**	**12.7-22.1**

Analysis Information:

- Questions used: T18
- Epi Info program name: Tetswork (unweighted); TetsworkWT (weighted)

Alcohol Consumption

Alcohol consumption status

Description: Alcohol consumption status of all respondents.

Instrument questions:

- Have you ever consumed any alcohol such as …?
- Have you consumed any alcohol in the past 12 months?
- Have you consumed any alcohol in the past 30 days?

Alcohol consumption status

Men

Age Group (years)	n	% Current drinker (past 30 days)	95% CI	% Drank in past 12 months, not current	95% CI	% Past 12 months abstainer	95% CI	% Lifetime abstainer	95% CI
18-44	463	65.0	55.5-74.4	9.8	4.1-15.5	9.8	1.4-18.2	15.4	9.9-20.9
45-69	468	49.4	39.3-59.5	8.9	0.1-17.7	9.9	5.3-14.5	31.8	25.6-38.0
18-69	**931**	**59.0**	**51.7-66.4**	**9.5**	**5.3-13.6**	**9.9**	**4.4-15.3**	**21.6**	**16.2-27.1**

Alcohol consumption status

Women

Age Group (years)	n	% Current drinker (past 30 days)	95% CI	% Drank in past 12 months, not current	95% CI	% Past 12 months abstainer	95% CI	% Lifetime abstainer	95% CI
18-44	773	49.7	43.1-56.4	13.1	7.2-19.1	9.3	4.6-14.1	27.8	19.7-35.9
45-69	656	27.2	19.9-34.5	14.5	8.8-20.3	9.0	6.1-11.9	49.3	39.0-59.5
18-69	**1429**	**40.7**	**35.4-46.0**	**13.7**	**9.3-18.1**	**9.2**	**5.9-12.5**	**36.4**	**29.4-43.4**

Alcohol consumption status

Both Sexes

Age Group (years)	n	% Current drinker (past 30 days)	95% CI	% Drank in past 12 months, not current	95% CI	% Past 12 months abstainer	95% CI	% Lifetime abstainer	95% CI
18-44	1236	57.2	50.5-63.9	11.5	7.1-15.9	9.6	4.2-15.0	21.7	15.9-27.6
45-69	1124	37.6	31.3-43.8	11.9	7.1-16.7	9.4	6.2-12.6	41.1	35.2-47.0
18-69	**2360**	**49.5**	**45.3-53.7**	**11.7**	**9.0-14.3**	**9.5**	**5.8-13.2**	**29.3**	**24.1-34.5**

Analysis Information:

- Questions used: A1, A2, A5
- Epi Info program name: Aconsumption (unweighted); AconsumptionWT (weighted)

Stopping drinking due to health reasons

Description: Percentage of former drinkers (those who did not drink during the past 12 months) who stopped drinking due to health reasons, such as a negative impact of drinking on your health or as per advice of a doctor or other health worker among those respondents who drank in their lifetime, but not in the last 12 months.

Instrument questions:

- Have you consumed any alcohol in the past 12 months?
- Did you stop drinking due to health reasons, such as a negative impact of drinking on your health or as per advice of your doctor or other health worker?

Stopping drinking due to health reasons

Age Group (years)	Men			Women			Both Sexes		
	n	% stopping due to health reasons	95% CI	n	% stopping due to health reasons	95% CI	n	% stopping due to health reasons	95% CI
18-44	--	--	--	--	--	--	62	9.0	0.0-20.6
45-69	--	--	--	73	11.7	4.1-19.3	129	18.2	11.0-25.5
18-69	**76**	**14.7**	**1.0-28.4**	**115**	**10.4**	**3.2-17.5**	**191**	**12.5**	**4.2-20.8**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed.

Analysis Information:

- Questions used: A1, A2, A3
- Epi Info program name: Astopdrink (unweighted); AstopdrinkWT (weighted)

Frequency of alcohol consumption

Description: Frequency of alcohol consumption in the past 12 months among those respondents who drank in the last 12 months.

Instrument question:

- During the past 12 months, how frequently have you had at least one alcoholic drink?

Frequency of alcohol consumption in the past 12 months

Men

Age Group (years)	n	% Daily	95% CI	% 5-6 days / week	95% CI	% 3-4 days / week	95% CI	% 1-2 days / week	95% CI	% 1-3 days / month	95% CI	% < once a month	95% CI
18-44	349	12.4	2.7-22.2	3.2	0.6-5.7	11.8	6.6-16.9	37.8	27.0-48.6	15.5	8.1-22.9	19.1	9.5-28.6
45-69	264	14.9	0.0-34.1	6.0	2.2-9.7	17.6	9.5-25.6	29.3	11.9-46.6	18.2	8.6-27.7	13.7	6.6-20.7
18-69	**613**	**13.2**	**1.2-25.3**	**4.1**	**2.2-6.0**	**13.7**	**9.5-17.8**	**35.0**	**24.0-46.0**	**16.4**	**8.8-23.9**	**17.3**	**9.7-24.9**

Frequency of alcohol consumption in the past 12 months

Women

Age Group (years)	n	% Daily	95% CI	% 5-6 days / week	95% CI	% 3-4 days / week	95% CI	% 1-2 days / week	95% CI	% 1-3 days / month	95% CI	% < once a month	95% CI
18-44	443	12.5	0.6-24.5	5.9	0.2-11.6	6.4	3.0-9.8	23.2	17.9-28.5	26.6	17.2-36.1	24.4	14.7-34.0
45-69	256	12.6	0.0-26.5	0.6	0.0-1.6	1.6	0.2-3.0	26.6	12.4-40.7	25.0	18.8-31.3	30.7	22.9-38.5
18-69	**699**	**12.6**	**3.0-22.1**	**4.3**	**0.3-8.3**	**4.9**	**2.7-7.2**	**24.2**	**18.3-30.2**	**26.1**	**19.2-33.0**	**26.3**	**19.1-33.5**

Frequency of alcohol consumption in the past 12 months												
	Both Sexes											
Age Group (years)	n	% Daily	95% CI	% 5-6 days / week	95% CI	% 3-4 days / week	95% CI	% 1-2 days / week	95% CI	% 1-3 days / month	95% CI	% < once a month	95% CI
18-44	792	12.5	2.3-22.7	4.5	2.0-6.9	9.3	6.2-12.3	31.0	24.9-37.0	20.7	13.3-28.1	21.6	14.5-28.6
45-69	520	13.9	1.3-26.6	3.6	1.4-5.8	10.4	6.4-14.3	28.1	15.6-40.5	21.2	15.6-26.9	21.3	16.1-26.6
18-69	**1312**	**12.9**	**2.6-23.3**	**4.2**	**2.3-6.0**	**9.6**	**7.2-12.0**	**30.0**	**23.5-36.5**	**20.9**	**14.5-27.3**	**21.5**	**15.5-27.4**

Analysis Information:

- Questions used: A1, A2, A4
- Epi Info program name: Afrequency (unweighted); AfrequencyWT (weighted)

Drinking occasions in the past 30 days

Description: Mean number of occasions with at least one drink in the past 30 days among current (past 30 days) drinkers.

Instrument question:

- During the past 30 days, on how many occasions did you have at least one alcoholic drink?

Mean number of drinking occasions in the past 30 days among current (past 30 days) drinkers									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean	95% CI	n	Mean	95% CI	n	Mean	95% CI
18-44	271	6.2	4.8-7.5	311	3.5	2.1-4.8	582	4.9	3.6-6.3
45-69	221	6.6	4.6-8.7	163	3.0	2.2-3.7	384	5.2	4.0-6.5
18-69	**492**	**6.3**	**4.9-7.7**	**474**	**3.3**	**2.3-4.3**	**966**	**5.0**	**3.8-6.3**

Analysis Information:

- Questions used: A1, A2, A5, A6
- Epi Info program name: Aoccasions (unweighted); AoccasionsWT_BHS(weighted)

Standard drinks per drinking occasion

Description: Mean number of standard drinks consumed on a drinking occasion among current (past 30 days) drinkers.

Instrument question:

- During the past 30 days, when you drank alcohol, on average, how many standard alcoholic drinks did you have during one occasion?

Mean number of standard drinks per drinking occasion among current (past 30 days) drinkers									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean	95% CI	n	Mean	95% CI	n	Mean	95% CI
18-44	271	3.1	2.6-3.5	312	2.3	1.9-2.7	583	2.7	2.3-3.2
45-69	222	2.5	2.0-3.0	164	1.8	1.5-2.1	386	2.2	1.9-2.6
18-69	**493**	**2.9**	**2.6-3.2**	**476**	**2.2**	**1.8-2.5**	**969**	**2.6**	**2.2-2.9**

Analysis Information:

- Questions used: A1, A2, A5, A7
- Epi Info program name: Anumdrinkperday (unweighted); AnumdrinkperdayWT_BHS (weighted)

Average volume drinking levels among all respondents

Description: Percentage of respondents with different drinking levels.
A standard drink contains approximately 10g of pure alcohol.

Instrument questions:

- During the past 30 days, when you drank alcohol, on average, how many standard alcoholic drinks did you have during one occasion?

Drinking at high-end level among all respondents (≥60g of pure alcohol on average per occasion among men and ≥40g of pure alcohol on average per occasion among women)									
Age Group (years)	Men			Women			Both Sexes		
	n	% ≥60g	95% CI	n	% ≥40g	95% CI	n	% high-end level	95% CI
18-44	432	6.8	3.1-10.6	744	6.7	3.5-10.0	1176	6.8	4.0-9.5
45-69	449	2.7	0.7-4.6	645	1.6	0.2-3.0	1094	2.1	0.7-3.5
18-69	**881**	**5.2**	**2.6-7.8**	**1389**	**4.6**	**2.6-6.6**	**2270**	**4.9**	**3.0-6.8**

Drinking at intermediate level among all respondents (40-59.9g of pure alcohol on average per occasion among men and 20-39.9g of pure alcohol on average per occasion among women)									
Age Group (years)	Men			Women			Both Sexes		
	n	% 40-59.9g	95% CI	n	% 20-39.9g	95% CI	n	% intermediate level	95% CI
18-44	432	15.5	7.9-23.0	744	24.4	18.9-29.8	1176	20.1	15.5-24.7
45-69	449	5.6	3.1-8.1	645	12.4	8.8-15.9	1094	9.2	6.9-11.6
18-69	**881**	**11.6**	**6.7-16.5**	**1389**	**19.4**	**15.7-23.2**	**2270**	**15.7**	**13.0-18.5**

Drinking at lower-end level among all respondents (<40g of pure alcohol on average per occasion among men and <20g of pure alcohol on average per occasion among women)									
Age Group (years)	Men			Women			Both Sexes		
	n	% <40g	95% CI	n	% <20g	95% CI	n	% lower-end level	95% CI
18-44	432	39.4	33.0-45.8	744	16.0	7.9-24.2	1176	27.2	21.6-32.9
45-69	449	39.4	29.0-49.7	645	12.0	4.4-19.6	1094	24.7	17.4-31.9
18-69	**881**	**39.4**	**34.4-44.4**	**1389**	**14.4**	**9.2-19.5**	**2270**	**26.2**	**22.7-29.7**

Analysis Information:

- Questions used: A1, A2, A5, A7
- Epi Info program name: Acategories (unweighted); AcategoriesWT (weighted)

Average volume drinking levels among current (past 30 days) drinkers

Description: Percentage of current (past 30 days) drinkers with different drinking levels. A standard drink contains approximately 10g of pure alcohol.

Instrument questions:

- During the past 30 days, when you drank alcohol, on average, how many standard alcoholic drinks did you have during one occasion?

High-end, intermediate, and lower-end level drinking among current (past 30 days) drinkers							
Age Group (years)	Men						
	n	% high-end (≥60g)	95% CI	% intermediate (40-59.9g)	95% CI	% lower-end (<40g)	95% CI
18-44	271	11.1	6.1-16.1	25.1	15.2-34.9	63.9	51.8-75.9
45-69	222	5.6	1.3-9.9	11.8	6.5-17.0	82.6	75.0-90.3
18-69	**493**	**9.3**	**5.3-13.3**	**20.6**	**13.5-27.8**	**70.1**	**61.1-79.1**

High-end, intermediate, and lower-end level drinking among current (past 30 days) drinkers							
Age Group (years)	Women						
	n	% high-end (≥40g)	95% CI	% intermediate (20-39.9g)	95% CI	% lower-end (<20g)	95% CI
18-44	312	14.2	6.4-22.1	51.7	40.7-62.7	34.1	19.7-48.4
45-69	164	6.1	0.4-11.9	47.6	30.2-65.0	46.3	27.0-65.5
18-69	**476**	**12.0**	**5.9-18.1**	**50.6**	**43.4-57.8**	**37.4**	**27.4-47.5**

High-end, intermediate, and lower-end level drinking among current (past 30 days) drinkers							
Age Group (years)	Both sexes						
	n	% high-end	95% CI	% intermediate	95% CI	% lower-end	95% CI
18-44	583	12.5	7.8-17.3	37.1	30.2-44.0	50.3	41.1-59.6
45-69	386	5.8	1.7-9.9	25.6	17.5-33.8	68.5	58.5-78.6
18-69	**969**	**10.5**	**6.7-14.2**	**33.6**	**28.9-38.2**	**56.0**	**49.4-62.5**

Analysis Information:

- Questions used: A1, A2, A5, A7
- Epi Info program name: Acategories (unweighted); AcategoriesWT (weighted)

Largest number of drinks in the past 30 days

Description: Largest number of drinks consumed during a single occasion in the past 30 days among current (past 30 days) drinkers.

Instrument question:

- During the past 30 days, what was the largest number of standard alcoholic drinks you had on a single occasion, counting all types of alcoholic drinks together?

Mean maximum number of standard drinks consumed on one occasion in the past 30 days

Age Group (years)	Men			Women			Both Sexes		
	n	Mean maximum number	95% CI	n	Mean maximum number	95% CI	n	Mean maximum number	95% CI
18-44	284	4.6	3.7-5.6	323	3.0	2.5-3.5	607	3.9	3.1-4.7
45-69	229	3.3	2.5-4.2	169	2.4	2.1-2.6	398	3.0	2.5-3.5
18-69	**513**	**4.2**	**3.5-5.0**	**492**	**2.8**	**2.4-3.2**	**1005**	**3.6**	**3.0-4.2**

Analysis Information:

- Questions used: A1, A2, A5, A8
- Epi Info program name: Alargestnum (unweighted); AlargestnumWT_BHS (weighted)

Six or more drinks on a single occasion ("heavy episodic drinking")

Description: Percentage of respondents who had six or more drinks on any occasion in the past 30 days during a single occasion among the total population.

Instrument question:

- During the past 30 days, how many times did you have **six or more** standard alcoholic drinks in a single drinking occasion?

Six or more drinks on a single occasion at least once during the past 30 days among total population

Age Group (years)	Men			Women			Both Sexes		
	n	% ≥ 6 drinks	95% CI	n	% ≥ 6 drinks	95% CI	n	% ≥ 6 drinks	95% CI
18-44	463	26.2	15.3-37.2	773	14.8	5.7-23.9	1236	20.4	11.8-29.0
45-69	468	18.0	7.7-28.4	656	9.0	3.3-14.7	1124	13.2	8.5-17.9
18-69	**931**	**23.1**	**13.3-32.9**	**1429**	**12.5**	**6.3-18.6**	**2360**	**17.6**	**11.2-23.9**

Analysis Information:

- Questions used: A1, A2, A5, A9
- Epi Info program name: Aepisodic (unweighted); AepisodicWT_BHS (weighted)

Six or more drinks on a single occasion

Description: Mean number of times in the past 30 days on which current (past 30 days) drinkers consumed six or more drinks during a single occasion.

Instrument question:

- During the past 30 days, how many times did you have **six or more** standard alcoholic drinks in a single drinking occasion?

Mean number of times with six or more drinks during a single occasion in the past 30 days among current drinkers

Age Group (years)	Men			Women			Both Sexes		
	n	Mean number of times	95% CI	n	Mean number of times	95% CI	n	Mean number of times	95% CI
18-44	283	1.3	0.9-1.7	322	0.8	0.4-1.1	605	1.1	0.8-1.4
45-69	232	1.2	0.7-1.7	171	1.2	0.3-2.1	403	1.2	1.0-1.4
18-69	**515**	**1.3**	**0.9-1.6**	**493**	**0.9**	**0.5-1.3**	**1008**	**1.1**	**0.9-1.3**

Analysis Information:

- Questions used: A1, A2, A5, A9
- Epi Info program name: Aepisodic (unweighted); AepisodicWT_BHS (weighted)

Past 7 days drinking

Description: Frequency of alcohol consumption in the past 7 days by current (past 30 days) drinkers.

Instrument question:

- During each of the past 7 days, how many standard drinks of any alcoholic drink did you have each day?

Frequency of alcohol consumption in the past 7 days

Age Group (years)	Men										
	n	% Daily	95% CI	% 5-6 days	95% CI	% 3-4 days	95% CI	% 1-2 days	95% CI	% 0 days	95% CI
18-44	300	11.2	6.8-15.5	2.2	0.4-4.0	17.6	6.8-28.3	49.0	36.6-61.4	20.1	13.3-26.9
45-69	237	14.0	6.6-21.4	8.3	3.0-13.5	18.9	10.2-27.5	44.5	28.2-60.7	14.4	3.0-25.9
18-69	**537**	**12.1**	**8.4-15.8**	**4.1**	**2.1-6.1**	**18.0**	**9.6-26.4**	**47.5**	**36.9-58.2**	**18.3**	**12.7-23.8**

Frequency of alcohol consumption in the past 7 days

Age Group (years)	Women										
	n	% Daily	95% CI	% 5-6 days	95% CI	% 3-4 days	95% CI	% 1-2 days	95% CI	% 0 days	95% CI
18-44	338	3.5	0.6-6.5	1.6	0.2-3.0	14.1	5.8-22.4	58.8	46.9-70.7	21.9	12.6-31.2
45-69	174	19.1	0.0-39.5	2.8	0.0-5.6	12.4	3.8-21.0	32.2	20.9-43.5	33.5	19.8-47.3
18-69	**512**	**7.7**	**1.9-13.5**	**1.9**	**0.5-3.4**	**13.6**	**7.6-19.7**	**51.7**	**41.6-61.7**	**25.0**	**15.8-34.3**

Frequency of alcohol consumption in the past 7 days

Age Group (years)	Both Sexes										
	n	% Daily	95% CI	% 5-6 days	95% CI	% 3-4 days	95% CI	% 1-2 days	95% CI	% 0 days	95% CI
18-44	638	7.8	4.1-11.4	1.9	0.7-3.2	16.0	10.1-22.0	53.4	44.9-61.9	20.9	14.4-27.3
45-69	411	16.0	7.5-24.5	6.1	2.3-10.0	16.4	12.5-20.2	39.7	27.0-52.3	21.9	14.5-29.2
18-69	**1049**	**10.2**	**7.1-13.3**	**3.2**	**1.7-4.6**	**16.1**	**11.6-20.6**	**49.3**	**41.3-57.3**	**21.2**	**15.7-26.6**

Analysis Information:

- Questions used: A1, A2, A5, A10a-g
- Epi Info program name: Apastweek (unweighted); ApastweekWT_BHS (weighted)

Standard drinks per day in the past 7 days

Description: Mean number of standard drinks consumed on average per day in the past 7 days among current (past 30 days) drinkers.

