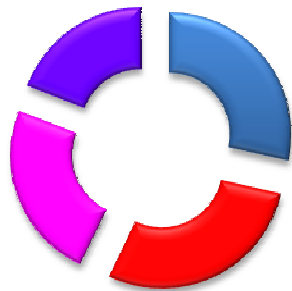


# Asilo nido Ilulo (n° schede 21)

## Età dei bambini/e (espressa in mesi)



20-24 mesi

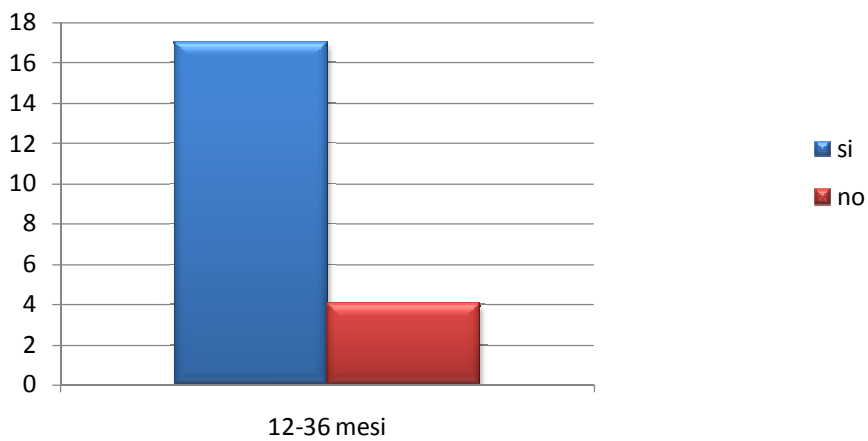
25-28 mesi

29-32 mesi

33-35 mesi

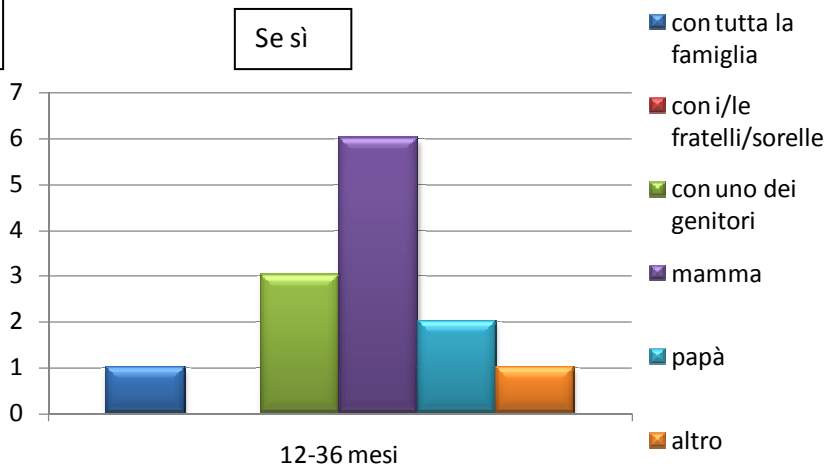
1

Tuo/a figlio/a consuma la prima colazione a casa insieme agli altri membri della famiglia?



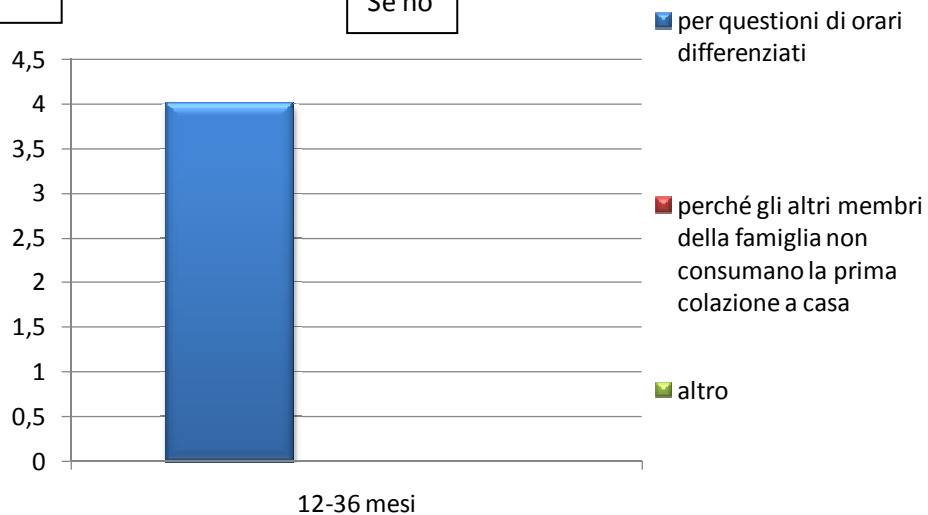
1a

Se sì



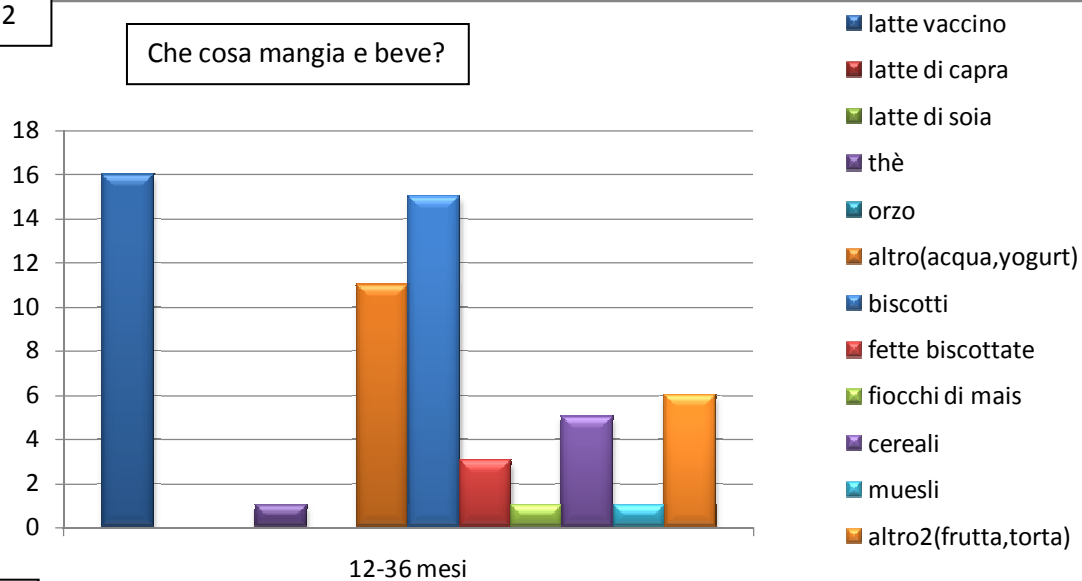
1b

Se no



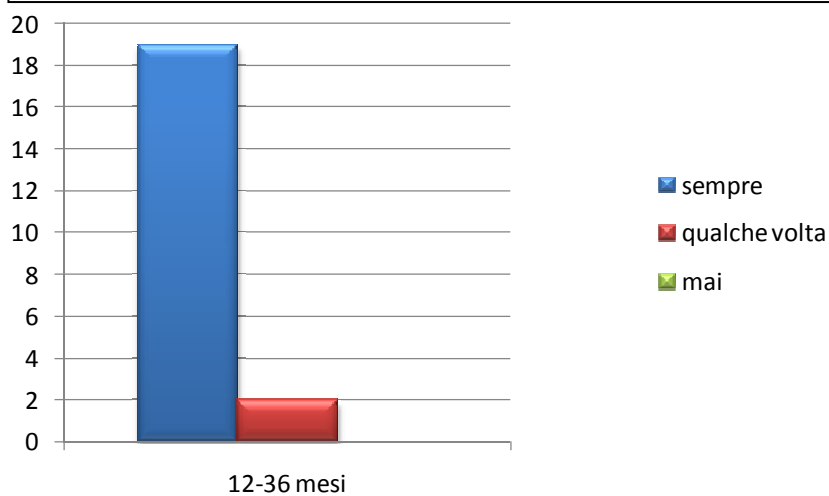
2

Che cosa mangia e beve?



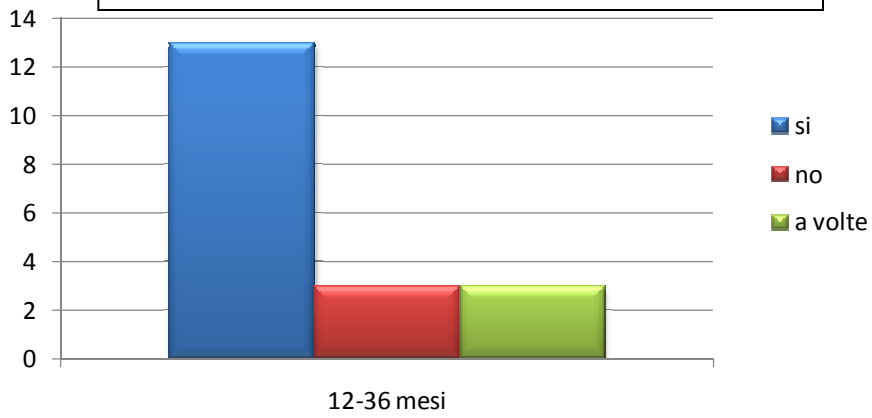
3

I componenti della famiglia consumano la prima colazione a casa?



