SSR DEGREE AND PG COLLEGE, NIZAMABAD (5029)
DEPARTMENT OF NUTRITION
SEMESTER – III, INTERNAL-I QUESTION BANK
PAPER - I
Subject: COMMUNITY NUTRITION (ND 301 T)

Multiple Choice Questions

1. Which of the following is not an anthropometric measurement? (c)
a) Weight b) Height c) Blood pressure d) Mid-arm circumference

2. BMI is calculated as (b)
a) Weight × Height b) Weight / Height² c) Height / Weight² d) Weight + Height

3. Gomez classification is based on (c)
a) Weight-for-height b) Height-for-age c) Weight-for-age d) BMI

4. Waterlow's classification deals with (a)
a) Protein-energy malnutrition b) Obesity c) Vitamin deficiency d) Anaemia

5. Mid-arm circumference is mainly used to assess (d)
a) Water retention b) Bone density c) Fat distribution d) Muscle mass

6. Skinfold thickness is measured using (b)
a) Scale b) Calipers c) Measuring tape d) Stadiometer

7. WHO standards are mainly used for (a)
a) Growth monitoring b) Disease diagnosis c) Diet planning
d) Laboratory testing

8. NCHS standards are based on (b)
a) Indian population b) American population c) African population
d) Asian population

9. Which of the following methods can detect early nutrient deficiency? (c)
a) Clinical assessment b) Anthropometry c) Biochemical method
d) Diet survey

10. Biochemical biomarkers include (b)
a) Height and weight b) RBC folate, calcium, vitamin A c) Mid-arm circumference d) BMI

11. Clinical assessment identifies (a)
a) Visible physical signs of deficiency b) Genetic variations c) Food intake
d) Behavioural changes

12. Institutional diet survey involves (b)
a) Households b) Hospitals and hostels c) Market stalls
d) School teachers only

13. A national diet survey is useful for (a)
a) Policy planning b) Single patient diagnosis c) Personal counselling
d) BMI calculation

14. The main goal of nutrition education is (d)
a) To measure height and weight b) To supply free food
c) To test nutrients d) To change food habits and improve health

15. The first step in a nutrition education programme is (a)
a) Planning b) Implementation c) Evaluation d) Feedback

16. Nutrition education messages should be (b)
a) Complex and detailed b) Simple and action-oriented c) Technical and long
d) Only visual

17. IEC stands for (a)
a) Information, Education, Communication b) Indian Education Commission
c) International Evaluation Council d) Institutional Education Cell

18. Interpersonal communication is most effective for (d)
a) Group meetings b) Individual counselling c) Poster display
d) Mass education

19. A health administrator's primary role is (a)
a) Supervising health services and nutrition programmes b) Conducting lab tests c) Planning diets for individuals d) Preparing posters only

20. A nutrition education programme is evaluated based on (a)
a) Knowledge, attitude, and practice change b) Number of posters used
c) Cost of materials d) Staff attendance

21. Visual aids like charts and posters are examples of (b)
a) Audiovisual aids b) Teaching aids c) Electronic communication
d) Oral communication

22. Health administration ensures (a)
a) Coordination of health and nutrition services b) Classroom teaching c) Food production d) Recipe standardization

23. The main aim of community nutrition education is (c)
a) Cooking skill development b) Nutrition lab research c) Behaviour change
d) Food marketing

24. Which of the following is a method of nutrition education? (a)
a) Exhibition b) Diet survey c) Anthropometry d) Biochemical test

25. The success of a health programme mainly depends on (d)
a) Funds only b) Number of staff c) Number of posters
d) Community participation

Fill in the Blanks

1. BMI stands for **Body Mass Index**.
2. **Anthropometry** is the measurement of body dimensions.
3. **Mid-arm circumference** assesses muscle and fat reserves.
4. Gomez classification is based on **weight-for-age**.
5. **Waterlow's classification** identifies the degree of malnutrition.

6. **ICMR** gives reference standards for the Indian population.
7. **NCHS** standards are based on American data.
8. **Skinfold thickness** measures body fat stores.
9. **Biochemical methods** help detect early deficiencies.
10. **Clinical assessment** identifies visible deficiency symptoms.
11. Examples of biomarkers include **vitamin A, folate, calcium**.
12. **Diet surveys** estimate food and nutrient intake.
13. **WHO** provides international growth reference standards.
14. The main goal of nutrition education is to **promote healthy food habits**.
15. **IEC** stands for Information, Education, and Communication.
16. The first step in nutrition education is **planning**.
17. Effective nutrition messages should be **clear and simple**.
18. **Posters and charts** are examples of visual aids.
19. **Interpersonal communication** is effective for one-on-one teaching.
20. **Health administration** coordinates community health services.
21. **Evaluation** measures the success of a nutrition programme.
22. **Nutrition education** links knowledge to practice.
23. **Community participation** ensures sustainability of programmes.
24. **Motivation and education** lead to lasting behaviour change.
25. **Health promotion** is the ultimate goal of all nutrition programmes.

Descriptive Questions

1. Explain the different methods of nutritional assessment used in a community.
2. Describe the uses and limitations of anthropometric and biochemical methods.
3. Discuss clinical and dietary assessment methods with examples of biomarkers.
4. Define nutrition education and explain its importance, principles, and methods.
5. Discuss the role of health administration in planning and implementing community nutrition programmes.