Instrument question:

- During each of the past 7 days, how many standard drinks of any alcoholic drink did you have each day?

Mean number of standard drinks consumed on average per day in the past 7 days among current drinkers

Age Group (years)	Men			Women			Both Sexes		
	n	Mean number	95% CI	n	Mean number	95% CI	n	Mean number	95% CI
18-44	300	0.8	0.6-1.0	338	0.5	0.4-0.6	638	0.7	0.5-0.8
45-69	237	0.8	0.6-1.1	174	0.5	0.3-0.7	411	0.7	0.6-0.8
18-69	**537**	**0.8**	**0.7-1.0**	**512**	**0.5**	**0.4-0.6**	**1049**	**0.7**	**0.6-0.8**

Analysis Information:

- Questions used: A1, A2, A5, A10a-g
- Epi Info program name: Apastweek (unweighted); ApastweekWT_BHS (weighted)

Consumption of unrecorded alcohol

Description: Percentage of respondents that consumed unrecorded alcohol (homebrewed alcohol, alcohol brought over the border, not intended for drinking or other untaxed alcohol) during the past 7 days among current (past 30 days) drinkers.

Instrument questions:

- Have you consumed any alcohol within the past 30 days?
- During the past 7 days, did you consume any homebrewed alcohol, any alcohol brought over the border, not intended for drinking or other untaxed alcohol?

Consumption of unrecorded alcohol

Age Group (years)	Men			Women			Both Sexes		
	n	% consuming unrecorded alcohol	95% CI	n	% consuming unrecorded alcohol	95% CI	n	% consuming unrecorded alcohol	95% CI
18-44	302	0.7	0.0-1.5	341	1.6	0.2-3.0	643	1.1	0.3-1.9
45-69	241	0.3	0.0-0.8	175	0.0	0.0-0.0	416	0.2	0.0-0.5
18-69	**543**	**0.6**	**0.0-1.2**	**516**	**1.2**	**0.2-2.2**	**1059**	**0.8**	**0.3-1.4**

Analysis Information:

- Questions used: A1, A2, A5, A10a-g, A11
- Epi Info program name: Aunrecorded (unweighted); AunrecordedWT (weighted)

Percent of unrecorded alcohol from all alcohol consumed

Description: Percentage of unrecorded alcohol from all alcohol consumed during the past 7 days among current (past 30 days) drinkers.

Instrument questions:

- During each of the past 7 days, how many standard drinks did you have each day?
- During the past 7 days, did you consume any homebrewed alcohol, any alcohol brought over the border, not intended for drinking or other untaxed alcohol?
- On average, how many standard drinks of the following did you consume during the past 7 days?

Percentage of unrecorded alcohol from all alcohol consumed during past 7 days

Age Group (years)	Men			Women			Both Sexes		
	n	% unrecorded alcohol of all alcohol	95% CI	n	% unrecorded alcohol of all alcohol	95% CI	n	% unrecorded alcohol of all alcohol	95% CI
18-44	238	0.6	-	239	1.5	-	477	0.9	-
45-69	206	0.1	-	104	0	-	310	0.1	-
18-69	**444**	0.5	**-**	**343**	**1.1**	**-**	**787**	**0.7**	**-**

Analysis Information:

Analysis Information:

- Questions used: A1, A2, A5, A10a-g, A11, A12a-e
- Epi Info program name: Please contact the STEPS team.

Frequency of impaired control over drinking

Description: Frequency of not being able to stop drinking once started during the past 12 months among past 12 month drinkers.

Instrument questions:

- Have you consumed any alcohol within the past 12 months?
- How often during the past 12 months have you found that you were not able to stop drinking once you had started?

Frequency of not being able to stop drinking once started during the past 12 months among past 12 month drinkers

Age Group (years)	Men						
	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	349	14.0	1.8-26.2	5.0	0.0-10.6	81.0	69.2-92.9
45-69	264	4.8	0.5-9.1	1.5	0.2-2.9	93.7	89.2-98.1
18-69	**613**	**11.0**	**1.8-20.3**	**3.9**	**0.2-7.5**	**85.1**	**76.4-93.8**

Frequency of not being able to stop drinking once started during the past 12 months among past 12 month drinkers

Age Group (years)	Women						
	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	443	9.7	0.4-19.1	5.2	0.0-11.1	85.0	70.0-100.0
45-69	256	9.2	0.0-23.6	1.0	0.0-2.1	89.8	75.7-100.0
18-69	**699**	**9.6**	**1.5-17.6**	**3.9**	**0.0-8.1**	**86.5**	**74.7-98.3**

Frequency of not being able to stop drinking once started during the past 12 months among past 12 month drinkers

Age Group (years)	Both Sexes						
	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	792	12.0	1.9-22.1	5.1	1.8-8.4	82.9	71.3-94.5
45-69	520	6.8	0.6-12.9	1.3	0.4-2.2	91.9	85.8-98.1
18-69	**1312**	**10.4**	**2.8-17.9**	**3.9**	**1.7-6.1**	**85.7**	**77.2-94.3**

Analysis Information:

- Questions used: A1, A2, A13
- Epi Info program name: Anotabletostop (unweighted); AnotabletostopWT (weighted)

Frequency of failing to do what was normally expected because of drinking

Description: Frequency of failing to do what was normally expected from you because of drinking during the past 12 months among past 12 month drinkers.

Instrument questions:

- Have you consumed any alcohol within the past 12 months?
- How often during the past 12 months have you failed to do what was normally expected from you because of drinking?

Frequency of failing to do what was normally expected from you during the past 12 months among past 12 month drinkers

Age Group (years)	Men						
	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	349	6.4	0.0-15.3	1.6	0.3-2.9	92.0	83.1-100.0
45-69	264	3.8	0.0-7.8	2.4	0.3-4.6	93.8	89.3-98.3
18-69	**613**	**5.6**	**0.0-12.7**	**1.9**	**0.7-3.1**	**92.6**	**85.5-99.6**

Frequency of failing to do what was normally expected from you during the past 12 months among past 12 month drinkers							
	Women						
Age Group (years)	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	443	9.3	0.0-25.0	1.6	0.4-2.7	89.2	73.7-100.0
45-69	256	0.0	0.0-0.0	0.8	0.0-1.6	99.2	98.4-100.0
18-69	**699**	**6.4**	**0.0-17.7**	**1.3**	**0.5-2.1**	**92.3**	**81.2-100.0**

Frequency of failing to do what was normally expected from you during the past 12 months among past 12 month drinkers							
	Women						
Age Group (years)	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	443	9.3	0.0-25.0	1.6	0.4-2.7	89.2	73.7-100.0
45-69	256	0.0	0.0-0.0	0.8	0.0-1.6	99.2	98.4-100.0
18-69	**699**	**6.4**	**0.0-17.7**	**1.3**	**0.5-2.1**	**92.3**	**81.2-100.0**

Frequency of failing to do what was normally expected from you during the past 12 months among past 12 month drinkers							
	Both Sexes						
Age Group (years)	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	792	7.7	0.0-19.9	1.6	0.7-2.5	90.7	78.7-100.0
45-69	520	2.1	0.0-4.4	1.7	0.5-2.8	96.2	93.7-98.8
18-69	**1312**	**6.0**	**0.0-15.0**	**1.6**	**0.9-2.3**	**92.4**	**83.6-100.0**

Analysis Information:

- Questions used: A1, A2, A14
- Epi Info program name: Afailexpected (unweighted); AfailexpectedWT (weighted)

Frequency of morning drinking

Description: Frequency of needing a first drink in the morning to get going after a heavy drinking session during the past 12 months among past 12 month drinkers.

Instrument questions:

- Have you consumed any alcohol within the past 12 months?
- How often during the past 12 months have you needed a first drink in the morning to get yourself going after a heavy drinking session?

Frequency of needing a first drink in the morning to get going during the past 12 months among past 12 month drinkers							
	Men						
Age Group (years)	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	349	6.8	0.0-15.7	3.9	0.0-9.5	89.2	78.9-99.5
45-69	264	3.4	0.7-6.0	1.1	0.0-2.5	95.5	92.1-99.0
18-69	**613**	**5.7**	**0.0-11.5**	**3.0**	**0.0-6.7**	**91.3**	**84.7-97.8**

Frequency of needing a first drink in the morning to get going during the past 12 months among past 12 month drinkers							
	Women						
Age Group (years)	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	443	1.7	0.0-3.6	0.1	0.0-0.2	98.3	96.3-100.0
45-69	256	0.1	0.0-0.3	0.0	0.0-0.0	99.9	99.7-100.0
18-69	**699**	**1.2**	**0.0-2.6**	**0.1**	**0.0-0.2**	**98.8**	**97.4-100.0**

Frequency of needing a first drink in the morning to get going during the past 12 months among past 12 month drinkers							
	Both Sexes						
Age Group (years)	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	792	4.4	0.0-8.9	2.1	0.0-5.1	93.5	87.8-99.1
45-69	520	1.9	0.5-3.3	0.6	0.0-1.4	97.5	95.6-99.4
18-69	**1312**	**3.6**	**0.5-6.7**	**1.6**	**0.0-3.7**	**94.7**	**90.9-98.6**

Analysis Information:

- Questions used: A1, A2, A15
- Epi Info program name: Amorningdrink (unweighted); AmorningdrinkWT (weighted)

Frequency of problems with family/ partner due to someone else's drinking

Description: Frequency of having had problems with family or partner due to someone else's drinking in the past 12 months among all respondents.

Instrument question:

- Have you had family problems or problems with your partner due to someone else's drinking within the past 12 months?

Frequency of family/partner problems due to someone else's drinking during the past 12 months among all respondents							
	Men						
Age Group (years)	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	463	0.3	0.0-0.7	4.7	0.0-9.5	95.0	90.2-99.8
45-69	468	0.4	0.0-0.9	2.8	1.2-4.3	96.8	95.1-98.6
18-69	**931**	**0.3**	**0.0-0.6**	**4.0**	**0.8-7.2**	**95.7**	**92.4-99.0**

Frequency of family/partner problems due to someone else's drinking during the past 12 months among all respondents							
	Women						
Age Group (years)	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	773	0.2	0.0-0.5	5.4	1.0-9.7	94.4	90.1-98.7
45-69	656	0.6	0.0-1.1	2.6	0.6-4.6	96.8	94.9-98.7
18-69	**1429**	**0.4**	**0.0-0.7**	**4.3**	**1.0-7.5**	**95.4**	**92.2-98.5**

Frequency of family/partner problems due to someone else's drinking during the past 12 months among all respondents							
	Both Sexes						
Age Group (years)	n	% monthly or more frequently	95% CI	% less than monthly	95% CI	% never	95% CI
18-44	1236	0.3	0.0-0.5	5.0	2.1-8.0	94.7	91.7-97.7
45-69	1124	0.5	0.1-0.9	2.7	1.6-3.7	96.8	95.8-97.8
18-69	**2360**	**0.4**	**0.1-0.6**	**4.1**	**2.2-6.1**	**95.5**	**93.6-97.5**

Analysis Information:

- Question used: A16
- Epi Info program name: Afamproblem (unweighted); AfamproblemWT (weighted)

Diet

Mean number of days of fruit and vegetable consumption

Description: mean number of days fruit and vegetables consumed.

Instrument questions:

- In a typical week, on how many days do you eat fruit?
- In a typical week, on how many days do you eat vegetables?

Mean number of days fruit consumed in a typical week

Age Group (years)	Men			Women			Both Sexes		
	n	Mean number of days	95% CI	n	Mean number of days	95% CI	n	Mean number of days	95% CI
18-44	437	2.9	2.4-3.5	740	3.6	3.0-4.1	1177	3.3	2.9-3.6
45-69	452	3.9	3.1-4.6	648	4.3	3.8-4.7	1100	4.1	3.7-4.5
18-69	**889**	**3.3**	**2.9-3.7**	**1388**	**3.8**	**3.4-4.3**	**2277**	**3.6**	**3.3-3.9**

Mean number of days vegetables consumed in a typical week

Age Group (years)	Men			Women			Both Sexes		
	n	Mean number of days	95% CI	n	Mean number of days	95% CI	n	Mean number of days	95% CI
18-44	444	4.5	4.1-4.9	745	4.0	3.4-4.6	1189	4.2	3.9-4.6
45-69	455	4.2	3.5-5.0	649	4.6	4.1-5.1	1104	4.4	3.9-5.0
18-69	**899**	**4.4**	**4.0-4.8**	**1394**	**4.3**	**3.8-4.7**	**2293**	**4.3**	**4.0-4.7**

Analysis Information:

- Questions used: D1, D3
- Epi Info program name: Ddays (unweighted); DdaysWT (weighted)

Mean number of servings of fruit and vegetable consumption

Description: mean number of fruit, vegetable, and combined fruit and vegetable servings on average per day.

Instrument questions:

- In a typical week, on how many days do you eat fruit?
- How many servings of fruit do you eat on one of those days?
- In a typical week, on how many days do you eat vegetables?
- How many servings of vegetables do you eat on one of those days?

Mean number of servings of fruit on average per day

Age Group (years)	Men			Women			Both Sexes		
	n	Mean number of servings	95% CI	n	Mean number of servings	95% CI	n	Mean number of servings	95% CI
18-44	424	0.8	0.6-1.0	733	1.0	0.9-1.2	1157	0.9	0.8-1.0
45-69	448	1.5	0.8-2.2	643	1.6	1.1-2.1	1091	1.6	1.1-2.0
18-69	**872**	**1.1**	**0.8-1.3**	**1376**	**1.3**	**1.0-1.5**	**2248**	**1.2**	**1.0-1.3**

Mean number of servings of vegetables on average per day

Age Group (years)	Men			Women			Both Sexes		
	n	Mean number of servings	95% CI	n	Mean number of servings	95% CI	n	Mean number of servings	95% CI
18-44	431	1.3	1.0-1.6	736	1.4	0.8-2.0	1167	1.4	1.0-1.8
45-69	446	1.8	0.8-2.8	644	1.7	1.3-2.1	1090	1.7	1.1-2.4
18-69	**877**	**1.5**	**1.0-2.0**	**1380**	**1.5**	**1.1-1.9**	**2257**	**1.5**	**1.1-1.9**

Mean number of servings of fruit and/or vegetables on average per day									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean number of servings	95% CI	n	Mean number of servings	95% CI	n	Mean number of servings	95% CI
18-44	437	2.1	1.8-2.4	745	2.4	1.9-3.0	1182	2.3	1.9-2.6
45-69	451	3.3	1.7-4.9	648	3.3	2.5-4.1	1099	3.3	2.3-4.3
18-69	**888**	**2.5**	**1.8-3.3**	**1393**	**2.8**	**2.3-3.2**	**2281**	**2.7**	**2.1-3.2**

Analysis Information:

- Questions used: D1, D2 , D3, D4
- Epi Info program name: Dservings (unweighted); DservingsWT (weighted)

Fruit and vegetable consumption per day

Description: Frequency of fruit and/or vegetable consumption.

Instrument questions:

- In a typical week, on how many days do you eat fruit?
- How many servings of fruit do you eat on one of those days?
- In a typical week, on how many days do you eat vegetables?
- How many servings of vegetables do you eat on one of those days?

Number of servings of fruit and/or vegetables on average per day									
Age Group (years)	Men								
	n	% no fruit and/or vegetables	95% CI	% 1-2 servings	95% CI	% 3-4 servings	95% CI	% ≥5 servings	95% CI
18-44	437	28.0	21.7-34.3	49.7	41.7-57.6	12.5	4.8-20.2	9.9	4.1-15.6
45-69	451	26.9	7.4-46.4	36.4	23.6-49.1	14.5	10.3-18.7	22.3	6.3-38.3
18-69	**888**	**27.5**	**17.0-38.1**	**44.5**	**36.1-52.9**	**13.3**	**7.8-18.7**	**14.7**	**6.5-22.9**

Number of servings of fruit and/or vegetables on average per day									
Age Group (years)	Women								
	n	% no fruit and/or vegetables	95% CI	% 1-2 servings	95% CI	% 3-4 servings	95% CI	% ≥5 servings	95% CI
18-44	745	20.8	11.1-30.4	50.5	39.4-61.6	15.0	10.7-19.2	13.8	4.6-23.0
45-69	648	17.2	10.5-23.8	41.1	34.3-48.0	25.9	16.2-35.5	15.8	8.7-22.9
18-69	**1393**	**19.3**	**13.4-25.3**	**46.7**	**38.5-54.9**	**19.4**	**14.2-24.6**	**14.6**	**8.4-20.8**

Number of servings of fruit and/or vegetables on average per day									
Age Group (years)	Both Sexes								
	n	% no fruit and/or vegetables	95% CI	% 1-2 servings	95% CI	% 3-4 servings	95% CI	% ≥5 servings	95% CI
18-44	1182	24.2	18.4-30.1	50.1	41.9-58.2	13.8	8.6-19.0	11.9	6.9-17.0
45-69	1099	21.7	9.4-34.0	38.9	31.5-46.3	20.6	14.1-27.1	18.8	8.6-29.0
18-69	**2281**	**23.2**	**16.8-29.6**	**45.6**	**38.9-52.4**	**16.5**	**11.8-21.1**	**14.7**	**8.3-21.1**

Analysis Information:

- Questions used: D1, D2 , D3, D4
- Epi Info program name: Dfiveormore (unweighted); DfiveormoreWT (weighted)

Fruit and vegetable consumption per day

Description: Percentage of those eating less than five servings of fruit and/or vegetables on average per day.