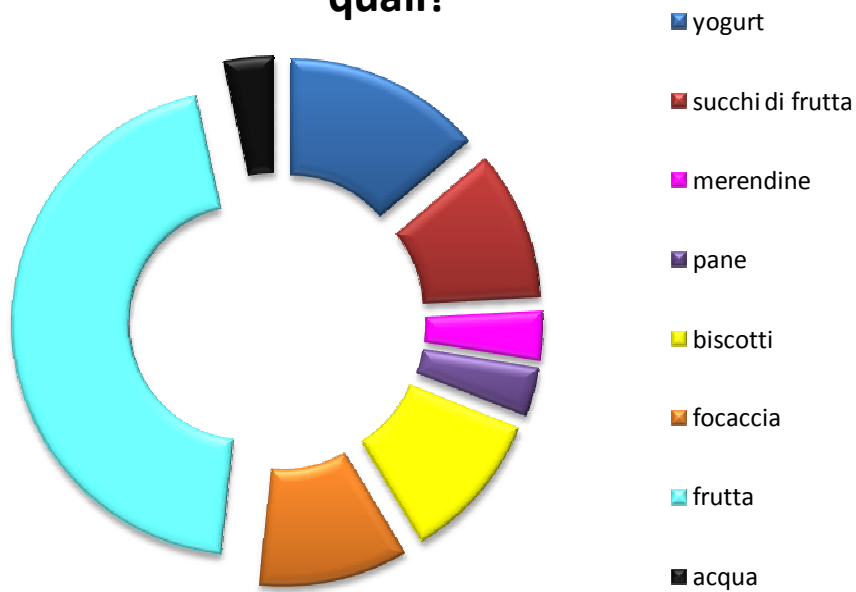
4

Tuo/a figlio/a consuma qualche altro spuntino o bevanda tra la prima colazione e il pranzo?



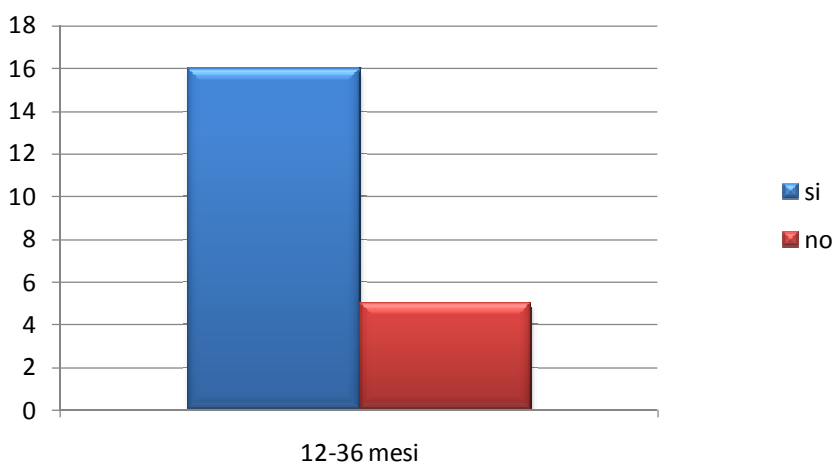
5

quali?



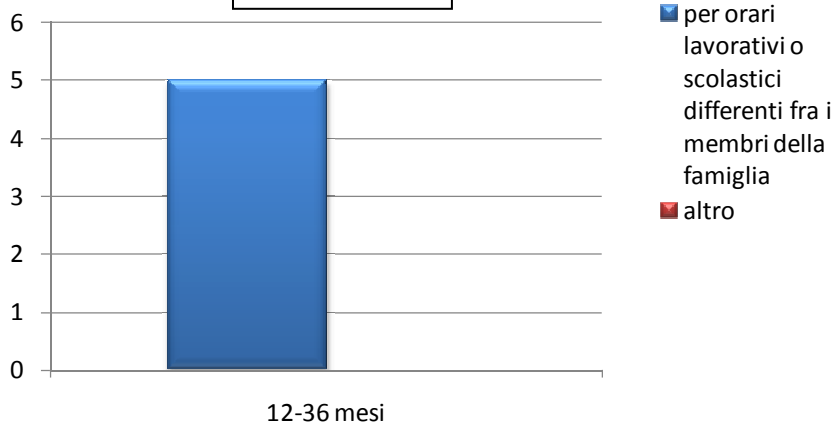
6

I pasti vengono consumati sempre allo stesso orario e in comune?



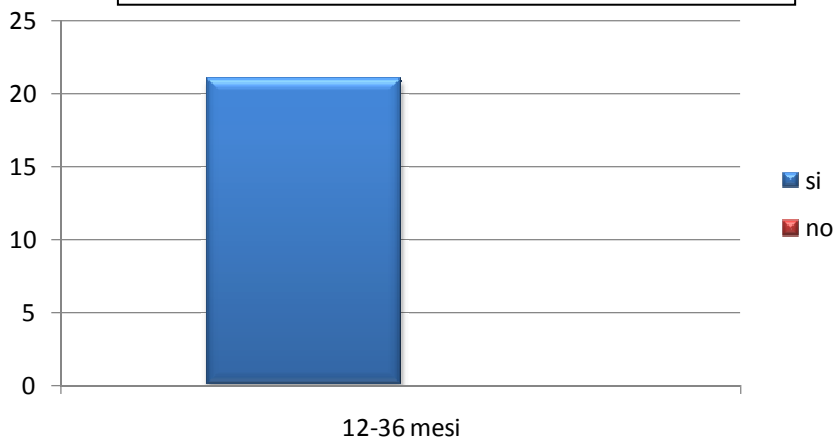
6a

Se no, perché?



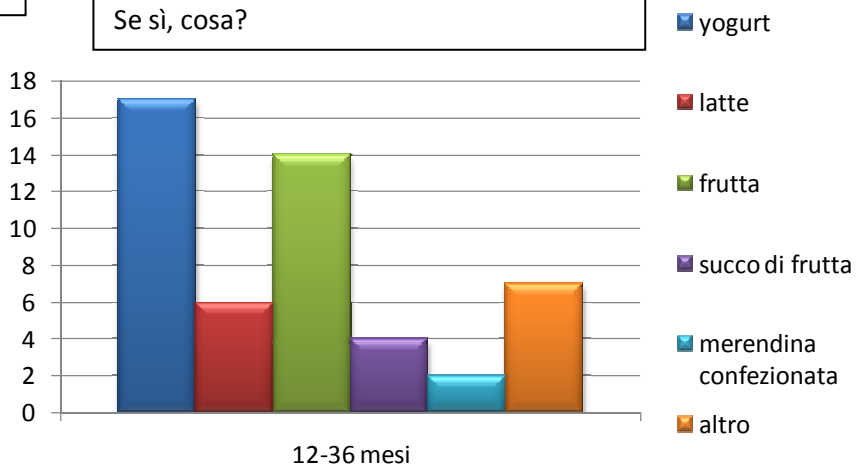
7

Tuo/a figlio/a fa merenda (tra pranzo e cena)?



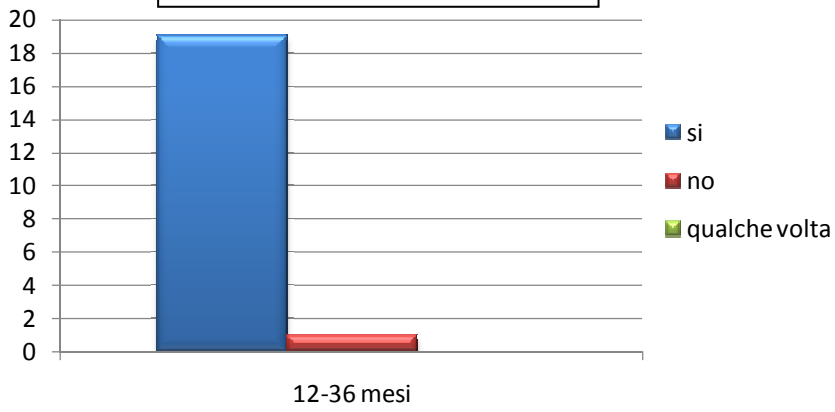
7a

Se sì, cosa?



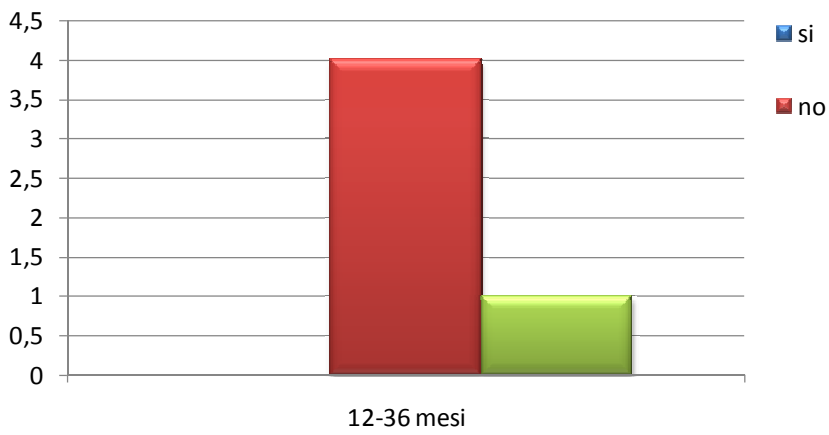
8

I pasti vengono preparati a casa?



