

1 **Table S1.** Section of the questionnaire about oral health knowledge.

1. How many milk teeth do we have?	10 20 32
2. How many permanent teeth do we have?	20 28 32
3. What are the most common diseases affecting oral cavity?	Dental caries and periodontal disease Asthma and common cold Herpes Simplex infection
4. What is the reason for bleeding gums?	Not cleaning regularly and deposition of debris Eating hard food The use of soft picks
5. What is fluoride?	A substance that purifies water A substance that improves taste of food A chemical substance in water that prevent dental caries
6. Tooth plaque:	Contains bacteria which damages enamel and gums Is sticky, colorless film that protects teeth and gums Can't be removed with toothbrush
7. Tartar:	Can be removed with ultrasonic scaling Can be removed with interproximal floss Can be removed with the toothbrush
8. Deciduous (or milk) teeth:	Can be affected by caries Can't be affected by caries Can be affected by caries but does not need to be cured

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Table S2. Section of the questionnaire about oral health practices.

1. How do you clean your teeth?	Toothbrush only Dental floss only Both
2. How often do you clean your teeth?	Occasionally Twice or more daily Once daily
3. How long do you brush your teeth?	30 seconds 1 minute 2 ore more minutes
4. Do you rinse your mouth after meals?	Yes, after each meal Yes, after some meals No
5. How do you brush your teeth?	I am not focused in the movements I do Horizontal movement Vertical/circular movement
6. Where do you brush your teeth?	Only the outer surfaces The outer, the inner and occlusal surfaces Only occlusal part of the crown
7. How often do you change your toothbrush?	After 1-2 months After more than 2 months When bristles flare out
8. Do you clean your tongue?	Yes No Sometimes

Table S3. Section of the questionnaire about dietary habits.

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| 1. How many times a day do you eat during the day? | 3 times (Breakfast/lunch/dinner)
Between 3 and 5 times
Each time I feel hungry (more than five times) |
| 2. Do you snack between meals? | Never
Occasionally (1-2 times per week)
Regularly (each day) |
| 3. How often do you eat snack between meals? | Once a day
Twice a day
More than twice a day |
| 4. What type of snacks do you eat between meals? | Cakes/sweets
Fruit/yogurt
Crackers/sandwiches |
| 5. How often do you consume milk and milk products? | Never
Occasionally
Regularly |
| 6. How often do you eat fruit and vegetables? | Never
Occasionally
Regularly |
| 7. How often do you eat fast food? | Never
Occasionally
Regularly |
| 8. How often do you drink soft drinks (Coke, fruit juice)? | Never
Occasionally
Regularly |