Instrument questions:

- In a typical week, on how many days do you eat fruit?
- How many servings of fruit do you eat on one of those days?
- In a typical week, on how many days do you eat vegetables?
- How many servings of vegetables do you eat on one of those days?

Less than five servings of fruit and/or vegetables on average per day									
	Men			Women			Both Sexes		
Age Group (years)	n	% < five servings per day	95% CI	n	% < five servings per day	95% CI	n	% < five servings per day	95% CI
18-44	437	90.1	84.4-95.9	745	86.2	77.0-95.4	1182	88.1	83.0-93.1
45-69	451	77.7	61.7-93.7	648	84.2	77.1-91.3	1099	81.2	71.0-91.4
18-69	**888**	**85.3**	**77.1-93.5**	**1393**	**85.4**	**79.2-91.6**	**2281**	**85.3**	**78.9-91.7**

Analysis Information:

- Questions used: D1, D2, D3, D4
- Epi Info program name: Dfiveormore (unweighted); DfiveormoreWT (weighted)

Adding salt at meal

Description: Percentage of all respondents who always or often add salt or salty sauce to their food before eating or as they are eating.

Instrument question:
How often do you add salt or a salty sauce such as soya sauce to your food right before you eat it or as you are eating it?

Add salt always or often before eating or when eating									
Age Group (years)	Men			Women			Both Sexes		
	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	456	18.8	8.4-29.2	758	21.0	14.1-28.0	1214	19.9	12.4-27.4
45-69	459	9.6	3.8-15.3	650	12.0	6.2-17.9	1109	10.9	5.8-15.9
18-69	**915**	**15.3**	**8.0-22.6**	**1408**	**17.4**	**11.8-23.0**	**2323**	**16.4**	**10.7-22.0**

Analysis Information:
Question used: D5
Epi Info program name: Daddsalt (unweighted); DaddsaltWT (weighted)

Adding salt when cooking

Description: Percentage of all respondents who always or often add salt to their food when cooking or preparing foods at home.

Instrument question:
How often is salt, salty seasoning or a salty sauce added in cooking or preparing foods in your household?

Add salt always or often when cooking or preparing food at home									
Age Group (years)	Men			Women			Both Sexes		
	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	450	72.4	63.3-81.5	763	69.3	61.5-77.0	1213	70.8	63.7-77.9
45-69	459	59.2	47.3-71.1	655	53.0	39.7-66.3	1114	55.9	45.7-66.1
18-69	**909**	**67.4**	**59.1-75.7**	**1418**	**62.7**	**53.3-72.1**	**2327**	**64.9**	**56.8-73.1**

Analysis Information:
Question used: D6
Epi Info program name: Dcooking (unweighted); DcookingWT (weighted)

Salty processed food consumption

Description: Percentage of all respondents who always or often eat processed foods high in salt.

Instrument question:
How often do you eat processed food high in salt?

Always or often consume processed food high in salt									
Age Group (years)	Men			Women			Both Sexes		
	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	461	34.4	26.4-42.3	767	38.1	30.2-45.9	1228	36.3	30.6-41.9
45-69	462	9.7	5.5-14.0	655	9.0	5.3-12.7	1117	9.3	6.0-12.7
18-69	**923**	**25.0**	**19.4-30.7**	**1422**	**26.4**	**21.0-31.8**	**2345**	**25.7**	**21.5-30.0**

Analysis Information:
Question used: D7
Epi Info program name: Dprocessed (unweighted); DprocessedWT (weighted)

Salt consumption

Description: Percentage of all respondents who think they consume far too much or too much salt.

Instrument question:
How much salt or salty sauce do you think you consume?

Think they consume far too much or too much salt									
Age Group (years)	Men			Women			Both Sexes		
	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	413	28.1	15.6-40.6	687	32.6	26.0-39.3	1100	30.3	22.5-38.1
45-69	422	16.1	9.0-23.2	611	17.8	10.6-24.9	1033	17.1	10.8-23.3
18-69	**835**	**23.6**	**14.3-32.9**	**1298**	**25.9**	**20.0-31.9**	**2133**	**24.8**	**18.2-31.5**

Self-reported quantity of salt consumed												
	Men											
Age Group (years)	n	% Far too much	95% CI	% Too much	95% CI	% Just the right amount	95% CI	% Too little	95% CI	% Far too little	95% CI
18-44	413	3.6	1.1-6.0	24.5	12.2-36.8	68.0	54.4-81.6	2.8	1.1-4.5	1.1	0.0-2.1
45-69	422	1.4	0.2-2.6	14.7	7.9-21.5	73.4	64.1-82.6	8.0	3.8-12.2	2.5	0.9-4.1
18-69	**835**	**2.8**	**1.1-4.5**	**20.8**	**11.8-29.9**	**70.0**	**59.5-80.5**	**4.7**	**2.8-6.7**	**1.6**	**0.6-2.6**

Self-reported quantity of salt consumed												
	Women											
Age Group (years)	n	% Far too much	95% CI	% Too much	95% CI	% Just the right amount	95% CI	% Too little	95% CI	% Far too little	95% CI
18-44	687	6.7	3.8-9.6	25.9	19.6-32.2	60.3	55.5-65.1	4.4	2.3-6.4	2.7	0.0-6.2
45-69	611	4.3	0.7-8.0	13.4	4.9-21.9	67.1	57.8-76.3	12.7	8.0-17.5	2.4	0.8-4.1
18-69	**1298**	**5.7**	**3.2-8.1**	**20.3**	**14.5-26.1**	**63.4**	**57.6-69.2**	**8.1**	**5.5-10.8**	**2.6**	**0.5-4.7**

Self-reported quantity of salt consumed												
	Both Sexes											
Age Group (years)	n	% Far too much	95% CI	% Too much	95% CI	% Just the right amount	95% CI	% Too little	95% CI	% Far too little	95% CI
18-44	1100	5.1	3.1-7.1	25.2	18.2-32.1	64.3	56.6-71.9	3.6	2.0-5.2	1.9	0.1-3.6
45-69	1033	3.1	1.0-5.2	14.0	6.8-21.2	69.8	62.7-76.8	10.7	7.7-13.7	2.5	1.1-3.8
18-69	**2133**	**4.3**	**2.9-5.7**	**20.6**	**14.0-27.1**	**66.5**	**59.4-73.7**	**6.5**	**4.7-8.4**	**2.1**	**1.0-3.2**

Analysis Information:
Question used: D8
Epi Info program name: Dsaltquantity (unweighted); DsaltquantityWT (weighted)

Salt knowledge

Description: Percentage of respondents who think consuming too much salt could cause a serious health problem.

Instrument question:
Do you think that too much salt or salty sauce in your diet could cause a health problem?

Think consuming too much salt could cause serious health problem									
Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	463	93.1	87.5-98.7	773	94.2	90.8-97.7	1236	93.7	89.5-97.9
45-69	468	94.6	90.1-99.1	656	95.9	93.3-98.4	1124	95.3	93.4-97.1
18-69	**931**	**93.7**	**89.2-98.2**	**1429**	**94.9**	**93.0-96.8**	**2360**	**94.3**	**91.4-97.3**

Analysis Information:
Question used: D10
Epi Info program name: Dprocessed (unweighted); DprocessedWT (weighted)

Controlling salt intake

Description: Percentage of respondents who take specific action on a regular basis to control salt intake.

Instrument question:
Do you do any of the following on a regular basis to control your salt intake?

Limit consumption of processed foods									
Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	463	43.2	32.7-53.8	773	52.8	44.6-61.1	1236	48.1	39.7-56.6
45-69	468	50.5	38.7-62.4	656	68.4	57.1-79.8	1124	60.1	49.4-70.8
18-69	**931**	**46.0**	**36.9-55.1**	**1429**	**59.1**	**50.5-67.6**	**2360**	**52.8**	**44.5-61.1**

Look at the salt or sodium content on food labels									
Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	463	21.7	13.1-30.4	773	35.8	30.3-41.4	1236	28.9	23.6-34.3
45-69	468	30.9	20.5-41.3	656	49.3	42.6-56.1	1124	40.7	33.3-48.1
18-69	**931**	**25.2**	**18.0-32.4**	**1429**	**41.2**	**36.1-46.4**	**2360**	**33.5**	**28.4-38.7**

Buy low salt/sodium alternatives									
Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	463	23.2	13.3-33.1	773	32.0	26.8-37.2	1236	27.7	21.3-34.1
45-69	468	35.2	26.3-44.1	656	49.5	42.7-56.4	1124	42.9	36.7-49.0
18-69	**931**	**27.8**	**19.8-35.8**	**1429**	**39.0**	**34.9-43.1**	**2360**	**33.6**	**28.3-39.0**

Use spices other than salt when cooking									
Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	463	60.6	49.7-71.4	773	62.5	53.8-71.1	1236	61.5	54.7-68.4
45-69	468	50.9	38.4-63.4	656	69.2	56.8-81.6	1124	60.6	49.0-72.3
18-69	**931**	**56.9**	**46.5-67.3**	**1429**	**65.2**	**57.8-72.5**	**2360**	**61.2**	**53.5-68.9**

Avoid eating foods prepared outside of a home									
Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	463	43.2	31.2-55.1	773	46.7	39.0-54.4	1236	45.0	36.8-53.1
45-69	468	53.9	40.7-67.0	656	63.8	53.3-74.2	1124	59.1	48.3-69.9
18-69	**931**	**47.2**	**36.4-58.1**	**1429**	**53.5**	**46.2-60.8**	**2360**	**50.5**	**42.3-58.7**

Do other things specifically to control your salt intake									
Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	463	11.0	4.7-17.4	773	18.5	6.6-30.5	1236	14.9	5.8-24.0
45-69	468	11.9	0.5-23.2	656	15.4	8.8-22.0	1124	13.7	6.2-21.3
18-69	**931**	**11.3**	**3.4-19.2**	**1429**	**17.3**	**8.6-25.9**	**2360**	**14.4**	**6.3-22.6**

Analysis Information:
Questions used: D11a-f
Epi Info program name: Dcontrol (unweighted); DcontrolWT (weighted)

Physical Activity

Introduction

A population's physical activity (or inactivity) can be described in different ways. The two most common ways are
(1) to estimate a population's mean or median physical activity using a continuous indicator such as MET-minutes per week or time spent in physical activity, and
(2) to classify certain percentages of a population in specific groups by setting up cut-points for a specific amount of physical activity.

When analyzing GPAQ data, both continuous as well as categorical indicators are used.

Metabolic Equivalent (MET)

METs (Metabolic Equivalents) are commonly used to express the intensity of physical activities, and are also used for the analysis of GPAQ data.

Applying MET values to activity levels allows us to calculate total physical activity. MET is the ratio of a person's working metabolic rate relative to the resting metabolic rate. One MET is defined as the energy cost of sitting quietly, and is equivalent to a caloric consumption of 1 kcal/kg/hour. For the analysis of GPAQ data, existing guidelines have been adopted: It is estimated that, compared to sitting quietly, a person's caloric consumption is four times as high when being moderately active, and eight times as high when being vigorously active.

Therefore, for the calculation of a person's total physical activity using GPAQ data, the following MET values are used:

Domain	MET value
Work	• Moderate MET value = 4.0 • Vigorous MET value = 8.0
Transport	Cycling and walking MET value = 4.0
Recreation	• Moderate MET value = 4.0 • Vigorous MET value = 8.0

WHO global recommen-dations on physical activity for health

For the calculation of the categorical indicator on the recommended amount of physical activity for health, the total time spent in physical activity during a typical week and the intensity of the physical activity are taken into account.

Throughout a week, including activity for work, during transport and leisure time, adults should do at least

150 minutes of moderate-intensity physical activity OR
75 minutes of vigorous-intensity physical activity OR
An equivalent combination of moderate- and vigorous-intensity physical activity achieving at least 600 MET-minutes.

Former recommendations for comparison purposes

For comparison purposes, tables presenting cut-offs from former recommendations are also included in GPAQ data analysis.

The three levels of physical activity suggested for classifying populations were low, moderate, and high. The criteria for these levels are shown below.

High

A person reaching any of the following criteria is classified in this category:
- Vigorous-intensity activity on at least 3 days achieving a minimum of at least 1,500 MET-minutes/week OR
- 7 or more days of any combination of walking, moderate- or vigorous-intensity activities achieving a minimum of at least 3,000 MET-minutes per week.

Moderate

A person not meeting the criteria for the "high" category, but meeting any of the following criteria is classified in this category:
- 3 or more days of vigorous-intensity activity of at least 20 minutes per day OR
- 5 or more days of moderate-intensity activity or walking of at least 30 minutes per day OR
- 5 or more days of any combination of walking, moderate- or vigorous-intensity activities achieving a minimum of at least 600 MET-minutes per week.

Low

A person not meeting any of the above mentioned criteria falls in this category.

Not meeting WHO recommendations on physical activity for health ("Insufficient physical activity")

Description: Percentage of respondents not meeting WHO recommendations on physical activity for health (respondents doing less than 150 minutes of moderate-intensity physical activity per week, or equivalent).

Instrument questions

- activity at work
- travel to and from places
- recreational activities

Not meeting WHO recommendations on physical activity for health

Age Group (years)	Men			Women			Both Sexes		
	n	% not meeting recs	95% CI	n	% not meeting recs	95% CI	n	% not meeting recs	95% CI
18-44	429	16.3	9.7-22.9	739	39.6	26.3-52.9	1168	28.3	19.2-37.5
45-69	447	26.0	10.6-41.3	633	39.3	29.8-48.7	1080	33.1	21.7-44.5
18-69	**876**	**20.0**	**10.9-29.1**	**1372**	**39.5**	**28.8-50.2**	**2248**	**30.2**	**20.6-39.8**

Analysis Information:

- Questions used: P1-P15b
- Epi Info program name: Pnotmeetingrecs (unweighted); PnotmeetingrecsWT (weighted)

Levels of total physical activity according to former recommen-dations

Description: Percentage of respondents classified into three categories of total physical activity according to former recommendations.

Instrument questions:

- activity at work
- travel to and from places
- recreational activities

Level of total physical activity according to former recommendations							
Age Group (years)	Men						
	n	% Low	95% CI	% Moderate	95% CI	% High	95% CI
18-44	429	28.3	21.8-34.7	7.3	4.1-10.5	64.5	58.1-70.8
45-69	447	33.7	20.9-46.4	14.9	8.5-21.3	51.4	39.6-63.2
18-69	**876**	**30.3**	**23.4-37.3**	**10.2**	**7.2-13.2**	**59.4**	**52.4-66.4**

Level of total physical activity according to former recommendations							
Age Group (years)	Women						
	n	% Low	95% CI	% Moderate	95% CI	% High	95% CI
18-44	739	47.0	32.6-61.3	16.9	12.4-21.3	36.1	23.2-49.1
45-69	633	52.7	45.9-59.6	19.4	13.7-25.2	27.8	20.7-35.0
18-69	**1372**	**49.3**	**38.6-60.0**	**17.9**	**14.0-21.8**	**32.8**	**22.6-43.0**

Level of total physical activity according to former recommendations							
Age Group (years)	Both Sexes						
	n	% Low	95% CI	% Moderate	95% CI	% High	95% CI
18-44	1168	37.9	29.6-46.2	12.2	9.5-15.0	49.9	42.2-57.5
45-69	1080	43.8	35.1-52.6	17.3	13.1-21.6	38.8	30.5-47.1
18-69	**2248**	**40.3**	**32.3-48.3**	**14.2**	**11.7-16.8**	**45.5**	**37.9-53.1**

Analysis Information:

- Questions used: P1-P15b
- Epi Info program name: Ptotallevels (unweighted); PtotallevelsWT (weighted)

Total physical activity-mean

Description: Mean minutes of total physical activity on average per day.

Instrument questions

- activity at work
- travel to and from places
- recreational activities

Mean minutes of total physical activity on average per day									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean minutes	95% CI	n	Mean minutes	95% CI	n	Mean minutes	95% CI
18-44	429	321.4	230.0-412.9	739	162.4	79.2-245.5	1168	239.4	169.9-308.8
45-69	447	242.4	171.3-313.5	633	129.7	89.4-169.9	1080	182.2	129.1-235.4
18-69	876	290.9	216.4-365.5	1372	149.2	84.3-214.1	2248	216.8	155.4-278.2

Analysis Information:

- Questions used: P1-P15b
- Epi Info program name: Ptotal (unweighted); PtotalWT (weighted)

Total physical activity-median

Description: Median minutes of total physical activity on average per day.

Instrument questions

- activity at work
- travel to and from places
- recreational activities

Median minutes of total physical activity on average per day									
Age Group (years)	Men			Women			Both Sexes		
	n	Median minutes	Inter-quartile range (P25-P75)	n	Median minutes	Inter-quartile range (P25-P75)	n	Median minutes	Inter-quartile range (P25-P75)
18-44	429	231.4	34.3-462.9	739	40.0	0.0-210.0	1168	102.9	8.6-355.7
45-69	447	145.7	17.1-315.0	633	40.0	0.0-128.6	1080	60.0	0.0-270.0
18-69	**876**	**180.0**	**31.4-412.0**	**1372**	**40.0**	**0.0-205.7**	**2248**	**77.1**	**1.4-315.0**

Analysis Information:

- Questions used: P1-P15b
- Epi Info program name: Ptotal (unweighted); PtotalmedianWT (weighted)

Domain-specific physical activity-mean

Description: Mean minutes spent in work-, transport- and recreation-related physical activity on average per day.