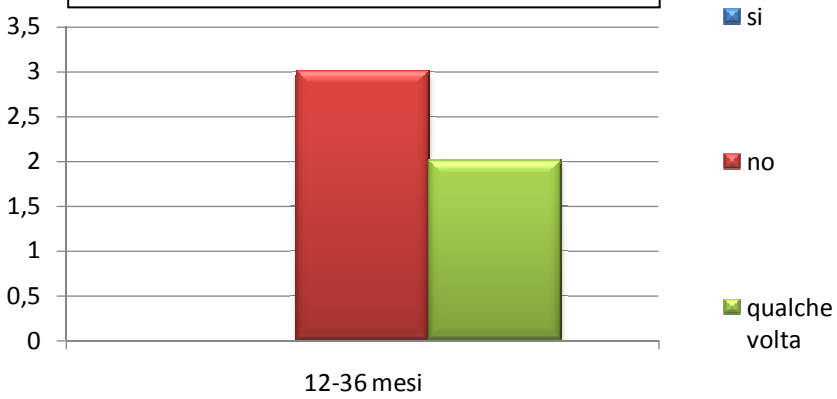
8a

Se no, si usa un pasto confezionato?



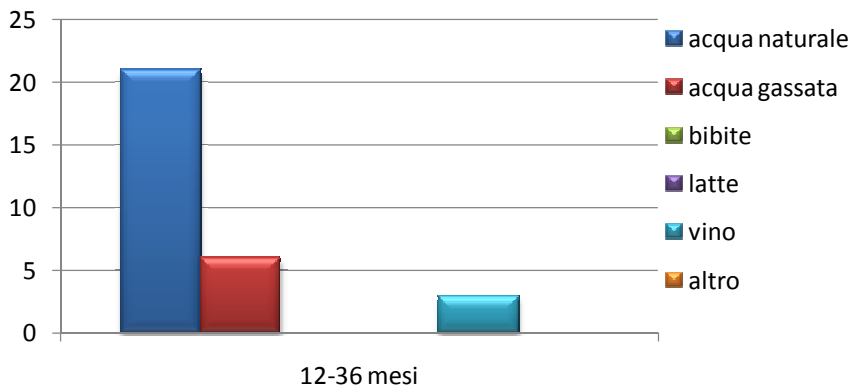
8b

Se no, si compra il pasto in rosticceria?



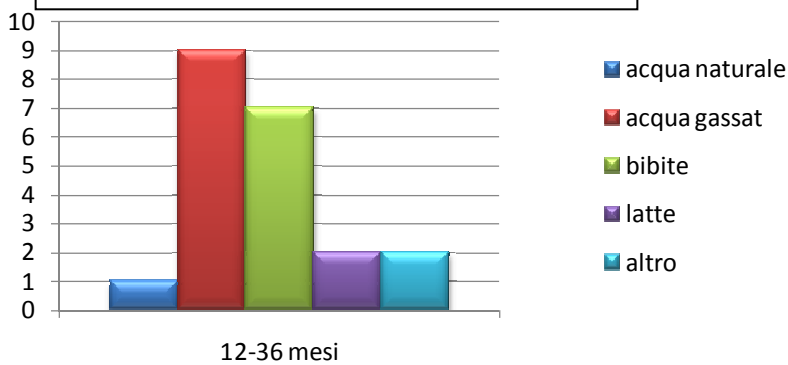
9

Quali bevande consumate ai pasti?



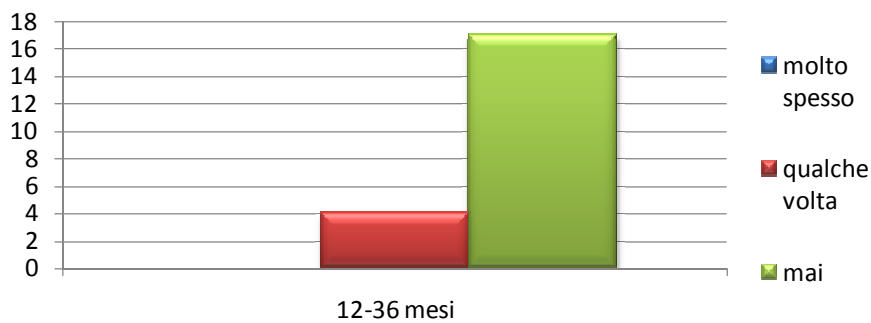
10

Quali bevande vengono rifiutate da tuo figlio?



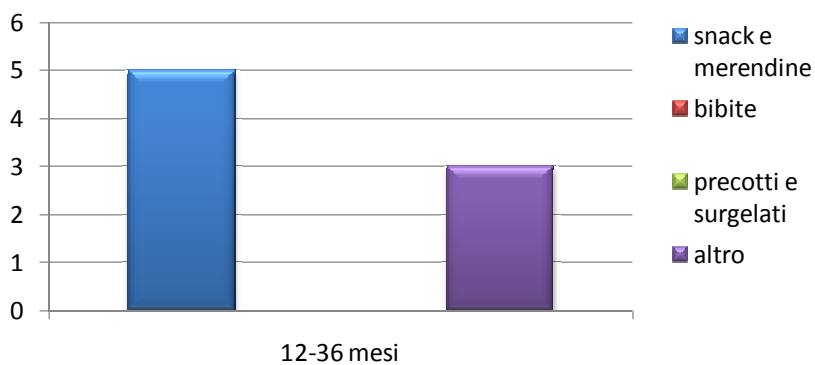
11

Tuo/a figlio/a chiede di consumare prodotti reclamizzati dalla TV?



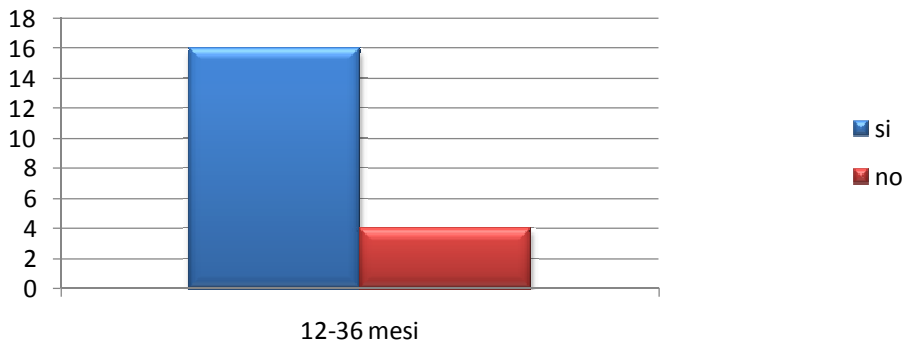
12

Quali sono maggiormente richiesti?



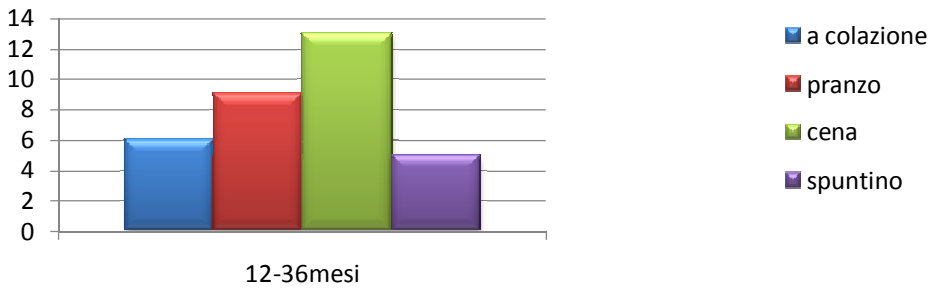
13

Ti capita di far guardare la TV a tuo/a figlio/a mentre mangia?



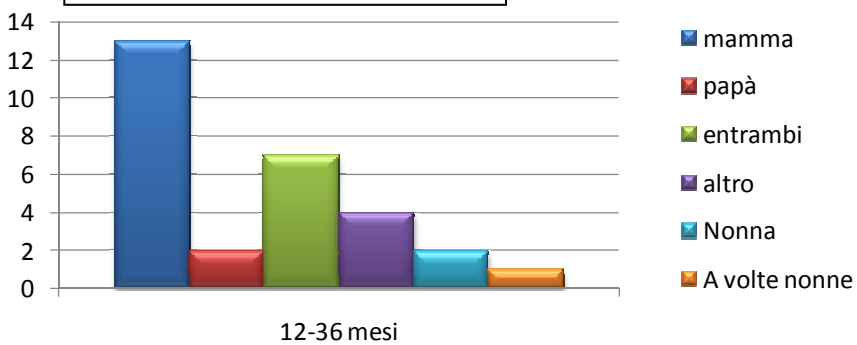
13a

Se sì?



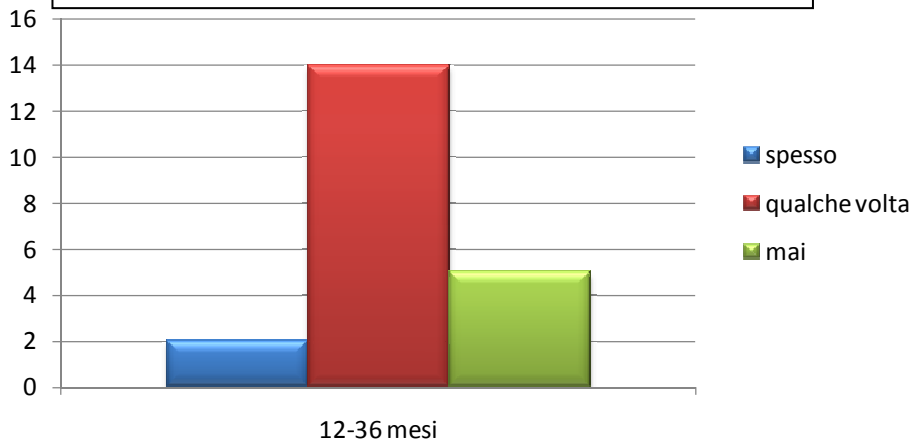
14

Chi prepara i pasti a casa?



