Domain 1: Research team and reflexivity		**Lines**
Personal Characteristics		
1. Interviewer/ facilitator	Trained and guided by the project supervisor (AEG) in PAR methodologies and ethical responsibilities, the research team conducted interviews, facilitated focus group discussions, and supported other researchers throughout the study.	168-203
2. Credentials	The research team comprised six female researchers: one supervisor (AEG), who is a dental hygienist, medical anthropologist, action researcher (MSc), two dental hygiene students, and three dental students.	168-171
3. Occupation	Next to being a dental hygienist, the main researcher is a PhD student, and her team members were MA or BA students.	168-171
4. Gender	The research team comprised six female researchers.	168-171
5. Experience and training	The main researcher, with 20 years of experience as a dental hygienist and 10 years as a medical anthropologist, provided training to the team on PAR methodologies and ethical responsibilities. She also offered guidance throughout the project.	168-177
Relationship with participants		
6. Relationship established	Community involvement was fostered, and rapport was built. Over 8 months, the research team actively engaged with the SW-neighbourhood, immersing themselves in its context and the children's living environment through participant observation and involvement in local activities at both the primary school and the community centre.	171-177
7. Participant knowledge of the interviewer	Participants were informed that The Healthy Teeth Foundation (THTF), founded by AEG,	809-811

	supported the study through labour and manpower. THTF is a non-profit organization committed to enhancing children's oral health.	
8. Interviewer characteristics	The reported characteristics of the main researcher include her roles as a dental hygienist, medical anthropologist, and action researcher, as well as her position as the founder of The Healthy Teeth Foundation (THTF), a non-profit organization.	168-171 & 809-811
Domain 2: study design		
Theoretical framework		
9. Methodological orientation and theory	The methodological orientation used with the children was participatory analysis resulting in a 'problem tree'. During the final analysis a thematic analysis from Braun and Clarke [2014, 2016] was used. The final themes were structured according to the Fisher-Owens model: child-level, family-level, and community-level influences on children's oral health [2007].	288-305
Participant selection		
10. Sampling	Study participants were selected using purposive sampling.	148
11. Method of approach	Children in grades 4–6 (ages 9–13) were invited to participate with through information letters.	150-151
12. Sample size	The study used a PAR approach involving 9 focus group discussions (FGDs) with 45 children, in-depth interviews with 4 children, 3 informal conversations with adult stakeholders (the school's principal, a teacher, and a women's group 'SW mothers' consisting of 24 women), participant observation in the neighbourhood, and food diaries from 7 children to verify and confirm the information received from the children.	161-165

13. Non-participation	Written informed consent was obtained prior to participation for all participants and parental written informed consent was obtained for all children under the age of 16. Approximately 15 children from 4th to 6th grade did not participate due to either their parents or guardians failing to provide informed consent or the child's illness on the focus group day.	139-141
Setting		
14. Setting of data collection	The FGDs were held in a familiar school room used for parent-teacher meetings. Furthermore, the research team also visited a nearby community centre, a supportive space for the neighbourhood.	155-156 & 211-212
15. Presence of non-participants	Occasionally a teacher or staff member of the community centre walked into our meetings, to check if everything was ok. Non-participants did not stay.	NA
16. Description of sample	The important characteristics of the sample are: Participants, who lived locally and attended the school, were Dutch children and children of first-generation migrant parents from diverse cultural backgrounds: Ghanaian, Eritrean, Ethiopian, Somali, Sudanese, Moroccan, Turkish, Tunisian, Egyptian, Syrian, Pakistani, Antillean, Surinamese, Chinese, Spanish, Bulgarian, Ukrainian, Polish. The research team engaged with adult stakeholders - including the principal, a teacher, and a women's group ('SW mothers').	151-158
Data collection		
17. Interview guide	Four children were interviewed in-depth to provide more detailed insights into the topics mentioned above (Phase 1; interview guide see supplementary file 2). The interview guide was tested during	184-185

	previous research of the supervisor.	
18. Repeat interviews	Repeat FGDs and interviews were conducted until data saturation was achieved. In total nine focus groups and four interviews were held.	185-186
19. Audio/ visual recording	Focus group discussions and interviews were recorded and transcribed *verbatim*, with field notes taken after informal conversations and participant observation. The visual recording (photographs and a video) supported the audio recording.	289-290
20. Field notes	Field notes were made from informal conversations and participant observation (PO).	289-290 & 294-295
21. Duration	FGDs lasted approximately one hour and interviews 30–45 minutes. Over 8 months, the research team actively engaged with the SW-neighbourhood, immersing themselves in its context and the children's living environment through participant observation and involvement in local activities at both the primary school and the community centre.	171-174 & 186-187
22. Data saturation	Data saturation was discussed. Repeat FGDs and interviews were conducted until data saturation was achieved.	185-186
23. Transcripts returned	The transcripts were not returned to the participants, but at the end of each session the research team summarized and verified their understanding of the responses of the children.	231-232
Domain 3: analysis and findings		
Data analysis		
24. Number of data coders	The research team cross-checked the themes from the 'problem tree' with themes from their thematic analysis of transcripts and	301-303

	fieldnotes. Consistent results among 6 coders provided triangulation.	
25. Description of the coding tree	The Atlas t.i. code book is available upon reasonable request.	NA
26. Derivation of themes	An inductive and iterative approach derived theory from the data, with final themes structured according to the Fisher-Owens model: child-level, family-level, and community-level influences on children's oral health [2007].	303-305
27. Software	Data was organised, analysed and managed using Atlas t.i. version 22.2.4.	300-301
28. Participant checking	At the end of each session the research team summarized and verified their understanding of the responses of the children.	231-232
Reporting		
29. Quotation presented	The origin of quotes has been added in the Results section.	307-610
30. Data and findings consistent	There is consistency between the data presented (quotes) and the findings (themes).	307-610
31. Clarity of major themes	The major themes were presented as headings in the Results section	307-610
32. Clarity of minor themes	The minor themes were discussed as subheadings of the major themes.	307-610