Instrument questions:

- activity at work
- travel to and from places
- recreational activities

Mean minutes of work-related physical activity on average per day

Age Group (years)	Men			Women			Both Sexes		
	n	Mean minutes	95% CI	n	Mean minutes	95% CI	n	Mean minutes	95% CI
18-44	429	181.4	145.7-217.1	739	100.8	58.8-142.7	1168	139.8	116.1-163.5
45-69	447	180.4	129.3-231.5	633	66.7	41.2-92.2	1080	119.7	80.3-159.1
18-69	**876**	**181.0**	**153.5-208.5**	**1372**	**87.0**	**53.0-121.1**	**2248**	**131.9**	**105.2-158.5**

Mean minutes of transport-related physical activity on average per day

Age Group (years)	Men			Women			Both Sexes		
	n	Mean minutes	95% CI	n	Mean minutes	95% CI	n	Mean minutes	95% CI
18-44	429	72.1	24.6-119.5	739	39.3	0.0-80.9	1168	55.2	21.7-88.6
45-69	447	37.4	12.5-62.4	633	43.7	15.8-71.5	1080	40.8	22.5-59.0
18-69	**876**	**58.7**	**24.3-93.0**	**1372**	**41.1**	**12.7-69.5**	**2248**	**49.5**	**24.6-74.4**

Mean minutes of recreation-related physical activity on average per day

Age Group (years)	Men			Women			Both Sexes		
	n	Mean minutes	95% CI	n	Mean minutes	95% CI	n	Mean minutes	95% CI
18-44	429	68.0	29.9-106.0	739	22.3	16.3-28.3	1168	44.4	26.0-62.8
45-69	447	24.6	15.9-33.3	633	19.3	9.4-29.3	1080	21.8	16.0-27.5
18-69	**876**	**51.2**	**29.2-73.3**	**1372**	**21.1**	**14.7-27.5**	**2248**	**35.5**	**22.8-48.1**

Analysis Information:

- Questions used: P1-P15b
- Epi Info program name: Psetspecific (unweighted); PsetspecificWT (weighted)

Domain-specific physical activity - median

Description: Median minutes spent on average per day in work-, transport- and recreation-related physical activity.

Instrument questions:

- activity at work
- travel to and from places
- recreational activities

Median minutes of work-related physical activity on average per day

Age Group (years)	Men			Women			Both Sexes		
	n	Median minutes	Inter-quartile range (P25-P75)	n	Median minutes	Inter-quartile range (P25-P75)	n	Median minutes	Inter-quartile range (P25-P75)
18-44	429	154.3	0.0-342.9	739	0.0	0.0-115.7	1168	0.0	0.0-257.1
45-69	447	77.1	0.0-300.0	633	0.0	0.0-51.4	1080	0.0	0.0-214.3
18-69	**876**	**128.6**	**0.0-308.6**	**1372**	**0.0**	**0.0-68.6**	**2248**	**0.0**	**0.0-240.0**

Median minutes of transport-related physical activity on average per day									
Age Group (years)	Men			Women			Both Sexes		
	n	Median minutes	Inter-quartile range (P25-P75)	n	Median minutes	Inter-quartile range (P25-P75)	n	Median minutes	Inter-quartile range (P25-P75)
18-44	429	0.0	0.0-60.0	739	0.0	0.0-12.9	1168	0.0	0.0-25.7
45-69	447	0.0	0.0-30.0	633	0.0	0.0-14.3	1080	0.0	0.0-21.4
18-69	**876**	**0.0**	**0.0-45.7**	**1372**	**0.0**	**0.0-14.3**	**2248**	**0.0**	**0.0-25.7**

Median minutes of recreation-related physical activity on average per day									
Age Group (years)	Men			Women			Both Sexes		
	n	Median minutes	Inter-quartile range (P25-P75)	n	Median minutes	Inter-quartile range (P25-P75)	n	Median minutes	Inter-quartile range (P25-P75)
18-44	429	19.3	0.0-68.6	739	0.0	0.0-25.7	1168	0.0	0.0-42.9
45-69	447	0.0	0.0-4.3	633	0.0	0.0-17.1	1080	0.0	0.0-12.9
18-69	**876**	**0.0**	**0.0-51.4**	**1372**	**0.0**	**0.0-25.7**	**2248**	**0.0**	**0.0-34.3**

Analysis Information:

- Questions used: P1-P15b
- Epi Info program name: Psetspecific (unweighted); PsetspecificmedianWT (weighted)

No physical activity by domain

Description: Percentage of respondents classified as doing no work-, transport- or recreational-related physical activity.

Instrument questions:

- activity at work
- travel to and from places
- recreational activities

No work-related physical activity									
Age Group (years)	Men			Women			Both Sexes		
	n	% no activity at work	95% CI	n	% no activity at work	95% CI	n	% no activity at work	95% CI
18-44	429	37.8	30.9-44.8	739	62.5	52.7-72.2	1168	50.5	44.5-56.5
45-69	447	42.9	30.2-55.7	633	66.0	55.4-76.6	1080	55.2	44.1-66.4
18-69	**876**	**39.8**	**33.1-46.5**	**1372**	**63.9**	**55.0-72.7**	**2248**	**52.4**	**45.2-59.6**

No transport-related physical activity									
Age Group (years)	Men			Women			Both Sexes		
	n	% no activity for transport	95% CI	n	% no activity for transport	95% CI	n	% no activity for transport	95% CI
18-44	429	62.4	49.8-75.0	739	67.2	48.7-85.8	1168	64.9	51.3-78.5
45-69	447	58.5	41.5-75.5	633	67.7	58.3-77.1	1080	63.4	51.2-75.6
18-69	**876**	**60.9**	**49.0-72.8**	**1372**	**67.4**	**53.8-81.1**	**2248**	**64.3**	**52.2-76.4**

No recreation-related physical activity									
Age Group (years)	Men			Women			Both Sexes		
	n	% no activity at recreation	95% CI	n	% no activity at recreation	95% CI	n	% no activity at recreation	95% CI
18-44	429	44.2	32.4-56.1	739	61.7	51.9-71.5	1168	53.3	43.2-63.3
45-69	447	74.5	65.1-83.9	633	68.4	59.5-77.2	1080	71.2	63.1-79.3
18-69	**876**	**55.9**	**46.8-65.0**	**1372**	**64.4**	**56.5-72.3**	**2248**	**60.3**	**52.7-68.0**

Analysis Information:

- Questions used: P1-P15b
- Epi Info program name: Pnoactivitybyset (unweighted); PnoactivitybysetWT (weighted)

Composition of total physical activity

Description: Percentage of work, transport and recreational activity contributing to total activity.

Instrument questions:

- activity at work
- travel to and from places
- recreational activities

Composition of total physical activity							
Age Group (years)	Women						
	n	% Activity from work	95% CI	% Activity for transport	95% CI	% Activity during leisure time	95% CI
18-44	463	43.0	37.1-48.9	23.9	13.5-34.4	33.1	23.9-42.3
45-69	403	42.2	31.7-52.6	31.1	22.1-40.1	26.7	17.8-35.6
18-69	**866**	**42.7**	**37.1-48.2**	**26.9**	**19.0-34.7**	**30.5**	**24.0-36.9**

Composition of total physical activity							
Age Group (years)	Both Sexes						
	n	% Activity from work	95% CI	% Activity for transport	95% CI	% Activity during leisure time	95% CI
18-44	828	47.6	41.1-54.1	20.3	13.2-27.3	32.1	26.3-38.0
45-69	770	52.2	45.4-58.9	26.8	21.0-32.7	21.0	13.5-28.5
18-69	**1598**	**49.4**	**45.8-52.9**	**22.8**	**17.6-28.0**	**27.8**	**24.6-31.1**

Analysis Information:

- Questions used: P1-P15b
- Epi Info program name: Pcomposition (unweighted); PcompositionWT (weighted)

No vigorous physical activity

Description: Percentage of respondents not engaging in vigorous physical activity.

Instrument questions:

- activity at work
- recreational activities

No vigorous physical activity									
Age Group (years)	Men			Women			Both Sexes		
	n	% no vigorous activity	95% CI	n	% no vigorous activity	95% CI	n	% no vigorous activity	95% CI
18-44	429	31.4	23.3-39.4	739	65.4	48.5-82.2	1168	48.9	39.2-58.7
45-69	447	54.7	44.0-65.5	633	86.5	81.2-91.7	1080	71.7	63.7-79.7
18-69	**876**	**40.4**	**33.3-47.5**	**1372**	**73.9**	**61.3-86.5**	**2248**	**57.9**	**49.0-66.9**

Analysis Information:

- Questions used: P1-P15b
- Epi Info program name: Pnovigorous (unweighted); PnovigorousWT (weighted)

Sedentary

Description: Minutes spent in sedentary activities on a typical day.

Instrument question:

- sedentary behaviour

Minutes spent in sedentary activities on average per day					
	Men				
Age Group (years)	n	Mean minutes	95% CI	Median minutes	Inter-quartile range (P25-P75)
18-44	463	218.8	185.7-251.9	180.0	115.0-300.0
45-69	469	211.2	196.3-226.1	180.0	120.0-240.0
18-69	932	215.9	192.5-239.3	**180.0**	**120.0-300.0**

Minutes spent in sedentary activities on average per day					
	Women				
Age Group (years)	n	Mean minutes	95% CI	Median minutes	Inter-quartile range (P25-P75)
18-44	774	258.5	225.3-291.8	240.0	120.0-360.0
45-69	657	226.3	199.2-253.5	180.0	120.0-300.0
18-69	1431	245.6	220.2-271.1	**240.0**	**120.0-360.0**

Minutes spent in sedentary activities on average per day					
	Both Sexes				
Age Group (years)	n	Mean minutes	95% CI	Median minutes	Inter-quartile range (P25-P75)
18-44	1237	239.1	216.1-262.2	210.0	120.0-360.0
45-69	1126	219.3	202.0-236.5	180.0	120.0-300.0
18-69	2363	231.4	213.5-249.2	**185.0**	**120.0-300.0**

Analysis Information:

- Question used : P16a-b

  Epi Info program name: Psedentary (unweighted); PsedentaryWT and PsedentarymedianWT (weighted)

History of Raised Blood Pressure

Blood pressure measurement and diagnosis

Description: Blood pressure measurement and diagnosis among all respondents.

Instrument questions:

- Have you ever had your blood pressure measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised blood pressure or hypertension?
- Have you been told in the past 12 months?

Blood pressure measurement and diagnosis									
	Men								
Age Group (years)	n	% Never measured	95% CI	% measured, not diagnosed	95% CI	% diagnosed, but not within past 12 months	95% CI	% diagnosed within past 12 months	95% CI
18-44	463	14.7	5.6-23.8	72.1	61.4-82.9	5.9	2.9-8.8	7.2	3.3-11.2
45-69	468	3.6	1.3-5.9	48.1	37.7-58.6	11.2	6.0-16.4	37.1	23.8-50.4
18-69	**931**	**10.5**	**4.8-16.1**	**63.0**	**53.4-72.6**	**7.9**	**6.0-9.8**	**18.6**	**12.7-24.5**

Blood pressure measurement and diagnosis									
	Women								
Age Group (years)	n	% Never measured	95% CI	% measured, not diagnosed	95% CI	% diagnosed, but not within past 12 months	95% CI	% diagnosed within past 12 months	95% CI
18-44	773	3.3	1.5-5.0	73.5	65.8-81.2	9.7	3.3-16.1	13.6	6.9-20.2
45-69	656	2.6	0.0-6.7	52.5	45.0-60.1	10.9	7.0-14.9	33.9	25.1-42.7
18-69	**1429**	**3.0**	**1.3-4.7**	**65.1**	**59.7-70.5**	**10.2**	**6.3-14.0**	**21.7**	**16.8-26.6**

Blood pressure measurement and diagnosis									
	Both sexes								
Age Group (years)	n	% Never measured	95% CI	% measured, not diagnosed	95% CI	% diagnosed, but not within past 12 months	95% CI	% diagnosed within past 12 months	95% CI
18-44	1236	8.9	4.7-13.0	72.9	65.5-80.2	7.8	3.3-12.3	10.5	6.5-14.4
45-69	1124	3.1	0.0-6.1	50.5	43.2-57.7	11.0	7.4-14.7	35.4	27.1-43.8
18-69	**2360**	**6.6**	**3.8-9.4**	**64.1**	**57.9-70.3**	**9.1**	**6.6-11.6**	**20.2**	**16.9-23.5**

Analysis Information:

- Questions used: H1, H2a, H2b
- Epi Info program name: Hbloodpressure (unweighted); HbloodpressureWT (weighted)

Blood pressure treatment among those diagnosed

Description: Raised blood pressure treatment results among those previously diagnosed with raised blood pressure.

Instrument questions:

- Have you ever had your blood pressure measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised blood pressure or hypertension?
- In the past two weeks, have you taken any drugs (medication) for raised blood pressure prescribed by a doctor or other health worker?

Currently taking drugs (medication) for raised blood pressure prescribed by doctor or health worker among those diagnosed									
	Men			Women			Both Sexes		
Age Group (years)	n	% taking meds	95% CI	n	% taking meds	95% CI	n	% taking meds	95% CI
18-44	57	20.8	2.9-38.7	142	42.9	28.8-57.0	199	35.1	24.0-46.3
45-69	197	63.3	47.1-79.4	331	80.0	74.6-85.4	528	71.9	64.1-79.6
18-69	**254**	**50.2**	**37.4-63.1**	**473**	**63.8**	**54.1-73.4**	**727**	**57.9**	**48.9-66.9**

Analysis Information:

- Questions used: H1, H2a, H3
- Epi Info program name: Hbloodpressure (unweighted); HbloodpressureWT (weighted)

Blood pressure advice by a traditional healer

Description: Percentage of respondents who have sought advice or received treatment from a traditional healer for raised blood pressure among those previously diagnosed with raised blood pressure.

Instrument questions:

- Have you ever had your blood pressure measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised blood pressure or hypertension?
- Have you ever seen a traditional healer for raised blood pressure?
- Are you currently taking any herbal or traditional remedy for your high blood pressure?

Seen a traditional healer among those previously diagnosed									
	Men			Women			Both Sexes		
Age Group (years)	n	% seen trad. healer	95% CI	n	% seen trad. healer	95% CI	n	% seen trad. healer	95% CI
18-44	57	9.5	0.0-22.0	142	19.0	0.0-41.0	199	15.6	0.4-30.9
45-69	197	11.9	4.7-19.1	331	13.1	6.8-19.5	528	12.5	8.6-16.5
18-69	**254**	**11.2**	**4.9-17.4**	**473**	**15.7**	**6.0-25.4**	**727**	**13.7**	**6.3-21.1**

Currently taking herbal or traditional remedy for raised blood pressure among those previously diagnosed									
	Men			Women			Both Sexes		
Age Group (years)	n	% taking trad. meds	95% CI	n	% taking trad. meds	95% CI	n	% taking trad. meds	95% CI
18-44	57	20.9	12.4-29.4	142	21.6	7.5-35.8	199	21.4	10.9-31.8
45-69	197	26.4	12.4-40.4	331	21.9	14.7-29.2	528	24.1	15.1-33.1
18-69	**254**	**24.7**	**15.8-33.6**	**473**	**21.8**	**14.6-29.0**	**727**	**23.1**	**17.3-28.9**

Analysis Information:

- Questions used: H1, H2a, H4, H5
- Epi Info program name: Hraisedbptrad (unweighted); HraisedbptradWT (weighted)

History of Diabetes

Blood sugar measurement and diagnosis

Description: Blood sugar measurement and diagnosis among all respondents.

Instrument questions:

- Have you ever had your blood sugar measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised blood sugar or diabetes?
- Have you been told in the past 12 months?

Blood sugar measurement and diagnosis

Men

Age Group (years)	n	% Never measured	95% CI	% measured, not diagnosed	95% CI	% diagnosed, but not within past 12 months	95% CI	% diagnosed within past 12 months	95% CI
18-44	463	36.6	22.8-50.3	58.9	45.1-72.7	3.3	0.5-6.1	1.2	0.3-2.2
45-69	468	12.9	7.4-18.4	62.5	48.8-76.2	10.8	1.4-20.2	13.8	5.1-22.5
18-69	**931**	**27.6**	**17.8-37.4**	**60.3**	**47.7-72.9**	**6.1**	**0.7-11.6**	**6.0**	**2.6-9.4**

Blood sugar measurement and diagnosis

Women

Age Group (years)	n	% Never measured	95% CI	% measured, not diagnosed	95% CI	% diagnosed, but not within past 12 months	95% CI	% diagnosed within past 12 months	95% CI
18-44	773	21.8	9.6-34.1	70.3	58.1-82.5	3.8	0.3-7.3	4.1	0.0-8.5
45-69	656	12.8	6.3-19.3	65.8	58.7-72.9	4.5	2.8-6.2	16.9	10.1-23.6
18-69	**1429**	**18.2**	**8.9-27.6**	**68.5**	**59.1-77.9**	**4.1**	**2.1-6.1**	**9.2**	**5.1-13.3**

Blood sugar measurement and diagnosis

Both sexes

Age Group (years)	n	% Never measured	95% CI	% measured, not diagnosed	95% CI	% diagnosed, but not within past 12 months	95% CI	% diagnosed within past 12 months	95% CI
18-44	1236	29.0	17.2-40.9	64.7	52.6-76.9	3.5	0.8-6.3	2.7	0.4-5.0
45-69	1124	12.9	7.6-18.2	64.3	55.0-73.5	7.4	2.7-12.1	15.4	9.2-21.6
18-69	**2360**	**22.7**	**13.9-31.5**	**64.5**	**54.2-74.9**	**5.1**	**1.7-8.5**	**7.7**	**4.9-10.4**

Analysis Information:

- Questions used: H6, H7a, H7b
- Epi Info program name: Hdiabetes (unweighted); HdiabetesWT (weighted)

Diabetes treatment among those diagnosed

Description: Diabetes treatment results among those previously diagnosed with raised blood sugar or diabetes.

Instrument questions:

- Have you ever had your blood sugar measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised blood sugar or diabetes?
- In the past two weeks, have you taken any drugs (medication) for diabetes prescribed by a doctor or other health worker?
- Are you currently taking insulin for diabetes prescribed by a doctor or other health worker?

Currently taking drugs (medication) prescribed for diabetes among those previously diagnosed

Age Group (years)	Men			Women			Both Sexes		
	n	% taking meds	95% CI	n	% taking meds	95% CI	n	% taking meds	95% CI
18-44	--	--	--	44	27.6	3.0-52.1	64	23.7	5.4-41.9
45-69	64	43.6	12.4-74.9	118	63.8	51.4-76.1	182	53.7	34.2-73.1
18-69	**84**	**37.4**	**14.7-60.1**	**162**	**50.9**	**32.6-69.2**	**246**	**44.7**	**26.9-62.5**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

Currently taking insulin prescribed for diabetes among those previously diagnosed									
Age Group (years)	Men			Women			Both Sexes		
	n	% taking insulin	95% CI	n	% taking insulin	95% CI	n	% taking insulin	95% CI
18-44	--	--	--	44	17.6	0.0-35.9	64	15.6	2.1-29.1
45-69	64	9.4	0.0-18.7	118	28.7	15.3-42.1	182	19.0	10.9-27.1
18-69	**84**	**10.0**	**0.5-19.4**	**162**	**24.8**	**12.4-37.1**	**246**	**18.0**	**9.3-26.7**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

Analysis Information:

- Questions used: H6, H7a, H8, H9
- Epi Info program name: Hdiabetes (unweighted); HdiabetesWT (weighted)

Currently taking herbal or traditional treatment for diabetes among those previously diagnosed									
Age Group (years)	Men			Women			Both Sexes		
	n	% taking trad. meds	95% CI	n	% taking trad. meds	95% CI	n	% taking trad. meds	95% CI
18-44	--	--	--	--	--	--	64	9.5	0.1-19.0
45-69	64	27.9	2.1-53.7	118	14.3	4.9-23.7	182	21.1	7.3-34.9
18-69	**84**	**23.6**	**5.1-42.1**	**162**	**12.7**	**6.1-19.2**	**246**	**17.7**	**7.9-27.4**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

Analysis Information:

- Questions used: H6, H7a, H10, H11
- Epi Info program name: Hdiabetestrad (unweighted); HdiabetestradWT (weighted)

Diabetes advice by traditional healer

Description: Percentage of respondents who are have sought advice or treatment from a traditional healer for diabetes among those previously diagnosed.