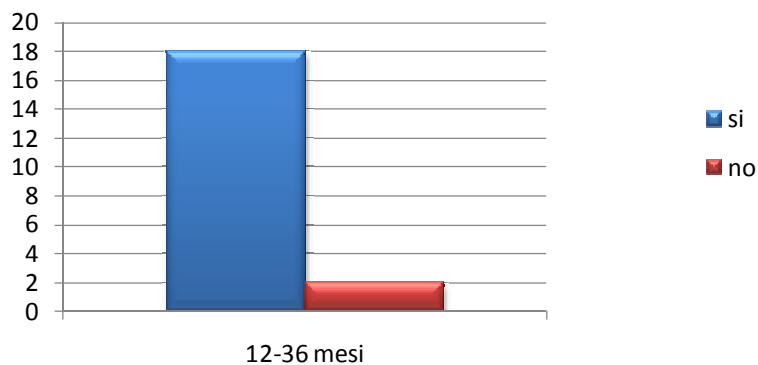
15

Inizi a coinvolgere tuo/a figlio/a nella preparazione dei cibi?



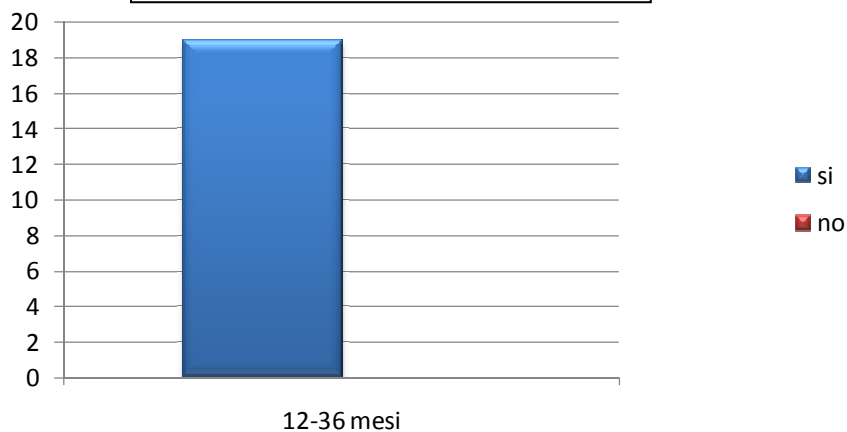
16

Preparate piatti della cucina tradizionale della vostra zona?



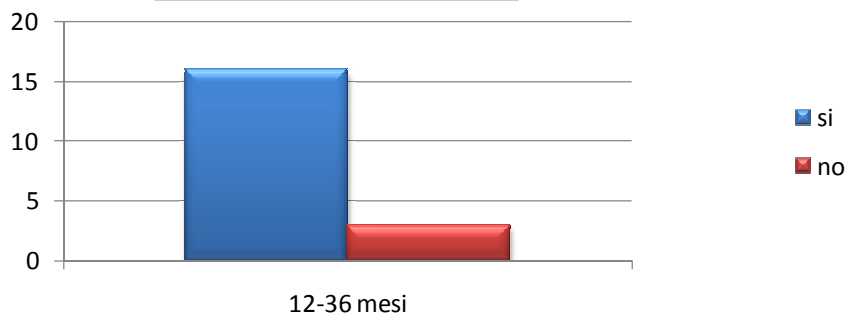
16a

Se sì, li proponi a tuo/a figlio/a?



16b

Li gradisce?



16c

quali?

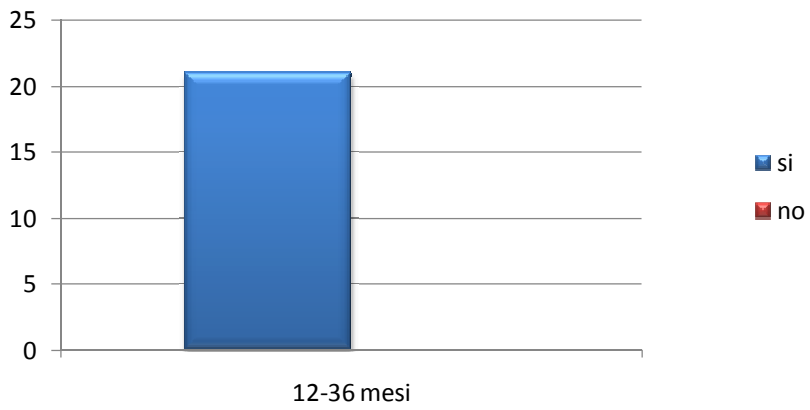


- Pasta
- pesce
- zuppe
- Matuffi
- Trabaccolara
- dolci
- fagioli
- fiorentina
- piatti semplici
- panzanella
- torta di pane
- cacciucco
- coniglio arrosto e in umido
- pappa al pomodoro
- cecina
- pollo arrosto
- tordelli
- patate al forno



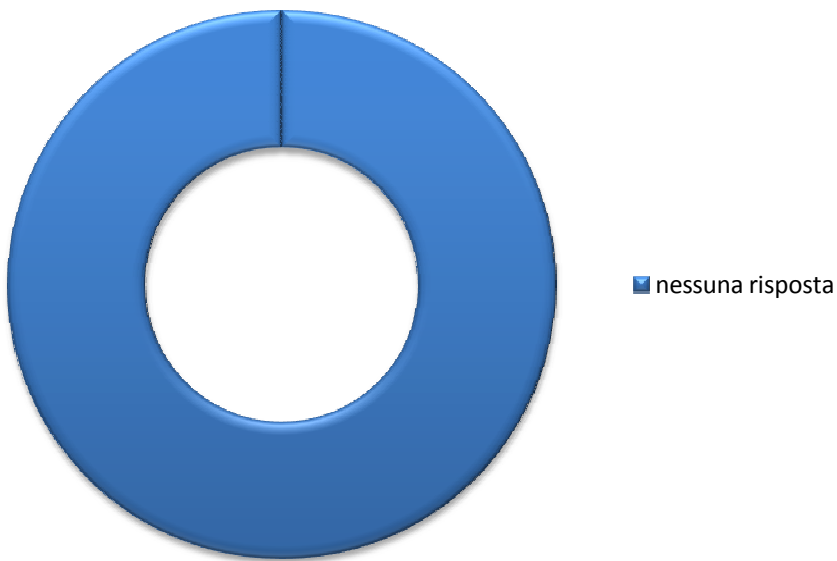
17

Pensi che la tua famiglia segua uno stile alimentare corretto?



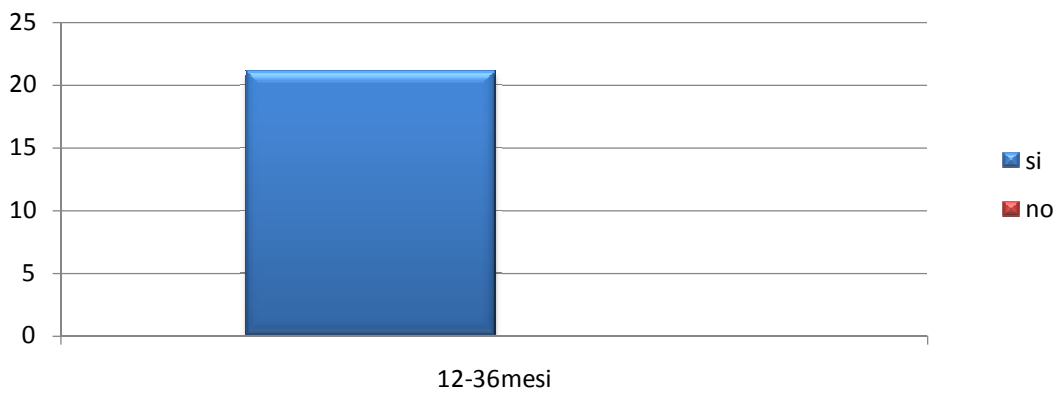
17a

Se no, qual è il motivo fondamentale?



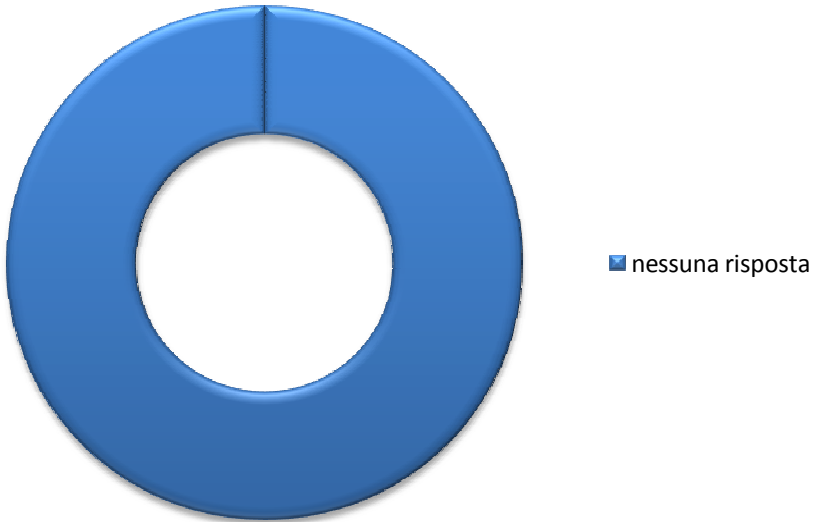
18

Pensi di seguire uno stile alimentare corretto per la crescita e lo sviluppo di tuo/a figlio/a?



