

Appendix. Construction of dichotomized variables related to social factors, health, habits, and skills.

Parents' education was defined as low vs. high, where low was no education beyond high school. *Nutritional score* (low vs. high) was based on frequency of different meals and consumption of various food and drink items. A low score was defined as at least three of the following: sweets > 1 day/week, soft drink > 1 day/week, fast food > 1 day/week, breakfast < 4 days/week, vegetables < 2 days/week, and fruit < 5 days/week. *Physical activity score* was defined as lower than peers if the child was inferior to peers on at least one of the three categories frequency, intensity, or endurance. *Any physical health related problem* was defined as “yes” if the child had a current or previously specified chronic somatic illness. The list was extensive. *Dental caries* was included as a proxy for health-related habits and was dichotomized as ever or never had caries. The variable *Difficulties in fine motor, language or social skills or sleep* was based on the parents' evaluation on questions related to developmental skills and habits. The variable was dichotomized to “yes” or “no”, where “yes” meant that the child scored lower than their peers on any of these areas, or if the child had received any professional interventions, i.e. within physiotherapy, speech therapy, psychology, psychiatry, or had received any extra professional support in kindergarten after two years of age. The variable *Behavioural difficulties in the family* was recorded as “yes” if any family member other than the child had ADHD, difficulties with attention or other behavioural difficulties.