Instrument questions:

- Have you ever had your blood sugar measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised blood sugar or diabetes?
- Have you ever seen a traditional healer for diabetes or raised blood sugar?
- Are you currently taking any herbal or traditional remedy for your diabetes?

Seen a traditional healer for diabetes among those previously diagnosed									
Age Group (years)	Men			Women			Both Sexes		
	n	% seen trad. healer	95% CI	n	% seen trad. healer	95% CI	n	% seen trad. healer	95% CI
18-44	--	--	--	--	--	--	64	4.9	0.0-10.8
45-69	64	23.2	0.0-48.7	118	9.0	1.0-17.0	182	16.2	3.2-29.1
18-69	**84**	**18.7**	**0.3-37.1**	**162**	**7.8**	**2.9-12.6**	**246**	**12.8**	**3.7-21.8**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

History of Raised Total Cholesterol

Cholesterol measurement and diagnosis

Description: Total cholesterol measurement and diagnosis among all respondents.

Instrument questions:

- Have you ever had your cholesterol (fat levels in your blood) measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised cholesterol?
- Have you been told in the past 12 months?

Total cholesterol measurement and diagnosis

Men

Age Group (years)	n	% Never measured	95% CI	% measured, not diagnosed	95% CI	% diagnosed, but not within past 12 months	95% CI	% diagnosed within past 12 months	95% CI
18-44	463	52.8	40.4-65.2	42.2	29.5-54.8	3.9	0.5-7.3	1.2	0.4-1.9
45-69	468	30.0	18.7-41.3	59.1	50.2-68.0	5.0	2.8-7.3	5.9	1.9-9.9
18-69	**931**	**44.1**	**33.8-54.5**	**48.6**	**39.4-57.8**	**4.3**	**2.3-6.4**	**3.0**	**1.3-4.6**

Total cholesterol measurement and diagnosis

Women

Age Group (years)	n	% Never measured	95% CI	% measured, not diagnosed	95% CI	% diagnosed, but not within past 12 months	95% CI	% diagnosed within past 12 months	95% CI
18-44	773	42.6	27.8-57.4	52.0	37.0-67.0	2.8	0.8-4.8	2.7	0.8-4.6
45-69	656	26.4	18.5-34.4	51.2	42.9-59.5	10.7	6.6-14.8	11.7	8.4-15.0
18-69	**1429**	**36.1**	**25.1-47.1**	**51.7**	**41.8-61.6**	**5.9**	**4.5-7.3**	**6.3**	**4.3-8.3**

Total cholesterol measurement and diagnosis

Both sexes

Age Group (years)	n	% Never measured	95% CI	% measured, not diagnosed	95% CI	% diagnosed, but not within past 12 months	95% CI	% diagnosed within past 12 months	95% CI
18-44	1236	47.6	35.4-59.7	47.2	34.8-59.5	3.3	1.0-5.6	1.9	0.8-3.0
45-69	1124	28.1	21.2-35.0	54.9	49.3-60.5	8.0	5.4-10.7	9.0	6.2-11.8
18-69	**2360**	**40.0**	**31.0-48.9**	**50.2**	**42.4-58.0**	**5.2**	**3.7-6.6**	**4.7**	**3.1-6.3**

Analysis Information:

- Questions used: H12, H13a, H13b
- Epi Info program name: Hchol (unweighted); HcholWT (weighted)

Cholesterol treatment among those diagnosed

Description: Cholesterol treatment results among those previously diagnosed with raised cholesterol.

Instrument questions:

- Have you ever had your cholesterol (fat levels in your blood) measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised cholesterol?
- In the past two weeks, have you taken oral treatment (medication) for raised total cholesterol prescribed by a doctor or other health worker?

Currently taking oral treatment (medication) prescribed for raised total cholesterol among those previously diagnosed									
Age Group (years)	Men			Women			Both Sexes		
	n	% taking meds	95% CI	n	% taking meds	95% CI	n	% taking meds	95% CI
18-44	--	--	--	--	--	--	62	13.1	2.1-24.0
45-69	62	20.8	4.8-36.9	150	35.3	23.2-47.3	212	30.9	21.9-39.9
18-69	**85**	**16.8**	**3.9-29.7**	**189**	**29.7**	**19.4-40.1**	**274**	**25.1**	**16.4-33.8**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

Analysis Information:

- Questions used: H12, H13a, H14
- Epi Info program name: Hchol (unweighted); HcholWT (weighted)

Cholesterol advice by traditional healer

Description: Percentage of respondents who are have sought advice or treatment from a traditional healer for raised cholesterol among those previously diagnosed.

Instrument questions:

- Have you ever had your cholesterol (fat levels in your blood) measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised cholesterol?
- Have you ever seen a traditional healer for raised cholesterol?
- Are you currently taking any herbal or traditional remedy for your raised cholesterol?

Seen a traditional healer for raised cholesterol among those previously diagnosed									
Age Group (years)	Men			Women			Both Sexes		
	n	% seen trad. healer	95% CI	n	% seen trad. healer	95% CI	n	% seen trad. healer	95% CI
18-44	--	--	--	--	--	--	62	5.8	0.3-11.3
45-69	62	12.4	3.4-21.3	150	5.5	0.9-10.0	212	7.5	0.8-14.2
18-69	**85**	**8.9**	**1.6-16.2**	**189**	**5.9**	**2.3-9.5**	**274**	**7.0**	**1.9-12.1**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

Currently taking herbal or traditional treatment for raised cholesterol among those previously diagnosed									
Age Group (years)	Men			Women			Both Sexes		
	n	% taking trad. meds	95% CI	n	% taking trad. meds	95% CI	n	% taking trad. meds	95% CI
18-44	--	--	--	--	--	--	62	7.0	0.9-13.0
45-69	62	10.1	1.6-18.6	150	9.4	4.4-14.4	212	9.6	4.9-14.3
18-69	**85**	**7.6**	**1.0-14.2**	**189**	**9.4**	**5.3-13.4**	**274**	**8.7**	**4.8-12.7**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

Analysis Information:

- Questions used: H12, H13a, H15, H16
- Epi Info program name: Hcholtrad (unweighted); HcholtradWT (weighted)

History of Cardiovascular Diseases

History of cardio-vascular diseases

Description: Percentage of respondents who have ever had a heart attack or chest pain from heart disease (angina) or a stroke among all respondents.

Instrument questions:

- Have you ever had a heart attack or chest pain from heart disease (angina)?
- Have you ever had a stroke (cerebrovascular accident or incident)?

Having ever had a heart attack or chest pain from heart disease or a stroke									
Age Group (years)	Men			Women			Both Sexes		
	n	% CVD history	95% CI	n	% CVD history	95% CI	n	% CVD history	95% CI
18-44	463	11.5	1.2-21.7	773	9.3	0.0-21.3	1236	10.3	2.0-18.7
45-69	468	13.5	5.0-21.9	656	5.1	2.3-7.9	1124	9.0	5.5-12.6
18-69	**931**	**12.2**	**6.0-18.4**	**1429**	**7.6**	**0.0-15.7**	**2360**	**9.8**	**4.8-14.8**

Analysis Information:

- Question used: H17a, H17b
- Epi Info program name: Hcvd (unweighted); HcvdWT_BHS (weighted)

Prevention and treatment of heart disease

Description: Percentage of respondents who are currently taking aspirin or statins regularly to prevent or treat heart disease.

Instrument questions:

- Are you currently taking aspirin regularly to prevent or treat heart disease?
- Are you currently taking statins (Lovostatin/Simvastatin/Atorvastatin or any other statin) regularly to prevent or treat heart disease?

Currently taking aspirin regularly to prevent or treat heart disease									
Age Group (years)	Men			Women			Both Sexes		
	n	% taking aspirin	95% CI	n	% taking aspirin	95% CI	n	% taking aspirin	95% CI
18-44	463	0.9	0.0-1.9	773	2.4	0.3-4.4	1236	1.7	0.5-2.8
45-69	468	10.2	5.8-14.7	656	12.9	9.4-16.5	1124	11.7	8.6-14.7
18-69	**931**	**4.5**	**2.8-6.1**	**1429**	**6.6**	**5.0-8.2**	**2360**	**5.6**	**4.4-6.8**

Currently taking statins regularly to prevent or treat heart disease									
Age Group (years)	Men			Women			Both Sexes		
	n	% taking statins	95% CI	n	% taking statins	95% CI	n	% taking statins	95% CI
18-44	463	0.5	0.0-1.0	773	0.8	0.0-1.8	1236	0.7	0.1-1.2
45-69	468	2.0	1.0-3.0	656	4.7	2.4-7.0	1124	3.4	2.2-4.7
18-69	**931**	**1.0**	**0.5-1.5**	**1429**	**2.4**	**1.3-3.5**	**2360**	**1.7**	**1.1-2.4**

Analysis Information:

- Questions used: H18, H19
- Epi Info program name: Hcvdmeds (unweighted); HcvdmedsWT (weighted)

Lifestyle Advice

Lifestyle advice

Description: Percentage of respondents who received lifestyle advice from a doctor or health worker during the past 12 months among all respondents.

Instrument question:

- During any of your visits to a doctor or other health worker in the past 12 months, were you advised to do any of the following?

Advised by doctor or health worker to quit using tobacco or don't start

Age Group (years)	Men			Women			Both Sexes		
	n	% advised	95% CI	n	% advised	95% CI	n	% advised	95% CI
18-44	254	21.9	4.8-39.0	567	10.4	5.5-15.3	821	15.1	7.4-22.8
45-69	307	15.1	8.2-22.0	521	8.1	3.8-12.4	828	11.3	6.4-16.1
18-69	**561**	**18.8**	**7.5-30.1**	**1088**	**9.5**	**5.9-13.0**	**1649**	**13.4**	**7.8-19.1**

Advised by doctor or health worker to reduce salt in the diet

Age Group (years)	Men			Women			Both Sexes		
	n	% advised	95% CI	n	% advised	95% CI	n	% advised	95% CI
18-44	254	28.9	13.9-43.9	567	25.8	18.6-32.9	821	27.1	20.9-33.2
45-69	307	40.3	29.7-51.0	521	39.2	30.5-47.9	828	39.7	34.6-44.8
18-69	**561**	**34.1**	**25.5-42.6**	**1088**	**31.3**	**26.3-36.3**	**1649**	**32.5**	**27.8-37.1**

Advised by doctor or health worker to eat at least five servings of fruit and/or vegetables each day

Age Group (years)	Men			Women			Both Sexes		
	n	% advised	95% CI	n	% advised	95% CI	n	% advised	95% CI
18-44	254	34.0	22.2-45.7	567	38.5	28.9-48.1	821	36.6	30.3-43.0
45-69	307	41.3	26.7-55.8	521	45.9	35.9-55.8	828	43.8	32.6-54.9
18-69	**561**	**37.3**	**28.2-46.3**	**1088**	**41.5**	**34.5-48.6**	**1649**	**39.7**	**33.8-45.6**

Advised by doctor or health worker to reduce fat in the diet

Age Group (years)	Men			Women			Both Sexes		
	n	% advised	95% CI	n	% advised	95% CI	n	% advised	95% CI
18-44	254	21.7	12.6-30.9	567	38.0	29.6-46.4	821	31.3	25.2-37.5
45-69	307	30.3	19.4-41.2	521	42.8	36.0-49.5	828	37.2	30.7-43.6
18-69	**561**	**25.6**	**17.7-33.5**	**1088**	**40.0**	**35.0-45.0**	**1649**	**33.8**	**29.1-38.6**

Advised by doctor or health worker to start or do more physical activity

Age Group (years)	Men			Women			Both Sexes		
	n	% advised	95% CI	n	% advised	95% CI	n	% advised	95% CI
18-44	254	37.4	25.7-49.1	567	43.9	33.6-54.3	821	41.3	32.8-49.7
45-69	307	43.8	35.3-52.3	521	53.6	45.9-61.2	828	49.2	42.6-55.8
18-69	**561**	**40.3**	**33.1-47.6**	**1088**	**47.9**	**42.0-53.7**	**1649**	**44.6**	**39.9-49.4**

Advised by doctor or health worker to maintain a healthy body weight or to lose weight

Age Group (years)	Men			Women			Both Sexes		
	n	% advised	95% CI	n	% advised	95% CI	n	% advised	95% CI
18-44	254	32.4	21.3-43.5	567	38.3	28.5-48.2	821	35.9	29.0-42.8
45-69	307	33.4	21.6-45.2	521	47.1	40.2-54.0	828	40.9	33.5-48.4
18-69	**561**	**32.9**	**24.7-41.1**	**1088**	**41.9**	**35.9-47.9**	**1649**	**38.1**	**33.1-43.0**

Advised by doctor or health worker to reduce sugary beverages in your diet

Age Group (years)	Men			Women			Both Sexes		
	n	% advised	95% CI	n	% advised	95% CI	n	% advised	95% CI
18-44	254	20.5	12.2-28.9	567	33.9	22.4-45.4	821	28.4	21.4-35.5
45-69	307	34.2	19.9-48.5	521	34.0	27.5-40.5	828	34.1	25.0-43.2
18-69	**561**	**26.7**	**17.6-35.9**	**1088**	**33.9**	**26.8-41.1**	**1649**	**30.9**	**25.6-36.1**

Analysis Information:

- Questions used: H20a-g
- Epi Info program name: Hlifestyle (unweighted); HlifestyleWT (weighted)

Cervical Cancer Screening

Cervical cancer screening

Description: Percentage of female respondents who have ever had a screening test for cervical cancer among all female respondents.

Instrument question:

- Have you ever had a screening test for cervical cancer, using any of these methods described above?

Age Group (years)	Women		
	n	% ever tested	95% CI
18-44	755	64.4	56.4-72.3
45-69	648	72.1	64.0-80.2
18-69	**1403**	**67.5**	**61.5-73.5**

Analysis Information:

- Question used: CX1
- Epi Info program name: Hcervcancer (unweighted); HcervcancerWT (weighted)

Cervical cancer screening among women aged 30-49 years

Description: Percentage of female respondents aged 30-49 years who have ever had a screening test for cervical cancer among all female respondents aged 30-49 years.

Instrument question:

- Have you ever had a screening test for cervical cancer, using any of these methods described above?

Age Group (years)	Women		
	n	% ever tested	95% CI
30-49	**632**	**76.6**	**69.9-83.3**

Analysis Information:

- Question used: CX1
- Epi Info program name: Hcervcancer (unweighted); HcervcancerWT (weighted)

Physical Measurements

Blood pressure

Description: Mean blood pressure among all respondents, including those currently on medication for raised blood pressure.

Instrument question:

- Reading 1-3 systolic and diastolic blood pressure

Mean systolic blood pressure (mmHg)									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean	95% CI	n	Mean	95% CI	n	Mean	95% CI
18-44	432	120.4	117.0-123.9	742	116.5	114.7-118.3	1174	118.4	117.0-119.8
45-69	439	142.5	134.7-150.2	623	131.3	127.8-134.9	1062	136.5	131.8-141.3
18-69	**871**	**128.8**	**125.0-132.6**	**1365**	**122.4**	**120.7-124.0**	**2236**	**125.4**	**123.1-127.7**

Mean diastolic blood pressure (mmHg)									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean	95% CI	n	Mean	95% CI	n	Mean	95% CI
18-44	432	78.2	74.7-81.7	742	79.4	78.0-80.8	1174	78.8	76.9-80.7
45-69	439	87.2	83.8-90.6	623	83.3	80.3-86.3	1062	85.1	82.3-87.9
18-69	**871**	**81.6**	**78.9-84.4**	**1365**	**80.9**	**79.3-82.5**	**2236**	**81.3**	**79.4-83.1**

Analysis Information:

- Questions used: M4a, M4b, M5a, M5b, M6a, M6b
- Epi Info program name: Mbloodpressure (unweighted); MbloodpressureWT (weighted)

Raised blood pressure

Description: Percentage of respondents with raised blood pressure.

Instrument question:

- Reading 1-3 systolic and diastolic blood pressure
- During the past two weeks, have you been treated for raised blood pressure with drugs (medication) prescribed by a doctor or other health worker?