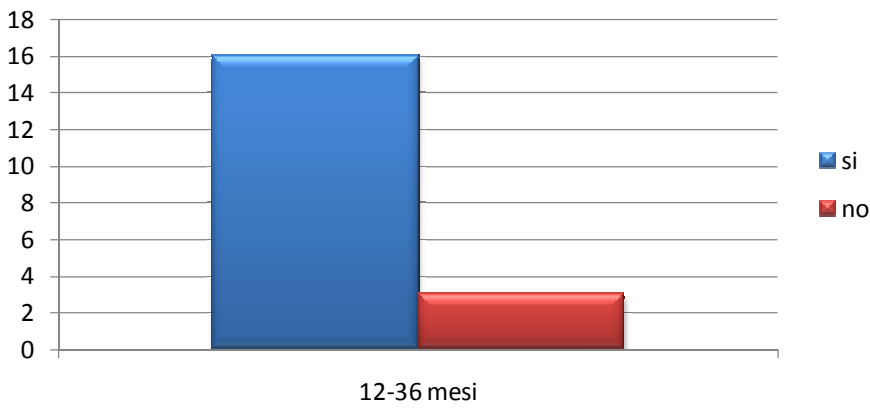
18a

Se no, qual è il motivo fondamentale?



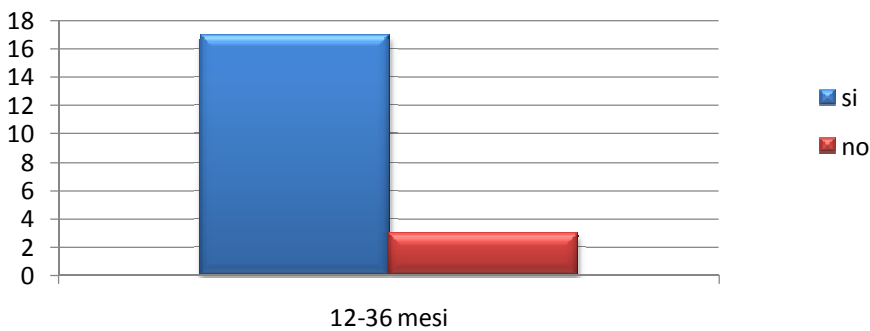
19

In genere sei soddisfatto di come si comporta tuo/a figlio/a con il cibo?



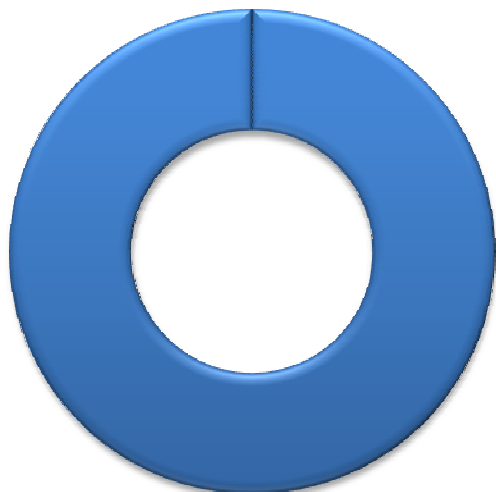
20

Pensi che tuo/a figlio/a mastichi bene, assapori con calma, gusti lentamente, abbia piacere del cibo?



20a

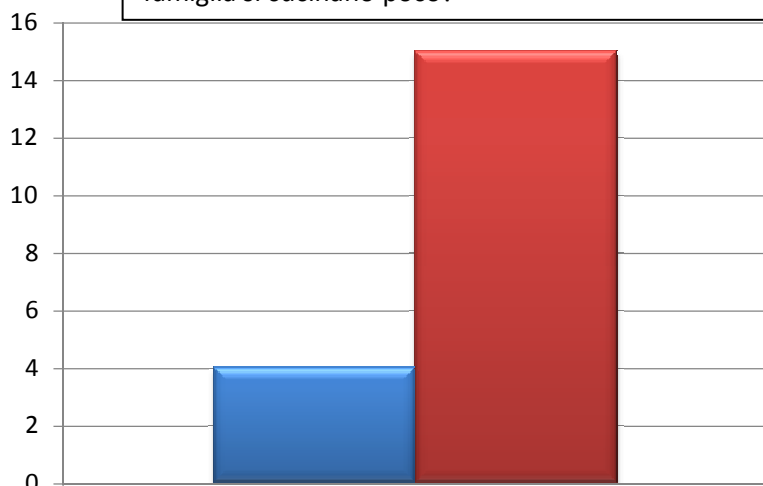
Se no per quale motivo?



■ A volte ha fretta di mangiare

21

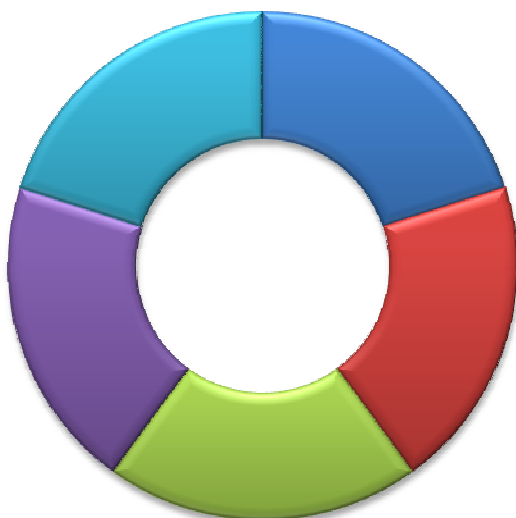
Ci sono cibi che piacciono a tuo/a figlio/a, ma che in famiglia si cucinano poco?



12-36 mesi

■ si  
■ no

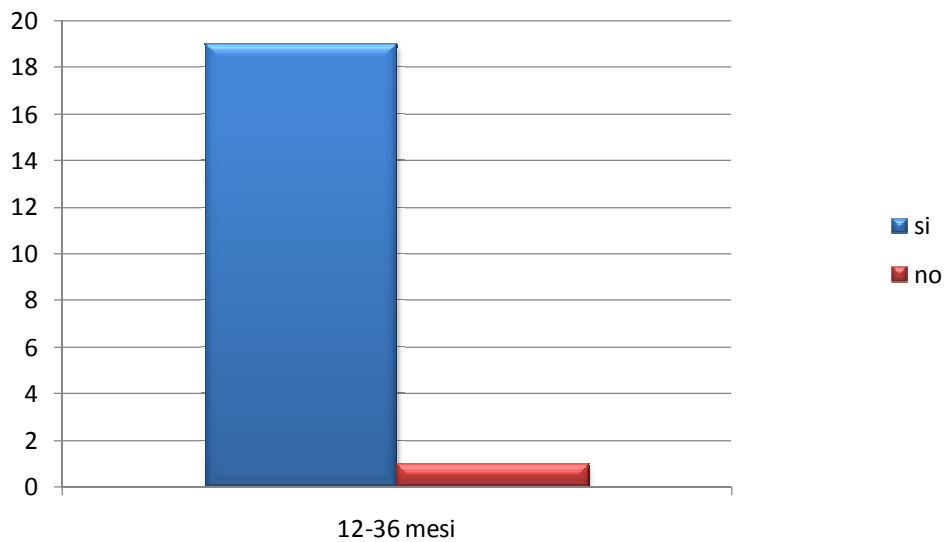
quali?



■ pesce  
■ patatine fritte  
■ lasagne al forno  
■ uova  
■ polenta

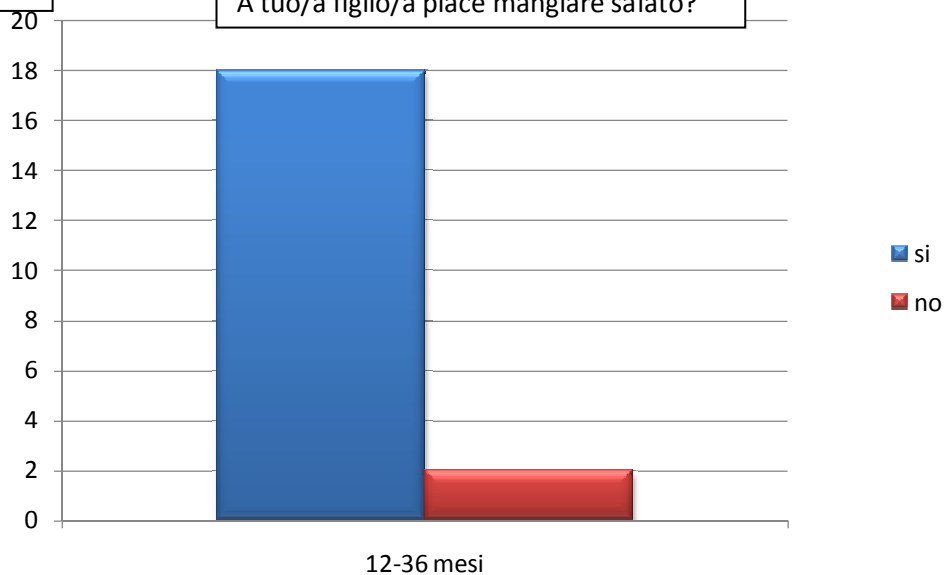
22

A tuo/a figlio/a piace il dolce e mangiare dolci vari?



