

Dietary Intake Questionnaire (Pregnant Women)

Dietary Intake Survey of the Pregnant Women– 2014



**Department of Nutrition and Food Technology
Jessore University of Science and Technology
Jessore-7408, Bangladesh**

Student's name: Date: ____/____/____

Cross-checked by: Date: ____/____/____

	<i>District</i>	<i>Sub-district</i>	<i>Union</i>	<i>Village</i>	<i>Cluster</i>
ID Number					

Respondent's name:

Name of the household head:

Husband's name:

➤ If interview cannot be taken, why not? ☐

HH not available [1];

Pregnant women not available [2];

Refused to participate [3];

Others, specify _____

Consent of the Respondent

ID of the Respondents:

Respondent's Name:

(Interviewers: You are requested to clearly read out the following statement to the respondent and take her consent before initiating the interview)

Our department (Department of Nutrition and Food Technology of Jessore University of Science and Technology) is going to conduct an academic research in your locality. Our goal is to collect information from the pregnant women of sampled households including your house with a broad objective to understand the dietary intake pattern of the pregnant women of your area. Under this research, we will like to record information on dietary intake issues from you. We will want to know detailed information about your dietary intake on the previous day. All information will be used for research purpose only and must be kept confidential.

You have every right to keep away or to quit at any time if you want. In the circumstances, do you give your consent to collect information from you?

Yes

No

[Take the interview after having obtained the consent]

Information of the household members:

Line No	Name	Age		Education	Occupation*
		Years	Months		
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

***Code for occupation:** 1= Day labour, 2= Van/Rickshaw puller, 3= Easy bike driver, 5= Carpenter, 6= Bus/Truck Driver, 7= Farming, 8= Barber, 10= Student, 11= Housewife, 99= Do not work
66= Others (specify.....)

Information of the pregnant woman:

- Age of the pregnant woman : years
- Gestational age of the pregnant woman : months
- Level of Education of the pregnant woman : class
- Religious belief :
- Code for religion: 1= Islam, 2= Hinduism, 3= Christianity, 4= Buddhism
- Monthly income of the household head : in BDT
- Occupation of the pregnant woman :
- Code for occupation: 1= Housewife, 2= Any other income generating works

Dietary intake assessment of the pregnant woman:

Recall should be for a typical day, no religious or festival day or if the respondent were invited for any meal outside her home the recall should not be taken on that day.

A Quick List of the food eaten on the previous day (Recalled Day):

In this quick list, we will make a list of the foods a pregnant woman ate and drank on the recalled day. First, the pregnant woman would remember what she ate by thinking about where she was, who were with her, or what she was doing. The pregnant woman should tell everything she ate and drink (except water) including what she ate at home or outside home, even snack, tea, soft drinks, an energy drink from his wake up in the morning to the time just before she went to bed to sleep. When the pregnant woman has finished, probe for meals and snacks not mentioned by her.

Breakfast	Mid-morning Snack	Lunch	Afternoon Snack	Dinner

Additional Information:

The interviewer should ask the pregnant woman whether she took any multi-vitamins or supplement foods, or she ate WFP energy biscuits at the recalled day

Multi-vitamin, Supplement	Intake time	Brand Name	Amount taken

Detailed of the dietary intake:

Interviewer probes for food descriptions and food amounts which are listed on the quick list section. When composite dishes are mentioned, ask for the list of ingredients. The interviewer should also make a review of each occasion and probe for where and which food on each occasion was eaten. Probes must be neutral

Meal time	Raw/Cooked Food	Detailed of the raw food		Detailed of the Cooked Food				Food Code	Amount (g)
		Serving (local/standard)	CF*	Serving (local/standard)	Ingredients	Proportion	CY*		
Breakfast									
Mid-morning Snack									
Lunch									
Afternoon Snack									
Dinner									

* CF= Conversion factor, CY= Cooking yield

Give ‘Thank You’ and check the entire questionnaire to see if anything is there incomplete before leaving the household