SBP ≥140 and/or DBP ≥ 90 mmHg

Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	429	18.9	13.5-24.4	736	17.5	14.2-20.9	1165	18.2	15.0-21.4
45-69	429	56.7	44.5-68.8	614	38.9	30.2-47.6	1043	47.2	38.0-56.4
18-69	**858**	**33.1**	**27.9-38.4**	**1350**	**26.0**	**21.5-30.4**	**2208**	**29.4**	**25.3-33.5**

SBP ≥140 and/or DBP ≥ 90 mmHg or currently on medication for raised blood pressure

Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	429	19.4	13.9-24.9	736	24.7	20.3-29.1	1165	22.1	18.8-25.4
45-69	429	66.4	58.1-74.7	614	54.0	45.1-63.0	1043	59.8	52.3-67.2
18-69	**858**	**37.1**	**31.9-42.2**	**1350**	**36.3**	**31.9-40.6**	**2208**	**36.7**	**32.7-40.6**

SBP ≥140 and/or DBP ≥ 90 mmHg, excluding those on medication for raised blood pressure

Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	410	17.1	11.5-22.7	670	16.2	12.7-19.6	1080	16.6	13.2-20.0
45-69	323	50.5	37.6-63.5	373	28.8	15.3-42.4	696	39.2	29.0-49.4
18-69	**733**	**27.0**	**22.9-31.2**	**1043**	**20.2**	**14.7-25.7**	**1776**	**23.6**	**19.6-27.6**

SBP ≥160 and/or DBP ≥ 100 mmHg

Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	429	3.9	1.9-6.0	736	5.0	1.5-8.5	1165	4.5	2.4-6.5
45-69	429	18.5	7.7-29.3	614	13.3	8.9-17.8	1043	15.8	9.6-21.9
18-69	**858**	**9.4**	**5.2-13.7**	**1350**	**8.3**	**5.3-11.3**	**2208**	**8.8**	**6.2-11.5**

SBP ≥160 and/or DBP ≥ 100 mmHg or currently on medication for raised blood pressure

Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	429	4.9	2.5-7.2	736	14.1	8.1-20.1	1165	9.6	6.2-13.0
45-69	429	41.9	35.0-48.9	614	41.8	34.2-49.3	1043	41.8	37.7-46.0
18-69	**858**	**18.8**	**15.2-22.5**	**1350**	**25.0**	**20.3-29.8**	**2208**	**22.1**	**19.0-25.2**

SBP ≥160 and/or DBP ≥ 100 mmHg, excluding those on medication for raised blood pressure

Age Group	Men			Women			Both Sexes		
(years)	n	%	95% CI	n	%	95% CI	n	%	95% CI
18-44	410	2.1	0.8-3.4	670	4.4	0.3-8.6	1080	3.3	1.0-5.5
45-69	323	14.6	8.8-20.4	373	9.9	4.5-15.3	696	12.1	7.6-16.7
18-69	**733**	**5.8**	**3.5-8.2**	**1043**	**6.2**	**3.0-9.4**	**1776**	**6.0**	**4.0-8.0**

Analysis Information:

- Questions used: M4a, M4b, M5a, M5b, M6a, M6b, M7
- Epi Info program name: Mraisedbp (unweighted); MraisedbpWT (weighted)

Blood pressure diagnosis, treatment and control

Description: Raised blood pressure diagnosis, treatment and control among participants with raised blood pressure or taking medication for raised blood pressure.

Instrument questions:

- Have you ever had your blood pressure measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised blood pressure or hypertension?
- During the past two weeks, have you been treated for raised blood pressure with drugs (medication) prescribed by a doctor or other health worker?
- Reading 1-3 systolic and diastolic blood pressure

Raised blood pressure diagnosis, treatment and control

Men

Age Group (years)	n	% with raised blood pressure, not previously diagnosed	95% CI	% with previously diagnosed raised blood pressure, not on medication	95% CI	% with previously diagnosed raised blood pressure, on medication but not controlled	95% CI	% with previously diagnosed raised blood pressure, on medication and blood pressure controlled	95% CI
18-44	118	64.0	49.3-78.7	21.6	5.6-37.5	12.1	4.0-20.2	2.4	0.0-5.4
45-69	270	30.9	18.2-43.6	20.9	7.7-34.0	33.6	20.7-46.5	14.6	4.7-24.5
18-69	**388**	**41.7**	**30.5-52.9**	**21.1**	**12.1-30.1**	**26.6**	**17.9-35.3**	**10.6**	**4.0-17.2**

Raised blood pressure diagnosis, treatment and control

Women

Age Group (years)	n	% with raised blood pressure, not previously diagnosed	95% CI	% with previously diagnosed raised blood pressure, not on medication	95% CI	% with previously diagnosed raised blood pressure, on medication but not controlled	95% CI	% with previously diagnosed raised blood pressure, on medication and blood pressure controlled	95% CI
18-44	174	46.4	35.3-57.6	12.6	0.0-25.2	12.1	5.5-18.7	28.9	17.7-40.0
45-69	359	26.4	10.9-41.8	8.1	4.9-11.3	37.6	27.6-47.6	28.0	20.2-35.7
18-69	**533**	**34.6**	**23.6-45.6**	**9.9**	**4.0-15.9**	**27.1**	**21.6-32.7**	**28.3**	**21.4-35.3**

Raised blood pressure diagnosis, treatment and control

Both Sexes

Age Group (years)	n	% with raised blood pressure, not previously diagnosed	95% CI	% with previously diagnosed raised blood pressure, not on medication	95% CI	% with previously diagnosed raised blood pressure, on medication but not controlled	95% CI	% with previously diagnosed raised blood pressure, on medication and blood pressure controlled	95% CI
18-44	292	53.9	43.8-64.1	16.4	6.4-26.4	12.1	7.2-17.0	17.6	9.1-26.1
45-69	629	28.7	19.2-38.2	14.7	7.4-22.0	35.5	29.7-41.3	21.1	14.3-27.8
18-69	**921**	**38.0**	**29.8-46.3**	**15.3**	**10.2-20.5**	**26.9**	**23.6-30.1**	**19.8**	**14.8-24.7**

Analysis Information:

- Questions used: H1, H2a, M4a, M4b, M5a, M5b, M6a, M6b, M7
- Epi Info program name: Mraisedbp (unweighted); MraisedbpWT (weighted)

Mean heart rate

Description: Mean heart rate (beats per minute).

Instrument question:

- Reading 1-3 heart rate

Mean heart rate (beats per minute)									
Age Group (years)	Men			Women			Both Sexes		
	n	mean	95% CI	n	mean	95% CI	n	mean	95% CI
18-44	433	77.3	74.5-80.1	745	82.7	81.1-84.3	1178	80.1	78.6-81.6
45-69	441	80.8	76.8-84.7	623	80.9	79.4-82.3	1064	80.8	79.2-82.5
18-69	**874**	**78.6**	**76.1-81.1**	**1368**	**82.0**	**80.9-83.0**	**2242**	**80.4**	**79.1-81.7**

Analysis Information:

- Questions used: M16a, M16b, M16c
- Epi Info program name: Mheartrate (unweighted); MheartrateWT (weighted)

Height, weight and BMI

Description: Mean height, weight, and body mass index among all respondents (excluding pregnant women).

Instrument questions:

- For women: Are you pregnant?
- Height
- Weight

Mean height (cm)						
Age Group (years)	Men			Women		
	n	Mean	95% CI	n	Mean	95% CI
18-44	433	177.2	174.7-179.7	721	162.5	161.2-163.8
45-69	440	174.9	172.9-176.8	619	161.7	160.1-163.3
18-69	**873**	**176.3**	**174.7-177.9**	**1340**	**162.2**	**160.9-163.4**

Mean weight (kg)						
Age Group (years)	Men			Women		
	n	Mean	95% CI	n	Mean	95% CI
18-44	433	86.3	82.0-90.6	719	86.6	82.3-91.0
45-69	437	89.7	83.6-95.7	616	85.0	79.1-90.9
18-69	**870**	**87.6**	**83.6-91.6**	**1335**	**86.0**	**82.0-89.9**

Mean BMI (kg/m^2)									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean	95% CI	n	Mean	95% CI	n	Mean	95% CI
18-44	422	27.0	25.8-28.2	695	32.2	31.0-33.5	1117	29.7	29.0-30.3
45-69	427	28.4	27.1-29.8	596	31.3	29.6-33.0	1023	29.9	28.8-31.1
18-69	**849**	**27.6**	**26.6-28.5**	**1291**	**31.9**	**30.7-33.0**	**2140**	**29.8**	**29.1-30.5**

Analysis Information:

- Questions used: M8, M11, M12
- Epi Info program name: Mbmi (unweighted); MbmiWT (weighted)

BMI categories

Description: Percentage of respondents (excluding pregnant women) in each BMI category.

Instrument questions:

- For women: Are you pregnant?
- Height
- Weight

BMI classifications									
Age Group (years)	Men								
	n	% Under-weight <18.5	95% CI	% Normal weight 18.5-24.9	95% CI	% BMI 25.0-29.9	95% CI	% Obese ≥30.0	95% CI
18-44	422	8.6	0.3-16.9	33.9	24.6-43.2	27.9	18.0-37.8	29.6	20.9-38.3
45-69	427	3.6	0.0-8.6	26.9	14.6-39.1	34.1	19.6-48.7	35.4	24.0-46.8
18-69	**849**	**6.7**	**0.3-13.1**	**31.3**	**23.4-39.1**	**30.2**	**19.4-41.1**	**31.8**	**25.4-38.2**

BMI classifications									
Age Group (years)	Women								
	n	% Under-weight <18.5	95% CI	% Normal weight 18.5-24.9	95% CI	% BMI 25.0-29.9	95% CI	% Obese ≥30.0	95% CI
18-44	695	1.6	0.7-2.6	18.4	12.5-24.2	22.9	16.0-29.8	57.1	49.7-64.4
45-69	596	4.3	0.0-10.5	14.4	8.0-20.8	30.0	22.8-37.2	51.4	43.0-59.8
18-69	**1291**	**2.7**	**0.0-5.4**	**16.8**	**11.7-21.9**	**25.8**	**19.3-32.3**	**54.8**	**48.0-61.6**

BMI classifications									
Age Group (years)	Both Sexes								
	n	% Under-weight <18.5	95% CI	% Normal weight 18.5-24.9	95% CI	% BMI 25.0-29.9	95% CI	% Obese ≥30.0	95% CI
18-44	1117	5.1	0.9-9.2	26.0	20.3-31.8	25.4	20.6-30.2	43.5	38.7-48.3
45-69	1023	4.0	0.0-7.9	20.2	13.9-26.6	31.9	25.7-38.1	43.9	37.1-50.6
18-69	**2140**	**4.6**	**1.4-7.9**	**23.8**	**18.9-28.7**	**27.9**	**23.7-32.1**	**43.6**	**39.9-47.4**

Analysis Information:

- Questions used: M8, M11, M12
- Epi Info program name: Mbmiclass (unweighted); MbmiclassWT (weighted)

BMI ≥25

Description: Percentage of respondents (excluding pregnant women) classified as overweight (BMI≥25).

Instrument questions:

- For women: Are you pregnant?
- Height
- Weight

BMI≥25									
Age Group (years)	Men			Women			Both Sexes		
	n	% BMI≥25	95% CI	n	% BMI≥25	95% CI	n	% BMI≥25	95% CI
18-44	422	57.5	48.0-67.0	695	80.0	73.5-86.5	1117	68.9	63.5-74.3
45-69	427	69.5	55.8-83.3	596	81.4	72.9-89.9	1023	75.8	68.6-83.0
18-69	**849**	**62.0**	**53.4-70.7**	**1291**	**80.6**	**74.5-86.6**	**2140**	**71.6**	**66.7-76.4**

Analysis Information:

- Questions used: M8, M11, M12
- Epi Info program name: Mbmiclass (unweighted); MbmiclassWT (weighted)

Waist circumference

Description: Mean waist circumference among all respondents (excluding pregnant women).

Instrument questions:

- For women: Are you pregnant?
- Waist circumference measurement

Waist circumference (cm)						
Age Group (years)	Men			Women		
	n	Mean	95% CI	n	Mean	95% CI
18-44	432	90.0	86.6-93.4	719	94.0	90.3-97.7
45-69	436	99.5	96.8-102.1	619	97.4	93.4-101.3
18-69	**868**	**93.6**	**91.1-96.1**	**1338**	**95.4**	**92.2-98.5**

Analysis Information:

- Questions used: M8, M14
- Epi Info program name: Mwaist (unweighted); MwaistWT (weighted)

Hip circumference

Description: Mean hip circumference among all respondents (excluding pregnant women).

Instrument questions:

- For women: Are you pregnant?
- Hip circumference measurement

Hip circumference (cm)						
Age Group (years)	Men			Women		
	n	Mean	95% CI	n	Mean	95% CI
18-44	429	102.6	100.5-104.7	719	111.0	106.3-115.6
45-69	434	106.4	104.3-108.5	616	110.4	107.3-113.5
18-69	863	104.0	102.5-105.5	1335	110.7	107.2-114.3

Analysis Information:

- Questions used: M8, M15
- Epi Info program name: Mhip (unweighted); MhipWT (weighted)

Waist / hip ratio

Description: Mean waist-to-hip ratio among all respondents (excluding pregnant women).

Instrument questions:

- For women: Are you pregnant?
- Waist circumference measurement
- Hip circumference measurement

Mean waist / hip ratio						
Age Group (years)	Men			Women		
	n	Mean	95% CI	n	Mean	95% CI
18-44	429	0.9	0.9-0.9	719	0.8	0.8-0.9
45-69	434	0.9	0.9-1.0	616	0.9	0.9-0.9
18-69	**863**	**0.9**	**0.9-0.9**	**1335**	**0.9**	**0.9-0.9**

Analysis Information:

- Questions used: M8, M14, M15
- Epi Info program name: Mwaisthipratio (unweighted); MwaisthipratioWT (weighted)

Biochemical Measurements[2]

Mean fasting blood glucose

Description: mean fasting blood glucose results including those currently on medication for diabetes (non-fasting recipients excluded).

Instrument questions:

- During the last 12 hours have you had anything to eat or drink, other than water?
- Blood glucose measurement

Mean fasting blood glucose (mg/dl)						
Age Group (years)	Men		Women		Both Sexes	
	n	Mean	n	Mean	n	Mean
18-44	199	81.9	410	85.2	609	84.1
45-69	245	92.6	371	91.5	616	92.0
18-69	**444**	**87.8**	**781**	**88.2**	**1225**	**88.1**

Analysis Information:

- Questions used: B1, B5
- Epi Info program name: BglucoseMg (unweighted); BglucoseMgWT (weighted)

[2] Tables are presented unweighted, given that the response rate for Step 3 was lower than 60%

Raised blood glucose

Description: Categorization of respondents into blood glucose level categories and percentage of respondents currently on medication for raised blood glucose (non-fasting recipients excluded).

Instrument questions:

- In the past two weeks, have you taken any drugs (medication) for diabetes prescribed by a doctor or other health worker?
- Are you currently taking insulin for diabetes prescribed by a doctor or other health worker?
- During the last 12 hours have you had anything to eat or drink, other than water?
- Blood glucose measurement
- Today, have you taken insulin or other drugs (medication) that have been prescribed by a doctor or other health worker?

Impaired Fasting Glycaemia*						
Age Group (years)	Men		Women		Both Sexes	
	n	%	n	%	n	%
18-44	199	5.0	410	6.1	609	5.7
45-69	246	5.7	375	9.3	621	7.9
18-69	**445**	**5.4**	**785**	**7.6**	**1230**	**6.8**

Raised blood glucose or currently on medication for diabetes**						
Age Group (years)	Men		Women		Both Sexes	
	n	%	n	%	n	%
18-44	199	7.5	410	6.8	609	7.1
45-69	246	15.9	375	16.0	621	15.9
18-69	**445**	**12.1**	**785**	**11.2**	**1230**	**11.5**

Currently on medication for diabetes						
Age Group (years)	Men		Women		Both Sexes	
	n	%	n	%	n	%
18-44	463	1.9	774	3.2	1237	2.7
45-69	469	10.4	657	12.9	1126	11.9
18-69	**932**	**6.2**	**1431**	**7.7**	**2363**	**7.1**

* Impaired fasting glycaemia is defined as plasma venous value ≥110mg/dl and <126mg/dl
** Raised blood glucose is defined as plasma venous value: ≥ 126 mg/dl

Analysis Information:

- Questions used: H8, H9, B1, B5, B6

Epi Info program name: BglucoseMg (unweighted); BglucoseMgWT (weighted)

Blood glucose diagnosis and treatment

Description: Raised blood glucose diagnosis and treatment among all respondents.

Instrument questions:

- Have you ever had your blood sugar measured by a doctor or other health worker?
- Have you ever been told by a doctor or other health worker that you have raised blood sugar or diabetes?
- In the past two weeks, have you taken any drugs (medication) for diabetes prescribed by a doctor or other health worker?
- Are you currently taking insulin for diabetes prescribed by a doctor or other health worker?
- During the last 12 hours have you had anything to eat or drink, other than water?
- Blood glucose measurement
- Today, have you taken insulin or other drugs (medication) that have been prescribed by a doctor or other health worker?

Raised blood glucose diagnosis and treatment among all respondents					
	Men				
Age Group (years)	n	% with raised blood glucose, not previously diagnosed	% with previously diagnosed raised blood glucose, not on medication	% with previously diagnosed raised blood glucose, on medication	% blood glucose not raised and not diagnosed
18-44	210	5.2	6.2	3.3	85.2
45-69	273	8.1	7.3	16.1	68.5
18-69	**483**	**6.8**	**6.8**	**10.6**	**75.8**

Raised blood glucose diagnosis and treatment among all respondents					
	Women				
Age Group (years)	n	% with raised blood glucose, not previously diagnosed	% with previously diagnosed raised blood glucose, not on medication	% with previously diagnosed raised blood glucose, on medication	% blood glucose not raised and not diagnosed
18-44	426	4.2	4.7	5.6	85.4
45-69	417	6.5	9.4	18.9	65.2
18-69	**843**	**5.3**	**7.0**	**12.2**	**75.4**

Raised blood glucose diagnosis and treatment among all respondents					
	Both sexes				
Age Group (years)	n	% with raised blood glucose, not previously diagnosed	% with previously diagnosed raised blood glucose, not on medication	% with previously diagnosed raised blood glucose, on medication	% blood glucose not raised and not diagnosed
18-44	636	4.6	5.2	4.9	85.4
45-69	690	7.1	8.6	17.8	66.5
18-69	**1326**	**5.9**	**6.9**	**11.6**	**75.6**

Analysis Information:

- Questions used: H6, H7a, H8, H9, B1, B5, B6
- Epi Info program name: BglucoseMg (unweighted); BglucoseMgWT (weighted)

Total cholesterol

Description: Mean total cholesterol among all respondents including those currently on medication for raised cholesterol.

Instrument question:

- Total cholesterol measurement

Mean total cholesterol (mg/dl)						
Age Group (years)	Men		Women		Both Sexes	
	n	Mean	n	Mean	n	Mean
18-44	207	146.9	437	147.5	644	147.3
45-69	259	155.9	398	160.5	657	158.7
18-69	**466**	**151.9**	**835**	**153.7**	**1301**	**153.1**

Analysis Information:

- Questions used: B8
- Epi Info program name:
- measurement in mg/dl: BtotallipidsMg (unweighted); BtotallipidsMgWT (weighted)

Raised total cholesterol

Description: Percentage of respondents with raised total cholesterol.

