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#### Methods/design

#### Goals

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#### Objectives

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#### Table 1 Study outcomes and definitions

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## Research questions and outcomes

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#### Primar research questions

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Outcome type	Outcome	Definition		
Primary	The prevalence of intermediate hyperglycaemia and T2DM	Proportion of adults aged 30 years or older with WHO categorisations for intermediate hyperglycaemia (impaired fasting glucose or impaired glucose tolerance) and T2DM		
	Two-year cumulative incidence of T2DM among individuals with intermediate hyperglycaemia at baseline	Proportion of adults aged 30 years or older with plasma glucose cut-off categorisations for intermediate hyperglycaemia at baseline who are categorised as T2DM at endline		
Secondary	Blood pressure	Mean population diastolic and systolic blood pressure		
	Prevalence of hypertension	Proportion of adults aged 30 years or older with systolic blood pressure ≥140 mmHg or diastolic blood pressure ≥90 mmHg or self-reported current treatment with anti-hypertensive medication		
	Body mass index	Mean population BMI		
	Prevalence of overweight and obesity	Proportion of adults aged 30 years or older with a BMI of 23 kg/m <sup>2</sup> or more		
	Abdominal obesity	Proportion of adult men and women aged 30 years or older with waist-to-hip circumference ratio >0.9 or >0.85, respectively		
	Quality of life score	Mean health-related quality of life (EQ-5D)		
	Psychological distress among self-reported diabetics	Mean SRQ score among adults aged 30 years and older with self-reported diabetes		
Explanatory	Physical activity	Proportion of adults aged 30 years and older engaged in 30 minutes or more of physical activity per day on at least 5 days per week		
	Intake of fruit and/or vegetables	Mean number of portions of fruit or vegetables consumed per adult aged 30 years or older per day		
	Population knowledge about diabetes risk factors, symptoms and complications	Proportion of adults aged 30 years and above who are (a) able to name at least one cause of diabetes, (b) able to report at least one symptom of diabetes, (c) able to report at least one complication of diabetes, (d) able to recognise complications of diabetes when prompted, (e) able to report at least one way to reduce the risk of getting diabetes and (f) able to report at least one way to control diabetes if diagnosed		
	Self-awareness of diabetic status	Proportion of diabetics who correctly report their diabetic status		
	Receipt of treatment or advice for diabetes	Proportion of diabetics receiving care or advice from a medical professional		

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# Ancillar questions

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#### E planator outcomes

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## Trial design overview

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#### Setting

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#### Implementation research and process evaluation

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#### Analysis

# Interim anal sis and stopping rules

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#### Timetable

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### Ethics

#### Approvals

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#### Communit consultation

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Competing interests The authors declare that they have no competing interests.

Consent for publication Not applicable.

Ethics approval and consent to participate The trial has been reviewed and approved by the University College London Research Ethics Committee (4766/002) and by the Ethical Review Committee of the Diabetic Association of Bangladesh (BADAS-ERC/EC/t5100246). The trial has been registered and assigned an International Standard Randomised Controlled Trial Number (ISRCTN41083256).

Consent

Community and individual participation in the study will be on a voluntary

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