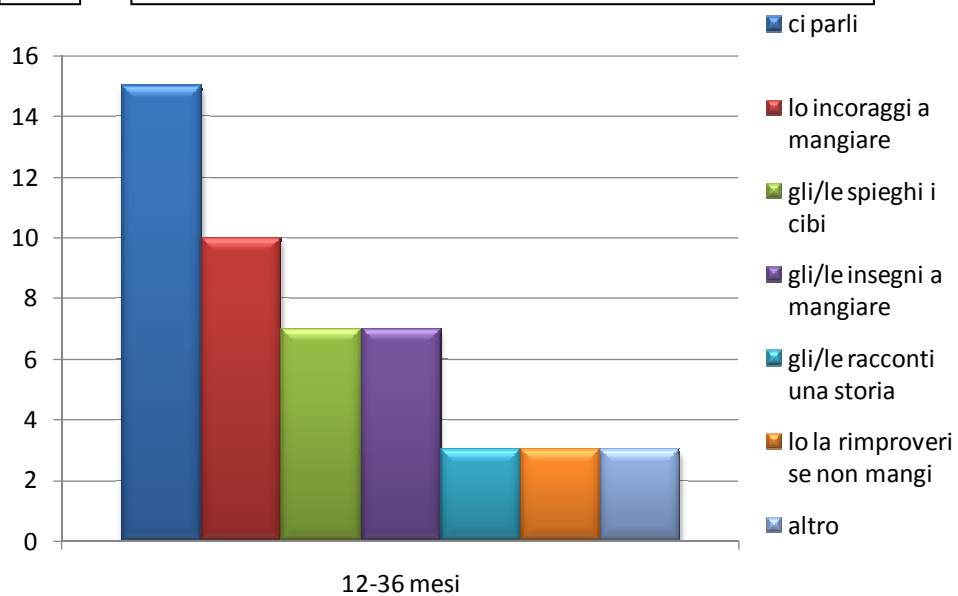
23

A tuo/a figlio/a piace mangiare salato?



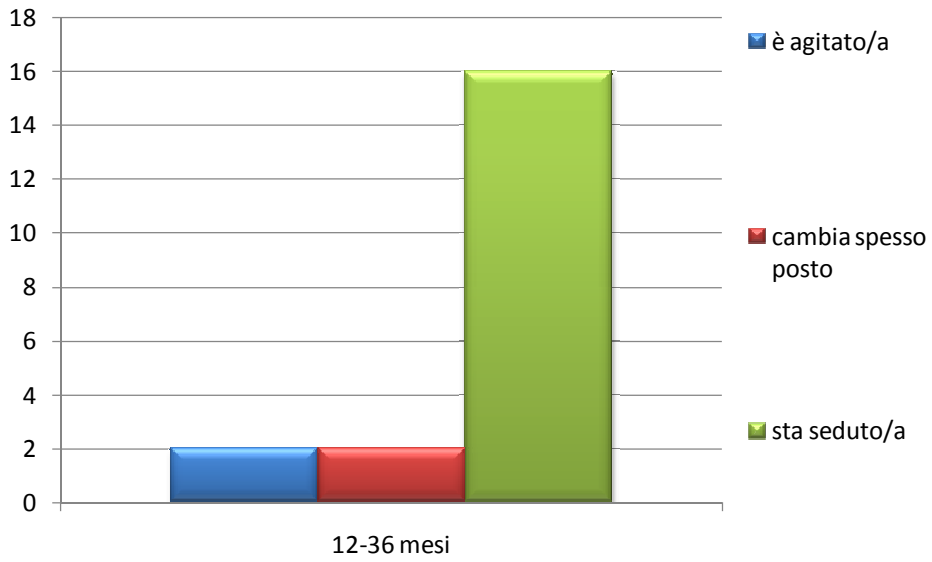
24

Mentre dai da mangiare a tuo/a figlio/a come ti comporti?



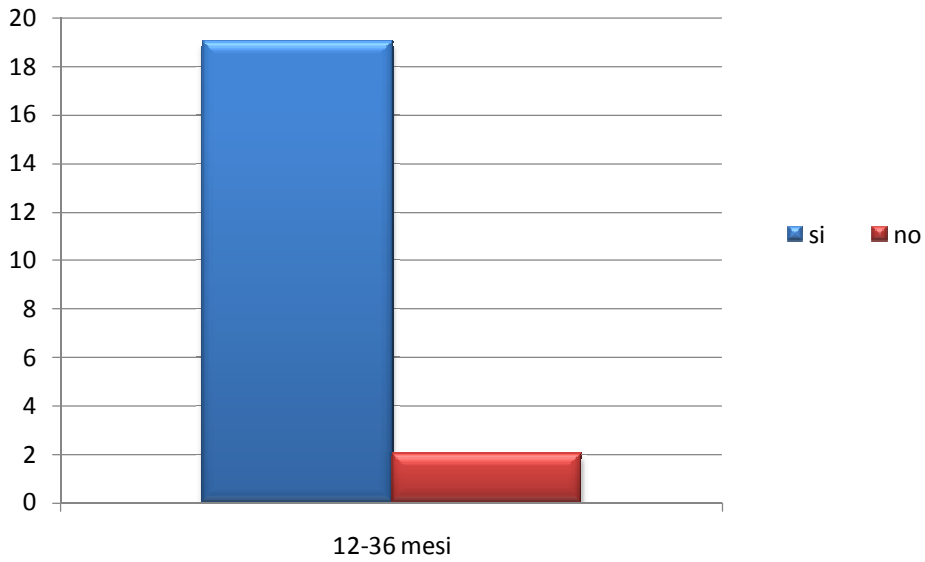
25

Durante il pasto come si comporta?



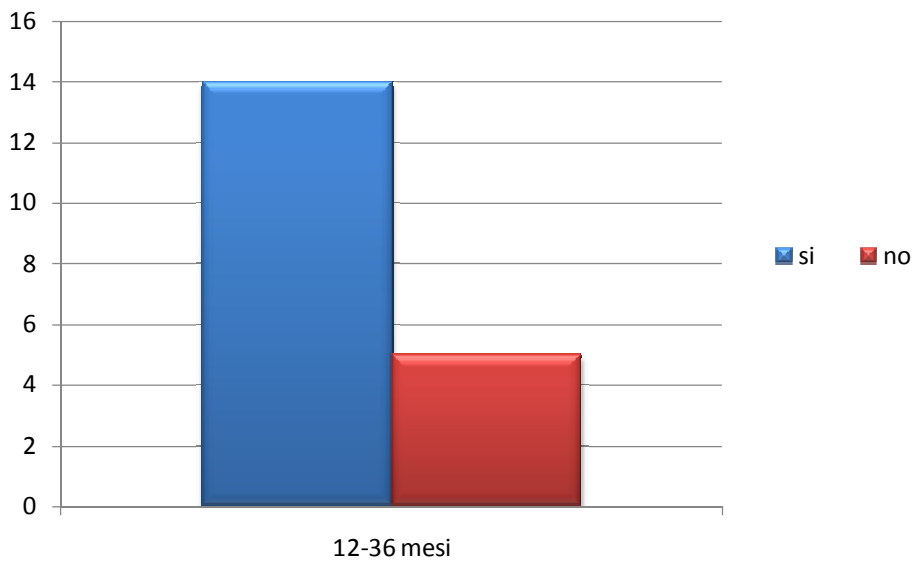
26

Mangia volentieri?



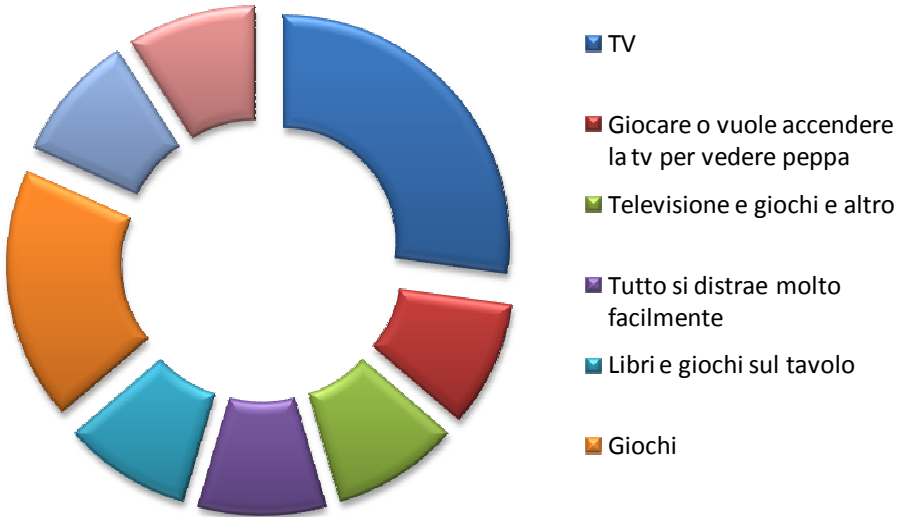
27

Dimostra interesse per altro?



