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Automated Self-Administered 24-hour Dietary Recall (ASA 24)

Availability:	Freely available. For more information, please visit website: http://appliedresearch.cancer.gov/asa24/
Classification:	Supplemental – Highly Recommended: Mitochondrial Disease (Mito) <ul style="list-style-type: none"> • Highly recommended for studies that require dietary assessments.
Description of Instrument:	<p>ASA24 is a freely-available web-based software tool that enables automated and self-administered 24-hour dietary recalls.</p> <p>ASA24 can be used by researchers for epidemiologic, intervention, behavioral, or clinical research. Clinicians may use ASA24 for diet assessment and nutrition counseling, and educators may find it to be a useful teaching tool.</p> <p>ASA24 consists of a Respondent Web site used to collect recall data and a Researcher Web site used to manage study logistics and obtain data analyses. Two Respondent Web sites (English and Spanish) are currently available for registering new studies: ASA24-2014 (for adults) and ASA24-Kids-2014.</p> <p>The ASA24 was developed to enhance the feasibility of collecting high-quality dietary intake data from large samples.</p> <p>ASA24 uses an animated guide and audio and visual cues to guide respondents through a 24-hour recall for the previous day from midnight to midnight or for the past 24 hours (depending on researcher preferences). Respondents report foods and drinks by browsing categories or searching from a list of foods and drinks available from the USDA’s Food and Nutrient Database for Dietary Studies (FNDDS).</p> <p>The ASA24 Respondent Web site:</p> <ul style="list-style-type: none"> • Can be accessed in English or Spanish • Asks respondents to report eating occasion and time of consumption • Includes optional modules to query where meals were eaten, whether meals were eaten alone or with others, television and computer use during meals, and source of each food or drink • Uses images to assist respondents in reporting portion size • Allows the respondent to add or modify food and drink choices at multiple points and includes a final review and list of frequently forgotten foods • Includes an optional module to query dietary supplement intake based on supplements reported in the 2007-08 National Health and Nutrition Examination Survey (NHANES).

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Comments/Special instructions:	<p>The steps in the interview process include:</p> <ol style="list-style-type: none"> 1. Meal-based Quick List 2. Meal Gap Review 3. Detail Pass 4. Forgotten Foods 5. Final Review 6. Last Chance 7. Usual Intake Question 8. Supplement Module (if selected by the researcher) <p>Resulting data files available on the Researcher Web site include nutrients, foods, food groups, and variables to calculate Healthy Eating Index scores. ASA24 does not provide feedback to users; rather, researchers can obtain data files and contact users with any findings they choose to share.</p> <p>If a study includes both adults and children and the researcher wishes to use multiple versions of the ASA24 Respondent Web site (e.g., ASA24-2014 and ASA24-Kids-2014), a study would need to be registered for each version.</p>
Rationale/Justification:	<p>Strengths/Weaknesses:</p> <p>The ASA24 was developed for use in the U.S. As such, the foods included reflect those consumed by the U.S. population and may not be applicable internationally. For studies conducted outside of the U.S., researchers may need to identify an instrument that includes foods typical of their population.</p> <p>Resources for study staff and participants, frequently asked questions, and ready-to-use language about ASA24 to include in funding applications are among the useful materials available on the website. A demonstration version of ASA24 is also available to familiarize study staff with the instrument.</p> <p>Advantages/Limitations:</p> <p>ASA24 is available free of charge to researchers, clinicians, and teachers. However, there are costs to consider when planning a study that uses ASA24. This includes system and labor costs associated with uploading study details and the costs associated with contacting and monitoring respondents, assessing data quality, and analyzing data.</p>

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References:

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