

Question		A	B	C	D	E
I.	How do you and your child feel about overall impression of our system? (1: hate - 3: neutral - 5: like)	5	5	5	5	4
II.	Is the Sensing Fork easy to hold and poke for your child? (1: difficult - 3: neutral - 5: easy)	2	5	5	4	3
III.	How did you feel about recognition accuracies of eating actions and colors? (1: poor - 3: neutral - 5: good)	3	4	3	3	3
IV.	Did our system affect your child's eating behavior? (1: negative - 3: neutral - 5: positive)	4	4	5	5	4
V.	Did you and your child feel uncomfortable when our system was on the dining table? (1: much - 3: neutral - 5: not at all)	3	5	5	3	5
VI.	Do you think our system might disturb the communication among family members? (1: much - 3: neutral - 5: not at all)	5	5	5	5	5
VII.	How did you and your child feel when the panda cried? (1: negative - 3: neutral - 5: positive)	5	4	5	5	4