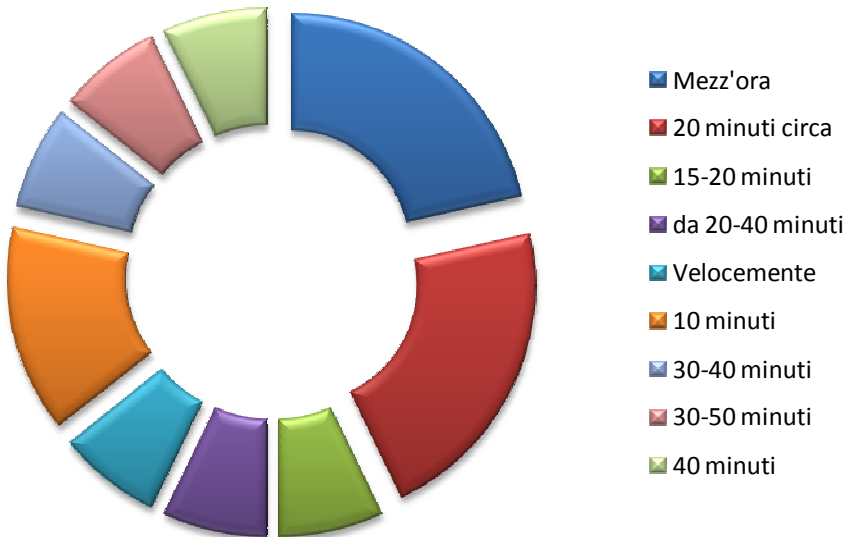
27a

## se sì, cosa?



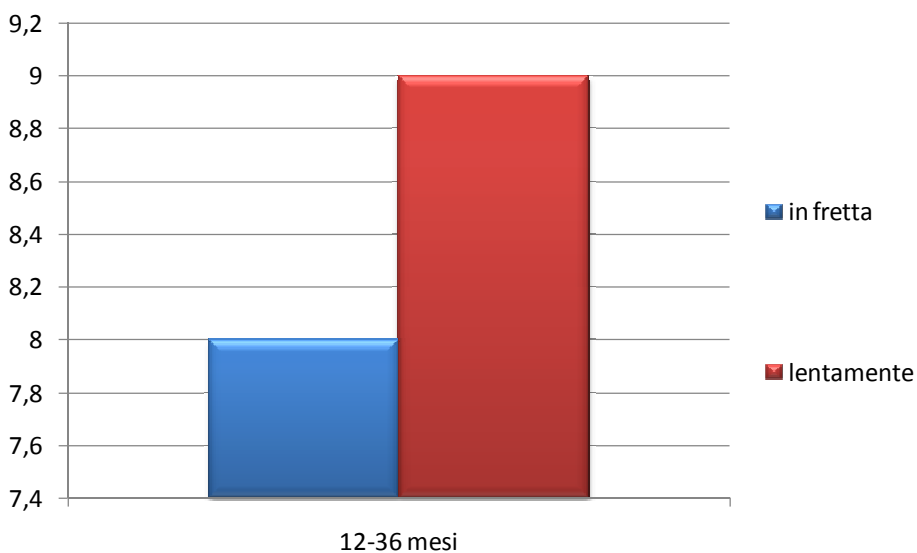
33

## in quanto tempo consuma il pasto?



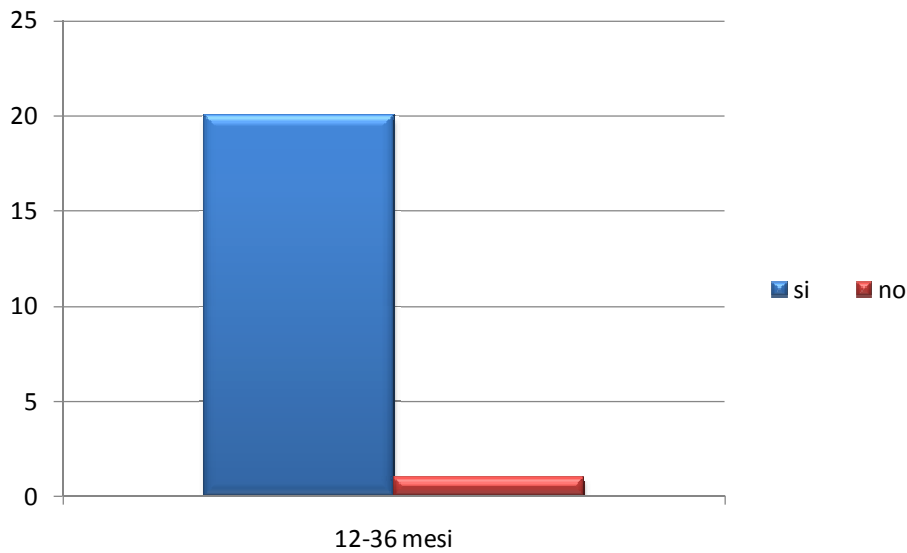
34

## Come mangia?



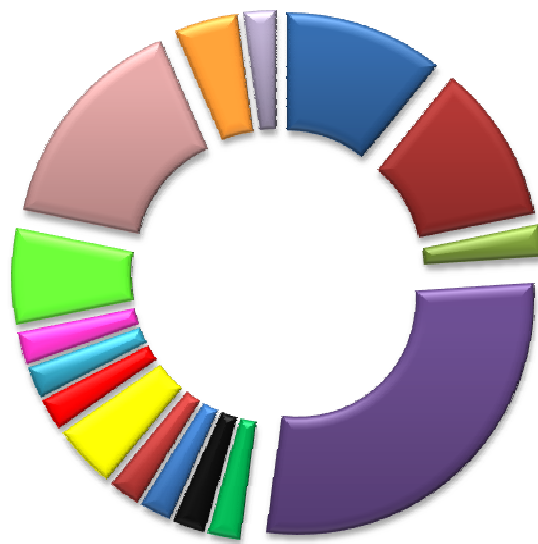
35

Preferisce alcuni cibi?



35a

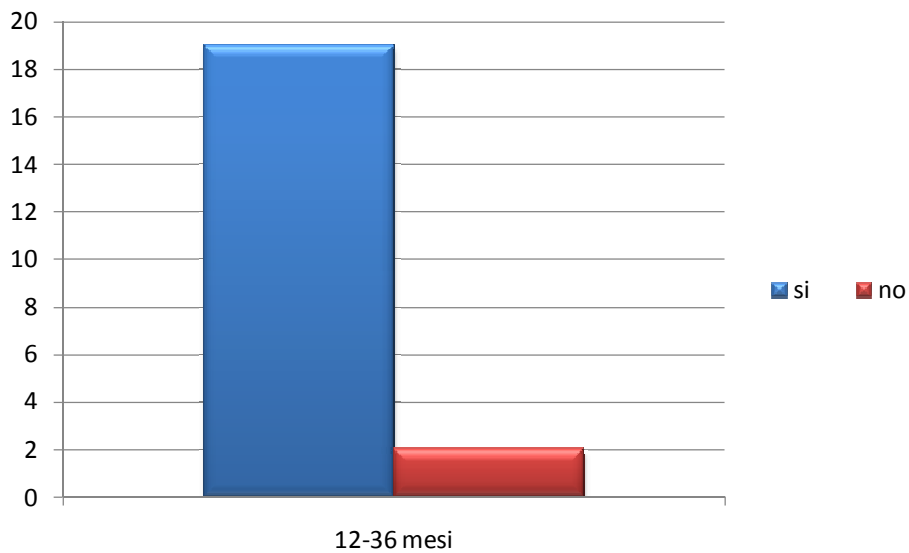
se sì, quali?



- Pesce
- Frutta
- Uova
- Pasta
- Sugo di Carne
- Sformato di Verdure
- Riso
- Polpette
- Pizza
- patate
- Yogurt
- Focaccia croccante
- Parmigiano
- Carne
- dolci
- zuppa

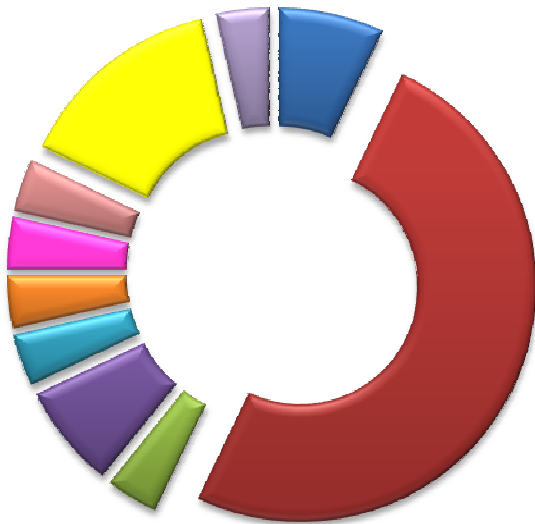
36

Rifiuta alcuni cibi?