Instrument questions:

- Total cholesterol measurement

Total cholesterol ≥ 190 mg/dl						
Age Group (years)	Men		Women		Both Sexes	
	n	%	n	%	n	%
18-44	207	20.3	437	15.3	644	16.9
45-69	259	33.2	398	30.2	657	31.4
18-69	**466**	**27.5**	**835**	**22.4**	**1301**	**24.2**

Total cholesterol ≥ 240 mg/dl						
Age Group (years)	Men		Women		Both Sexes	
	n	%	n	%	n	%
18-44	207	3.9	437	2.1	644	2.6
45-69	259	3.5	398	7.5	657	5.9
18-69	**466**	**3.6**	**835**	**4.7**	**1301**	**4.3**

Analysis Information:

- Questions used: B8
- Epi Info program name: BtotallipidsMg (unweighted); BtotallipidsMgWT (weighted)

Raised total cholesterol

Description: Percentage of respondents with raised total cholesterol and percentage of respondents currently on medication for raised cholesterol.

Instrument questions:

- Total cholesterol measurement
- During the past two weeks, have you been treated for raised cholesterol with drugs (medication) prescribed by a doctor or other health worker?

Total cholesterol ≥ 190 mg/dl or currently on medication for raised cholesterol						
Age Group (years)	Men		Women		Both Sexes	
	n	%	n	%	n	%
18-44	207	20.3	437	15.6	644	17.1
45-69	259	35.1	398	32.2	657	33.3
18-69	**466**	**28.5**	**835**	**23.5**	**1301**	**25.3**

Total cholesterol ≥ 240 mg/dl or currently on medication for raised cholesterol						
Age Group (years)	Men		Women		Both Sexes	
	n	%	n	%	n	%
18-44	207	4.3	437	2.7	644	3.3
45-69	259	6.9	398	11.6	657	9.7
18-69	**466**	**5.8**	**835**	**6.9**	**1301**	**6.5**

Analysis Information:

- Questions used: B8, B9
- Epi Info program name:
- measurement in mg/dl: BtotallipidsMg (unweighted); BtotallipidsMgWT (weighted)

Introduction to intake of salt per day

Levels of sodium and creatinine in spot urine samples are used in STEPS to estimate population 24 hour salt intake, using the INTERSALT equation:

timated 24 hour sodium (Na) intake in mmol for males: 23.51+0.45*spot Na concentration (mmol/L) -3.09*spot creatinine concentration (mmol/L)+4.16*BMI+0.22*Age

timated 24 hour sodium (Na) intake in mmol for females: 3.74+0.33* spot Na concentration (mmol/L)-2.44* spot creatinine concentration (mmol/L)+2.42* BMI +2.34* Age -0.03* Age ^2

e 24 hour sodium values in mmol are divided by 17.1 in order to get grams of salt.

WHO recommen-dation

The WHO recommendation is less than 5 grams of salt or 2 grams of sodium per person per day.

Intake of salt per day

Description: Mean intake of salt in grams per day among all respondents

Instrument question:

- Are you pregnant?
- Had you been fasting prior to urine collection?
- Urinary sodium measurement
- Urinary creatinine measurement

Mean salt intake (g/day)						
Age Group (years)	Men		Women		Both Sexes	
	n	Mean	n	Mean	n	Mean
18-44	151	11.9	267	9.4	418	10.3
45-69	154	13.4	248	9.0	402	10.7
18-69	**305**	**12.7**	**515**	**9.2**	**820**	**10.5**

Analysis Information:

- Questions used: M8, B10, B14, B15
- Epi Info program name: Bsalt (unweighted); BsaltWT (weighted)

Cardiovascular disease risk[3]

CVD risk of ≥30% or existing CVD

Description: Percentage of respondents aged 40-69 years with a 10-year cardiovascular disease (CVD) risk* ≥30% or with existing CVD

Instrument questions: combined from Step 1, 2 and 3
Gender, age
Current and former smoking
History of diabetes, CVD
Systolic blood pressure measurements
Fasting status, glucose and total cholesterol measurements.

Percentage of respondents with a 10-year CVD risk ≥30% or with existing CVD						
Age Group (years)	Men		Women		Both Sexes	
	n	%	n	%	n	%
40-54	160	8.1	268	3.0	428	4.9
55-69	108	13.9	187	12.3	295	12.9
40-69	**268**	**10.4**	**455**	**6.8**	**723**	**8.2**

* A 10-year CVD risk of ≥30% is defined according to age, sex, blood pressure, smoking status (current smokers OR those who quit smoking less than 1 year before the assessment), total cholesterol, and diabetes (previously diagnosed OR a fasting plasma glucose concentration >7.0 mmol/l (126 mg/dl)).

Analysis Information:

- Questions used: C1, C2, C3, T1, T8T10, T11a-c, H6, H7a, H17a, H17b, M4a, M5a, M6a, M7, B1, B5, B8
- Epi Info program name: CVDrisk_AMR_B_BHS (unweighted)

[3] Tables are presented unweighted, given that the response rate for Step 3 was lower than 60%

Drug therapy and counseling for those with CVD risk ≥30% or existing CVD

Description: Percentage of eligible persons (defined as aged 40-69 years with a 10-year cardiovascular disease (CVD) risk* ≥30%, including those with existing CVD) receiving drug therapy and counseling** (including glycaemic control) to prevent heart attacks and strokes.

Instrument questions: combined from Step 1, 2 and 3
Gender, age
Current and former smoking
History of diabetes, CVD
Lifestyle advice
Systolic blood pressure measurements
Fasting status, glucose and total cholesterol measurements.

Percentage of eligible persons receiving drug therapy and counseling to prevent heart attacks and strokes						
Age Group (years)	Men		Women		Both Sexes	
	n	%	n	%	n	%
40-54	--	--	--	--	--	--
55-69	--	--	--	--	--	--
40-69	**--**	**--**	**--**	**--**	**59**	**57.6**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

* A 10-year CVD risk of ≥30% is defined according to age, sex, blood pressure, smoking status (current smokers OR those who quit smoking less than 1 year before the assessment), total cholesterol, and diabetes (previously diagnosed OR a fasting plasma glucose concentration >7.0 mmol/l (126 mg/dl)).

**Counseling is defined as receiving advice from a doctor or other health worker to quit using tobacco or not start, reduce salt in diet, eat at least five servings of fruit and/or vegetables per day, reduce fat in diet, start or do more physical activity, maintain a healthy body weight or lose weight.

Analysis Information:

- Questions used: C1, C2, C3, T1, T8T10, T11a-c, H6, H7a, H8, H9, H13a, H14, H17a, H17b, H18, H19, H20a-f, M4a, M5a, M6a, M7, B1, B5, B8
- Epi Info program name: CVDrisk_AMR_B_BHS (unweighted)

Summary of Combined Risk Factors

Summary of Combined Risk Factors

Description: Percentage of respondents with 0, 1-2, or 3-5 of the following risk factors:

Current daily smoking
Less than five servings of fruit and/or vegetables per day
Not meeting WHO recommendations on physical activity for health (<150 minutes of moderate activity per week, or equivalent)
Overweight or obese (BMI ≥ 25 kg/m^2)
Raised BP (SBP ⩾ 140 and/or DBP ⩾ 90 mmHg or currently on medication for raised BP).

Instrument questions: combined from Step 1 and Step 2

Summary of Combined Risk Factors							
	Men						
Age Group (years)	n	% with 0 risk factors	95% CI	% with 1-2 risk factors	95% CI	% with 3-5 risk factors	95% CI
18-44	371	1.0	0.0-2.2	75.8	69.8-81.8	23.2	17.3-29.1
45-69	382	0.6	0.0-1.3	51.1	42.3-59.9	48.3	39.7-57.0
18-69	**753**	**0.8**	**0.0-1.7**	**66.4**	**60.5-72.3**	**32.8**	**26.9-38.6**

Summary of Combined Risk Factors							
	Women						
Age Group (years)	n	% with 0 risk factors	95% CI	% with 1-2 risk factors	95% CI	% with 3-5 risk factors	95% CI
18-44	642	0.5	0.0-1.0	62.5	50.5-74.5	37.1	25.1-49.0
45-69	554	0.6	0.0-1.5	44.3	33.7-54.9	55.1	44.5-65.7
18-69	**1196**	**0.5**	**0.0-1.0**	**55.2**	**45.0-65.3**	**44.3**	**34.2-54.5**

Summary of Combined Risk Factors							
	Both Sexes						
Age Group (years)	n	% with 0 risk factors	95% CI	% with 1-2 risk factors	95% CI	% with 3-5 risk factors	95% CI
18-44	1013	0.7	0.1-1.4	69.0	60.9-77.1	30.3	22.3-38.3
45-69	936	0.6	0.0-1.2	47.5	39.6-55.4	51.9	44.2-59.7
18-69	**1949**	**0.7**	**0.2-1.2**	**60.6**	**52.9-68.2**	**38.8**	**31.2-46.3**

Analysis Information:

- Questions used: T1, T2, D1-D4, P1-P15b, M4a-M6b, M7, M8, M11, M12
- Epi Info program name: Raisedrisk (unweighted); RaisedriskWT (weighted)

Oral Health

Percentage of respondents having poor or very poor state of gums

Description: Percentage of respondents having a poor or very poor state of gums among those having natural teeth.

Instrument question:

- How would you describe the state of your gums?

Percentage of respondents having poor or very poor state of gums among those having natural teeth									
	Men			Women			Both Sexes		
Age Group (years)	n	% having poor or very poor state of gums	95% CI	n	% having poor or very poor state of gums	95% CI	n	% having poor or very poor state of gums	95% CI
18-44	463	0.8	0.0-1.7	773	2.9	0.1-5.6	1236	1.8	0.4-3.3
45-69	468	1.3	0.2-2.4	656	3.6	0.5-6.7	1124	2.5	1.0-4.1
18-69	**931**	**1.0**	**0.3-1.7**	**1429**	**3.2**	**1.4-4.9**	**2360**	**2.1**	**1.2-3.0**

Analysis Information:

- Questions used: O3
- Epi Info program name: Ohealthgums (unweighted); OhealthgumsWT (weighted)

Percentage of respondents having seen a dentist during the past 12 months

Description: Percentage of respondents having seen a dentist during the past 12 months.

Instrument question:

- How long has it been since you last saw a dentist?

Percentage of respondents having seen a dentist during the past 12 months

Age Group (years)	Men			Women			Both Sexes		
	n	% having seen a dentist during the past 12 months	95% CI	n	% having seen a dentist during the past 12 months	95% CI	n	% having seen a dentist during the past 12 months	95% CI
18-44	463	28.0	18.7-37.2	773	32.5	23.5-41.4	1236	30.3	22.1-38.4
45-69	468	28.8	17.7-39.9	656	31.9	26.3-37.4	1124	30.4	24.5-36.4
18-69	**931**	**28.3**	**21.1-35.5**	**1429**	**32.2**	**26.5-37.9**	**2360**	**30.3**	**24.7-36.0**

Analysis Information:

- Questions used: O7
- Epi Info program name: Odentalvisit (unweighted); OdentalvisitWT (weighted)

Percentage of respondents who have never received dental care

Description: Percentage of respondents who have never received dental care.

Instrument question:

- How long has it been since you last saw a dentist?

Percentage of respondents who have never received dental care

Age Group (years)	Men			Women			Both Sexes		
	n	% never received dental care	95% CI	n	% never received dental care	95% CI	n	% never received dental care	95% CI
18-44	463	8.4	4.8-12.0	773	7.1	1.3-13.0	1236	7.7	4.5-10.9
45-69	468	5.7	0.0-12.4	656	5.5	1.8-9.3	1124	5.6	0.8-10.4
18-69	**931**	**7.4**	**3.6-11.1**	**1429**	**6.5**	**2.1-10.9**	**2360**	**6.9**	**4.1-9.7**

Analysis Information:

- Questions used: O7
- Epi Info program name: Odentalvisit (unweighted); OdentalvisitWT (weighted)

Main reason for last visit to the dentist among those who ever visited a dentist

Description: Main reason for last visit to the dentist among those who ever visited a dentist.

Instrument question:

- What was the reason for your last visit to the dentist?

Main reason for last visit to the dentist among those who ever visited a dentist

Men

Age Group (years)	n	% Consultation / advice	95% CI	% Pain or trouble with teeth or gums	95% CI	% Follow-up treatment	95% CI	% Routine check-up treatment	95% CI	% Other	95% CI
18-44	426	2.1	0.7-3.6	25.4	16.2-34.7	10.6	6.7-14.6	51.0	38.9-63.0	10.8	0.6-21.1
45-69	451	2.0	0.5-3.5	39.8	26.4-53.2	15.4	9.8-20.9	36.8	27.0-46.6	6.0	0.5-11.5
18-69	**877**	**2.1**	**0.9-3.3**	**31.0**	**22.6-39.4**	**12.5**	**9.2-15.7**	**45.5**	**36.5-54.5**	**9.0**	**1.8-16.1**

Main reason for last visit to the dentist among those who ever visited a dentist

Women

Age Group (years)	n	% Consultation / advice	95% CI	% Pain or trouble with teeth or gums	95% CI	% Follow-up treatment	95% CI	% Routine check-up treatment	95% CI	% Other	95% CI
18-44	732	4.6	1.5-7.6	21.5	17.6-25.5	12.6	7.6-17.6	45.2	34.9-55.4	16.1	1.6-30.7
45-69	631	2.2	1.1-3.3	28.4	18.5-38.4	19.1	13.4-24.9	43.6	36.0-51.2	6.7	1.8-11.5
18-69	**1363**	**3.6**	**1.8-5.4**	**24.3**	**18.7-30.0**	**15.2**	**10.6-19.9**	**44.5**	**36.9-52.2**	**12.3**	**1.6-23.0**

Main reason for last visit to the dentist among those who ever visited a dentist

Both Sexes

Age Group (years)	n	% Consultation / advice	95% CI	% Pain or trouble with teeth or gums	95% CI	% Follow-up treatment	95% CI	% Routine check-up treatment	95% CI	% Other	95% CI
18-44	1158	3.4	1.5-5.2	23.4	17.9-28.9	11.6	8.3-15.0	48.0	38.1-57.9	13.6	1.2-25.9
45-69	1082	2.1	1.2-3.0	33.8	22.4-45.1	17.4	12.4-22.4	40.4	32.4-48.4	6.3	2.1-10.6
18-69	**2240**	**2.9**	**1.8-4.0**	**27.5**	**21.1-33.9**	**13.9**	**10.3-17.5**	**45.0**	**37.3-52.6**	**10.7**	**1.8-19.6**

Analysis Information:

- Questions used: O7, O8
- Epi Info program name: Oreasonvisit (unweighted); OreasonvisitWT (weighted)

Sexual Health

Ever sexual intercourse

Description: Percentage of sexually active respondents

Instrument question:

- Have you ever had sexual intercourse?

Percentage of sexually active respondents									
Age Group (years)	Men			Women			Both Sexes		
	n	% having had sexual intercourse	95% CI	n	% having had sexual intercourse	95% CI	n	% having had sexual intercourse	95% CI
18-44	455	95.2	93.0-97.4	756	94.0	90.4-97.7	1211	94.6	92.1-97.2
45-69	457	98.3	96.6-100.0	647	98.4	97.4-99.5	1104	98.4	97.3-99.5
18-69	**912**	**96.4**	**95.0-97.8**	**1403**	**95.8**	**93.7-97.9**	**2315**	**96.1**	**94.5-97.7**

Analysis Information:

- Questions used: SH1
- Epi Info program name: Seversex (unweighted); SeversexWT (weighted)

Early first sexual intercourse

Description: Age of first sexual intercourse.

Instrument question:

- How old were you when you first had sexual intercourse?

Median age of first sexual intercourse									
Age Group (years)	Men			Women			Both Sexes		
	n	Median Age	Inter-quartile range (P25-P75)	n	Median Age	Inter-quartile range (P25-P75)	n	Median Age	Inter-quartile range (P25-P75)
18-44	410	16.0	15.0-18.0	677	18.0	16.0-19.0	1087	17.0	15.0-18.0
45-69	432	17.0	16.0-19.0	598	18.0	16.0-20.0	1030	18.0	16.0-20.0
18-69	**842**	**17.0**	**15.0-18.0**	**1275**	**18.0**	**16.0-19.0**	**2117**	**17.0**	**16.0-19.0**

Mean age of first sexual intercourse									
Age Group (years)	Men			Women			Both Sexes		
	n	Mean Age	95% CI	n	Mean Age	95% CI	n	Mean Age	95% CI
18-44	410	16.4	15.8-17.0	677	17.7	17.4-17.9	1087	17.5	17.1-17.8
45-69	432	17.6	17.0-18.2	598	18.2	17.5-19.0	1030	17.3	16.8-17.9
18-69	**842**	**16.9**	**16.3-17.4**	**1275**	**17.9**	**17.5-18.2**	**2117**	**17.4**	**17.0-17.8**

% Reporting first sexual intercourse before age 15									
Age Group (years)	Men			Women			Both Sexes		
	n	% reporting intercourse before age 15	95% CI	n	% reporting intercourse before age 15	95% CI	n	% reporting intercourse before age 15	95% CI
18-44	410	19.2	11.9-26.5	677	6.5	2.1-10.9	1087	12.7	7.7-17.7
45-69	432	9.6	5.3-13.9	598	9.0	2.1-16.0	1030	9.3	6.2-12.4
18-69	**842**	**15.5**	**9.6-21.3**	**1275**	**7.5**	**3.8-11.3**	**2117**	**11.4**	**8.1-14.7**

Analysis Information:

- Questions used: SH1, SH2
- Epi Info program name: Sfirstsexage (unweighted); SfirstsexageWT (weighted)

Number of sexual partners during past year

Description: Number of sexual partners over the past year.

Instrument question:

- During the past 12 months, with how many people have you had sex (that is, oral, anal or vaginal sex)?

