

ANNEXURE 9
DEPARTMENT OF FOODS AND NUTRITION, THE M.S. UNIVERSITY OF BARODA

Food Intake of the Child

i) ID. No.:

Date:

ii) Name of village:

iii) Name of the respondent:

1. Was the child ill yesterday?

1 Yes

1

2 No

2

Meal	Food Item	Ingredients	Total raw weight (gm)	Quantity (total cooked volume)	Quantity consumed by subject (cooked volume)	Total raw weight consumed by subject

2. Was there anything that was cooked yesterday and not given to the child?

1 Yes

1

2 No

2

2.1 If yes, what

2.2 Why not given? (probe: mealwise if no response)

3 Do you usually give fruits to the child?

1 Yes

1

2 No

2

3.1 If yes, why?

3.2 Last week which fruits did you give and how many times?

3.3 If no, why?

4 Do you usually give vegetables to the child?

1 Yes

1

2 No

2

4.1 If yes, why?

4.2 Last week which vegetables did you give and how many times?

4.3 If no, why?