36a

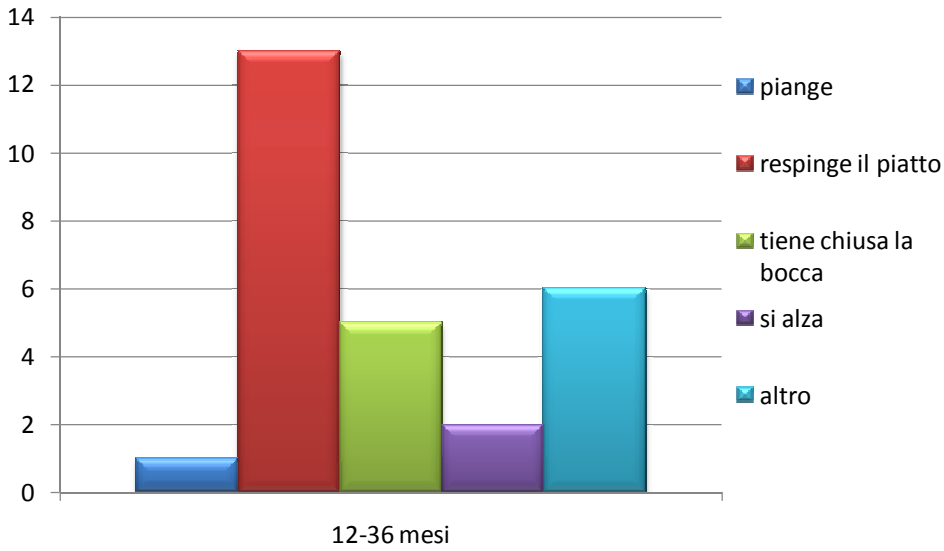
### se sì, quali?



- Patate
- Verdure
- Formaggi duri
- pesce
- Carne rossa
- Sughi elaborati
- Brodo
- fritto
- Contorno in generale
- Polpette

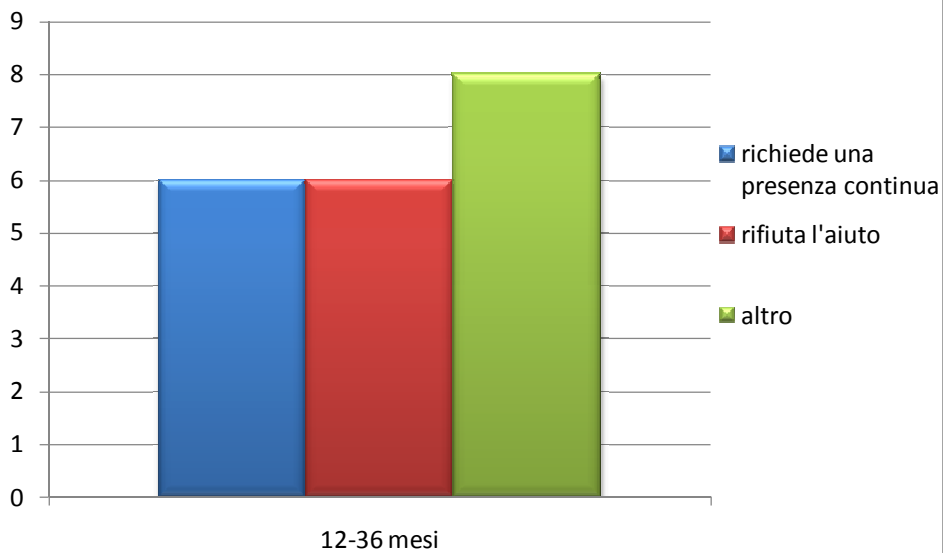
37

### Come manifesta il rifiuto?



38

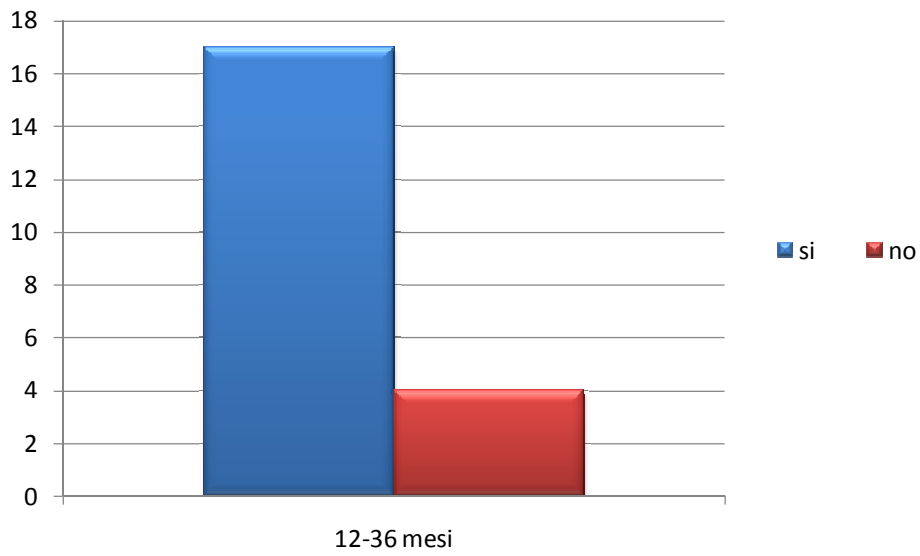
### Come si relaziona con l'adulto?





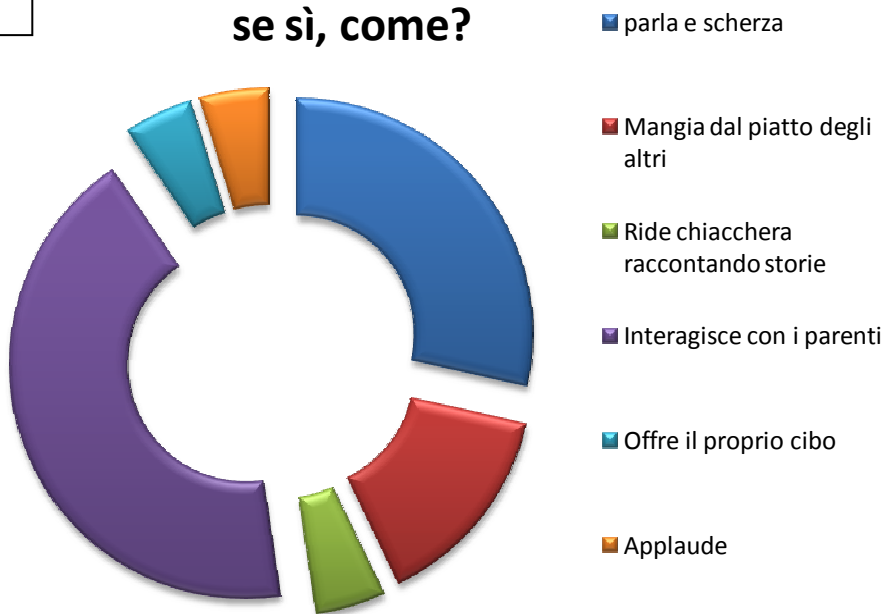
39

Se consuma il pasto insieme ad altri interagisce?



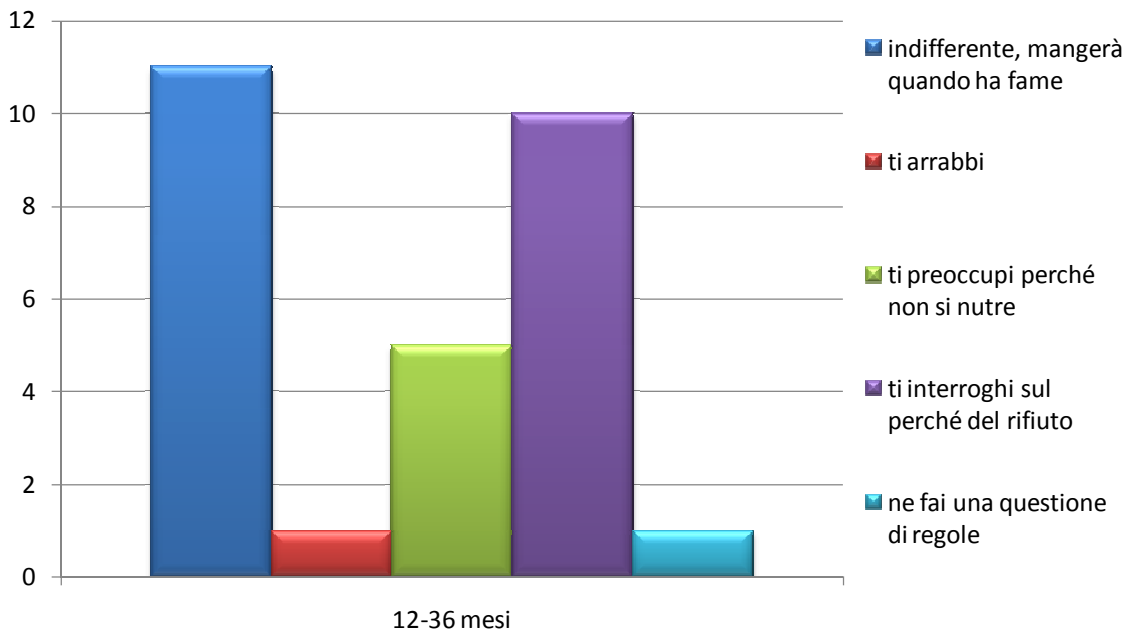
39a

se sì, come?



40

Quando tuo/a figlio/a rifiuta un cibo o una bevanda come ti senti?



40a

**i cibi prevalentemente rifiutati da tuo/a figlio/a sono:**