Mean number of sexual partners over the past year

Age Group (years)	Men			Women			Both Sexes		
	n	Mean	95% CI	n	Mean	95% CI	n	Mean	95% CI
18-44	418	1.9	1.6-2.1	691	1.2	1.1-1.3	1109	1.5	1.4-1.7
45-69	444	1.0	1.0-1.1	622	0.9	0.7-1.1	1066	0.9	0.9-1.0
18-69	**862**	**1.5**	**1.4-1.7**	**1313**	**1.1**	**1.0-1.2**	**2175**	**1.3**	**1.2-1.4**

Median number of sexual partners over the past year

Age Group (years)	Men			Women			Both Sexes		
	n	Median	Inter-quartile range (P25-P75)	n	Median	Inter-quartile range (P25-P75)	n	Median	Inter-quartile range (P25-P75)
18-44	418	1.0	1.0-2.0	691	1.0	1.0-1.0	1109	1.0	1.0-2.0
45-69	444	1.0	1.0-1.0	622	1.0	0.0-1.0	1066	1.0	1.0-1.0
18-69	**862**	**1.0**	**1.0-2.0**	**1313**	**1.0**	**1.0-1.0**	**2175**	**1.0**	**1.0-1.0**

Analysis Information:

- Questions used: SH1, SH6
- Epi Info program name: Snumber (unweighted); SnumberWT (weighted)

Percentage of respondents reporting protection during last sexual intercourse

Description: Percentage of respondents reporting use of protection against pregnancy and/or infection during last sexual intercourse.

Instrument questions:

- The last time you had sexual intercourse, did you use any kind of protection against pregnancy and/or infection?

Percentage of respondents reporting use of protection during last intercourse

Men

Age Group (years)	n	% reporting use of a condom	95% CI	n	% reporting use of the pill	95% CI	n	% reporting use of a different method	95% CI
18-44	418	59.8	49.6-70.0	388	8.2	2.1-14.3	397	6.8	3.0-10.5
45-69	439	21.7	12.6-30.8	416	1.4	0.3-2.4	428	1.7	0.1-3.3
18-69	**857**	**45.0**	**38.4-51.6**	**804**	**5.5**	**1.6-9.4**	**825**	**4.8**	**2.1-7.5**

Percentage of respondents reporting use of protection during last intercourse

Women

Age Group (years)	n	% reporting use of a condom	95% CI	n	% reporting use of the pill	95% CI	n	% reporting use of a different method	95% CI
18-44	686	38.6	31.3-45.9	687	18.2	12.3-24.1	687	17.3	12.4-22.2
45-69	605	9.0	6.3-11.8	605	5.4	2.5-8.2	607	4.8	1.9-7.6
18-69	**1291**	**26.6**	**21.3-31.9**	**1292**	**12.9**	**9.4-16.5**	**1294**	**12.2**	**8.2-16.1**

Percentage of respondents reporting use of protection during last intercourse									
	Both Sexes								
Age Group (years)	n	% reporting use of a condom	95% CI	n	% reporting use of the pill	95% CI	n	% reporting use of a different method	95% CI
18-44	1075	48.3	41.8-54.8	1075	13.4	8.9-17.8	1084	12.2	9.0-15.3
45-69	1021	14.2	10.1-18.4	1021	3.5	2.1-5.0	1035	3.3	1.3-5.3
18-69	**2096**	**34.6**	**30.0-39.3**	**2096**	**9.4**	**6.8-12.1**	**2119**	**8.6**	**6.0-11.2**

Analysis Information:

- Questions used: SH1, SH10a-c
- Epi Info program name: Sprotectlast (unweighted); SprotectlastWT (weighted)

Percentage of respondents having had sexually transmitted infections

Description: Percentage of respondents having had a disease/infection from sexual contact

Instrument questions:

- Have you ever had a disease/infection which you got through sexual contact?

Percentage of respondents reporting having had a disease/infection through sexual contact									
	Men			Women			Both Sexes		
Age Group (years)	n	% Disease/ Infection from sexual contact	95% CI	n	% Disease/ Infection from sexual contact	95% CI	n	% Disease/ Infection from sexual contact	95% CI
18-44	414	13.2	4.3-22.0	686	17.9	9.8-26.0	1100	15.6	10.8-20.3
45-69	432	6.7	4.2-9.2	614	6.3	2.7-9.9	1046	6.5	4.4-8.6
18-69	**846**	**10.7**	**4.8-16.7**	**1300**	**13.2**	**7.7-18.6**	**2146**	**12.0**	**8.7-15.3**

Analysis Information:

- Questions used: SH1, SH12
- Epi Info program name: Sinfection (unweighted); SinfectionWT (weighted)

Violence and Injury

Percentage of drivers or passengers not always using seat belt

Description: Percentage of drivers or passengers of a motor vehicle who did not always use a seat belt or were otherwise unrestrained during the past 30 days.

Instrument question:

- In the past 30 days, how often did you use a seat belt when you were the driver or passenger of a motor vehicle?

Percentage of drivers or passengers not always using a seat belt

Age Group (years)	Men			Women			Both Sexes		
	n	% Not always using seat belt	95% CI	n	% Not always using seat belt	95% CI	n	% Not always using seat belt	95% CI
18-44	451	59.5	51.0-67.9	748	40.6	30.8-50.5	1199	49.9	43.5-56.3
45-69	445	46.7	33.6-59.7	637	28.8	17.8-39.7	1082	37.1	27.5-46.6
18-69	**896**	**54.6**	**47.3-62.0**	**1385**	**35.9**	**28.4-43.3**	**2281**	**44.9**	**37.9-51.9**

Analysis Information:

- Questions used: V1
- Epi Info program name: Vseatbelt (unweighted); VseatbeltWT (weighted)

Percentage of motorcycle or motor-scooter drivers not always using helmet

Description: Percentage of drivers or passengers of a motorcycle or motor-scooter who did not always wear a helmet during the past 30 days.

Instrument question:

- In the past 30 days, how often did you wear a helmet when you drove or rode as a passenger on a motorcycle or motor-scooter?

Percentage of drivers or passengers of a motorcycle or motor-scooter not always using a helmet

Age Group (years)	Men			Women			Both Sexes		
	n	% Not always using helmet	95% CI	n	% Not always using helmet	95% CI	n	% Not always using helmet	95% CI
18-44	176	83.2	73.7-92.7	255	64.8	32.3-97.3	431	73.5	54.1-93.0
45-69	158	68.7	39.6-97.8	246	87.8	76.7-98.9	404	78.6	58.6-98.6
18-69	**334**	**77.8**	**64.0-91.6**	**501**	**73.3**	**47.0-99.7**	**835**	**75.4**	**55.7-95.2**

Analysis Information:

- Questions used: V2
- Epi Info program name: Vhelmet (unweighted); VhelmetWT (weighted)

Driving under the effects of alcohol

Description: Percentage of respondents who have driven a motorized vehicle after having had 2 or more alcoholic drinks.

Instrument question:

- In the past 30 days, how many times have you driven a motorized vehicle when you have had 2 or more alcoholic drinks?

Driving under the effects of alcohol									
Age Group (years)	Men			Women			Both Sexes		
	n	% drove after drinking	95% CI	n	% drove after drinking	95% CI	n	% drove after drinking	95% CI
18-44	457	34.6	24.6-44.5	770	20.6	9.4-31.7	1227	27.4	21.0-33.8
45-69	464	21.4	12.9-29.9	656	4.8	0.6-9.1	1120	12.6	6.7-18.4
18-69	**921**	**29.6**	**22.2-36.9**	**1426**	**14.3**	**5.2-23.3**	**2347**	**21.6**	**15.7-27.5**

Analysis Information:

- Questions used: V9
- Epi Info program name: Vdrovedrunk (unweighted); VdrovedrunkWT (weighted)

Riding in a vehicle with a driver under the effect of alcohol

Description: Percentage of respondents who rode in a motorized vehicle where the driver has had 2 or more alcoholic drinks.

Instrument question:

- In the past 30 days, how many times have you ridden in a motorized vehicle where the driver has had 2 or more alcoholic drinks?

Riding in a vehicle with a driver under the effect of alcohol									
Age Group (years)	Men			Women			Both Sexes		
	n	% rode with driver who drank	95% CI	n	% rode with driver who drank	95% CI	n	% rode with driver who drank	95% CI
18-44	459	29.7	18.2-41.3	767	17.5	11.4-23.6	1226	23.5	18.3-28.7
45-69	465	15.3	10.9-19.6	656	11.0	4.3-17.8	1121	13.0	7.6-18.4
18-69	**924**	**24.2**	**17.6-30.9**	**1423**	**14.9**	**9.2-20.6**	**2347**	**19.4**	**15.9-22.8**

Analysis Information:

- Questions used: V10
- Epi Info program name: Vdriverdrunk (unweighted); VdriverdrunkWT (weighted)

Percentage of respondents involved in a violent incident resulting in a serious injury

Description: Percentage of respondents involved in a violent incident during the past 12 months resulting in an injury.

Instrument question:

- In the past 12 months, how many times were you in a violent incident in which you were injured and required medical attention?

Percentage of respondents seriously injured from violent incidents									
	Men			Women			Both Sexes		
Age Group (years)	n	% Seriously injured from violent incidents	95% CI	n	% Seriously injured from violent incidents	95% CI	n	% Seriously injured from violent incidents	95% CI
18-44	458	4.5	2.1-6.8	761	8.3	3.0-13.6	1219	6.4	3.7-9.2
45-69	462	2.0	0.0-4.4	652	2.0	0.0-4.0	1114	2.0	0.0-4.1
18-69	920	3.5	1.8-5.2	1413	5.8	1.9-9.7	2333	4.7	2.4-7.0

Analysis Information:

- Questions used: V11
- Epi Info program name: Vviolentinjury (unweighted); VviolentinjuryWT (weighted)

Persons causing violent injury

Description: Relationship status between respondents and those that have caused their injuries during a violent incident in the past 12 months.

Instrument questions:

- In the past 12 months, how many times were you in a violent incident in which you were injured and required medical attention?
- Please indicate the relationship between yourself and the person(s) who caused your injury.

Percentage of those receiving violent injuries caused by different persons																			
	Both Sexes																		
Age Group	n	% Intimate partner	95 % CI	% Parent	95 % CI	% Child, sibling, or other relative	95 % CI	% Friend or acquaint-tance	95 % CI	% Unrelated caregiver	95 % CI	% Stranger	95 % CI	%Official or legal authorities	95 % CI	% Other	95 % CI
18-44	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
45-69	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
18-69	**54**	**14.3**	**0.0-31.8**	**0.0**	**-**	**0.5**	**0.0-1.5**	**17.8**	**0.0-36.2**	**0.0**	**-**	**22.9**	**2.0-43.8**	**5.1**	**0.0-16.1**	**39.5**	**0.0-83.7**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

Analysis Information:

- Questions used: V11, V13
- Epi Info program name: Vviolentinjuryrel (unweighted); VviolentinjuryrelWT (weighted)

Percentage of those frightened for safety because of anger or threats of another person

Description: Percentage of respondents who reported being frightened for the safety of themselves or their families because of the anger or threats of another person.

Instrument question:

- In the past 12 months, have you been frightened for the safety of yourself or your family because of the anger or threats of another person (s)?

Percentage of respondents frightened for their safety because of another person									
Age Group (years)	Men			Women			Both Sexes		
	n	% frightened for safety	95% CI	n	% frightened for safety	95% CI	n	% frightened for safety	95% CI
18-44	459	6.2	0.0-13.0	764	5.3	1.9-8.8	1223	5.8	0.9-10.6
45-69	458	1.9	0.6-3.1	653	3.7	1.5-5.9	1111	2.8	1.6-4.1
18-69	**917**	**4.6**	**0.4-8.7**	**1417**	**4.7**	**1.8-7.6**	**2334**	**4.6**	**1.3-8.0**

Analysis Information:

- Questions used: V17
- Epi Info program name: Vfear (unweighted); VfearWT (weighted)

Percentage of respondents frightened, by type of person of whom they were frightened

Description: Percentage of respondents who reported being frightened by each of the types of people in the table below.

Instrument question:

- In the past 12 months, have you been frightened for the safety of yourself or your family because of the anger or threats of another person (s)?
- Please specify of whom you were most often frightened.

Percentage of respondents frightened by each of the following types of people													
Age Group (years)	Men												
	n	% Someone within the family	95 % CI	% Friend or acquaintance	95 % CI	% Unrelated caregiver	95 % CI	% Stranger	95 % CI	% Official or legal authority	95 % CI	% Other	95 % CI
18-44	--	--	--	--	--	--	--	--	--	--	--	--	--
45-69	--	--	--	--	--	--	--	--	--	--	--	--	--
18-69	**--**	**--**	**--**	**--**	**--**	**--**	**--**	**--**	**--**	**--**	**--**	**--**	**--**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

Percentage of respondents frightened by each of the following types of people													
	Women												
Age Group (years)	n	% Someone within the family	95 % CI	% Friend or acquaintance	95 % CI	% Unrelated caregiver	95 % CI	% Stranger	95 % CI	% Official or legal authority	95 % CI	% Other	95 % CI
18-44	--	--	--	--	--	--	--	--	--	--	--	--	--
45-69	--	--	--	--	--	--	--	--	--	--	--	--	--
18-69	**54**	**60.9**	**45.5-76.2**	**11.6**	**1.3-21.9**	**0.0**	**0.0-0.0**	**10.8**	**0.0-23.6**	**0.3**	**0.0-1.1**	**16.4**	**9.7-23.1**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

Percentage of respondents frightened by each of the following types of people													
	Both Sexes												
Age Group (years)	n	% Someone within the family	95 % CI	% Friend or acquaintance	95 % CI	% Unrelated caregiver	95 % CI	% Stranger	95 % CI	% Official or legal authority	95 % CI	% Other	95 % CI
18-44	53	40.0	30.1-49.9	41.6	19.6-63.6	7.7	0.0-19.4	5.4	0.0-11.0	5.3	0.0-12.4	53	40.0
45-69	--	--	--	--	--	--	--	--	--	--	--	--	--
18-69	**89**	**38.2**	**30.5-46.0**	**37.8**	**21.7-53.9**	**0.0**	**0.0-0.0**	**10.7**	**0.0-21.9**	**4.3**	**0.4-8.2**	**9.0**	**5.4-12.5**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

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Analysis Information:

- Questions used: V18
- Epi Info program name: Vfearwho (unweighted); VfearwhoWT (weighted)

Mental health / Suicide

Population having considered attempting suicide in past 12 months

Description: Percentage of respondents who seriously considered attempting suicide in the last 12 months among all respondents.

Instrument question:

- During the past 12 months, have you seriously considered attempting suicide?

Percentage having considered attempting suicide in the last 12 months

Age Group (years)	Men n	Men % considered attempting suicide	Men 95% CI	Women n	Women % considered attempting suicide	Women 95% CI	Both Sexes n	Both Sexes % considered attempting suicide	Both Sexes 95% CI
18-44	462	13.3	1.7-24.9	767	4.9	0.0-10.1	1229	9.0	3.7-14.3
45-69	463	1.2	0.0-3.0	653	2.9	0.0-6.2	1116	2.1	0.2-4.0
18-69	**925**	**8.7**	**1.3-16.2**	**1420**	**4.1**	**0.0-8.4**	**2345**	**6.3**	**2.7-9.9**

Analysis Information:

- Questions used: MH1
- Epi Info program name: MHconsidered (unweighted); MHconsideredWT (weighted)

Population having sought professional help

Description: Percentage of respondents who sought professional help among those who considered attempting suicide in the past 12 months.

Instrument question:

- During the past 12 months, have you seriously considered attempting suicide?
- Did you seek professional help for these thoughts?

Percentage having sought professional help

Age Group (years)	Men n	Men % sought professional help	Men 95% CI	Women n	Women % sought professional help	Women 95% CI	Both Sexes n	Both Sexes % sought professional help	Both Sexes 95% CI
18-44	--	--	--	--	--	--	--	--	--
45-69	--	--	--	--	--	--	--	--	--
18-69	**--**	**--**	**--**	**--**	**--**	**--**	**61**	**34.4**	**0.0-70.0**

-- Indicates estimate based on less than 50 unweighted cases and has been suppressed

Analysis Information:

- Questions used: MH1, MH2
- Epi Info program name: MHhelp (unweighted); MHhelpWT (weighted)

Population having planned how to attempt suicide

Description: Percentage of respondents who made a plan about how to attempt suicide in the past 12 months.

Instrument question:

- During the past 12 months, have you made a plan about how you would attempt suicide?

Age Group (years)	Men n	Men % planned how to attempt suicide	Men 95% CI	Women n	Women % planned how to attempt suicide	Women 95% CI	Both Sexes n	Both Sexes % planned how to attempt suicide	Both Sexes 95% CI
18-44	462	0.8	0.1-1.6	767	6.0	0.4-11.6	1229	3.4	0.4-6.5
45-69	463	0.4	0.0-1.0	653	2.1	0.0-5.4	1116	1.3	0.0-3.1
18-69	**925**	**0.7**	**0.1-1.2**	**1420**	**4.4**	**0.0-8.8**	**2345**	**2.6**	**0.3-4.9**

Analysis Information:

- Questions used: MH3
- Epi Info program name: MHplan (unweighted); MHplanWT (weighted)

Population having ever attempted suicide

Description: Percentage of respondents who have ever attempted suicide among all respondents.

Instrument question:

- Have you ever attempted suicide?

Percentage having ever attempted suicide									
Age Group (years)	Men			Women			Both Sexes		
	n	% attempted suicide	95% CI	n	% attempted suicide	95% CI	n	% attempted suicide	95% CI
18-44	462	1.0	0.2-1.7	768	3.1	1.4-4.8	1230	2.1	1.0-3.1
45-69	465	0.3	0.0-0.7	653	2.5	0.0-5.8	1118	1.5	0.0-3.3
18-69	**927**	**0.7**	**0.3-1.2**	**1421**	**2.9**	**1.4-4.3**	**2348**	**1.8**	**1.0-2.6**

Analysis Information:

- Questions used: MH4
- Epi Info program name: MHattempted (unweighted); MHattemptedWT (weighted)

Population having close family die from suicide

Description: Percentage of respondents who have ever had anyone in their close family die from suicide.

Instrument question:

- Has anyone in your close family (mother, father, brother, sister or children) ever died from suicide?

Percentage having close family who died from suicide									
Age Group (years)	Men			Women			Both Sexes		
	n	% close family died from suicide	95% CI	n	% close family died from suicide	95% CI	n	% close family died from suicide	95% CI
18-44	462	2.2	0.3-4.2	767	1.6	0.3-2.9	1229	1.9	0.6-3.3
45-69	465	2.1	0.8-3.4	654	1.3	0.3-2.2	1119	1.6	0.9-2.4
18-69	**927**	**2.2**	**0.9-3.4**	**1421**	**1.5**	**0.7-2.3**	**2348**	**1.8**	**1.0-2.6**

Analysis Information:

- Questions used: MH10
- Epi Info program name: MHfamilydeath (unweighted); MHfamilydeathWT (weighted)