

Daily Experiences Are Associated With Developmental Well-Being at Age 3

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Key Findings

- **Many daily experiences are associated with developmental well-being among 3-year-olds. When examined in models that accounted for several social and demographic variables and all other daily experiences, we found that:**
 - Outdoor time of 2+ hours per day was positively associated with developmental well-being overall and specifically in the Early Learning Skills, Social-Emotional, Motor, and Physical Health domains.
 - Preschool enrollment was strongly, positively associated with Early Learning Skills.
 - Limiting screen time to ≤ 1 hour per day positively predicted developmental well-being overall and specifically the Social-Emotional, Motor, and Physical Health domains.
 - Daily singing and storytelling had a positive association with developmental well-being overall and in three domains; daily reading was positively associated with Early Learning Skills.
- **Many enriching experiences are not universal, with less than half of 3-year-olds enrolled in preschool, read to daily, or consuming ≤ 1 hour per day of screen time.**
- **An ecological perspective is useful for understanding how structural and policy conditions influence children's daily experiences and ultimately, their development.**

Introduction

Young children's developmental well-being spans multiple domains, including physical health, motor skills, social-emotional functioning, self-regulation, and early language and math skills.^{1,2} Developmental progress in these domains is shaped by a combination of factors including the child's individual characteristics, family environment, and broader community and societal contexts.³ Together, these influences form a dynamic ecology that can either support or hinder healthy development.⁴

In 2022, a national indicator of children's developmental well-being and school readiness, Healthy and Ready to Learn (HRTL), was introduced in the National Survey of Children's Health (NSCH).⁵ This new measure of young children ages 3-5 provides opportunities to better understand the developmental well-being of young children in the United States and the child, family, and community conditions that contribute to being healthy and ready to learn.

A child’s daily experiences play a central role in shaping their early development. These include family interactions such as reading, storytelling, and singing, as well as health-related behaviors like eating fruits and vegetables and getting enough sleep.^{3,4,5} Other key daily experiences include opportunities for outdoor play, enrollment in preschool, and limited screen time.⁶

This brief is part of a series that summarizes evidence on how children’s characteristics and early experiences relate to developmental well-being among 3-year-olds, as measured by HRTL. Age 3 is a key transition period between toddlerhood and preschool, making it an important point for understanding the impact of prenatal-to-age-3 investments and identifying strategies to support children’s health and readiness to learn. The analysis focuses on malleable factors—those that can be influenced or changed, especially those influenced by families, communities, and public policies and programs that may reduce developmental risks and promote positive outcomes.

The Healthy and Ready to Learn Measure and Data

Data are available annually on children ages 3, 4, and 5, and estimates are state- and nationally-representative. The HRTL measure is the National Outcome Measure of School Readiness for Title V Maternal and Child Health Services Block Grantees, and the indicator of Developmentally Ready for School in [Healthy People 2030](#). It was co-developed and validated by Child Trends and HRSA MCHB, and the validated version became available in the NSCH beginning in 2022.

HRTL Measure	Proportion of 3-year-olds “on track”
HRTL Overall	63.7%
Early Learning Skills	69.1%
Social-Emotional	82.8%
Self-Regulation	70.9%
Motor	69.3%
Physical Health	91.2%

For more information about the HRTL measure and for national and state data [visit our webpage](#).

Methods

Data

This brief reports findings from analyses of the 2022–2024 NSCH datasets. The NSCH is an annual, nationally-representative survey of children ages 0–17, completed by parents and caregivers. The analytic sample includes approximately 10,230 unweighted responses from parents or caregivers of 3-year-old children, pooled across the 2022, 2023, and 2024 survey years. Weighted estimates from this sample are representative of an estimated annual population of approximately 3,816,005 3-year-old children in the U.S.

Measures

Children’s developmental well-being was assessed with the Healthy and Ready to Learn measure, which is a parent/caregiver assessment of children’s skills on 28 items in five domains: Early Learning Skills, Social-Emotional, Self-Regulation, Motor, and Physical Health. Responses are scored as “on track”, “emerging”, or “needs support,” depending on age-specific developmental milestones. Age and domain-specific cutpoints

are used to determine domain scores of “on track,” “emerging,” or “needs support.” The measure also summarizes across these domains with an overall HRTL score. Children are considered “on track” on the overall measure if they score “on track” in 4 or 5 domains and are not rated as “needs support” in any domain.⁷

Children’s daily experiences included measures in the NSCH of daily routines, interactions, and experiences. The following were included in our analyses:

- Outdoor time (2+ hours daily or <2 hours daily)
- Enrolled in preschool (in preschool or not)
- Screen time (≤1 hour daily vs. >1 hour)
- Singing songs or telling stories (daily vs. less than daily)
- Eating fruit and vegetables (daily vs. less than daily)
- Being read to (daily vs. less than daily)
- Sufficient sleep (10+ hours daily vs. <10 hours daily)
- Consuming sugary drinks (3 or less/week vs. 4 or more/week)
- Eating meals together as a family (daily vs. less than daily)

See Table A1 for the full list of daily child experience items, their prevalence, and how the survey items were coded.

Analyses

We used logistic regression models to understand which daily experiences were independently associated with whether or not children were “on track” in each developmental domain and with the overall HRTL measure of developmental well-being, accounting for several sociodemographic characteristics as control variables as well as all other daily experiences simultaneously. This means that we examined if specific daily experiences were associated with the likelihood of being “on track” in each developmental domain, over and above any effects of social and demographic characteristics and all other daily experiences. Social and demographic controls included: child’s sex, race and ethnicity, low birthweight status, exposure to adverse childhood experiences (ACEs), household income relative to the federal poverty level, parental education, primary home language, and family structure. Each of these variables are associated with development via their role in shaping children’s ecology via material, social, and, in the case of sex and birthweight, biological or developmental pathways. To reduce the risk of false positive findings, we applied a statistical adjustment to the *p*-values; a Benjamini-Hochberg (B-H) correction. We report findings that remained statistically significant after this adjustment. These findings help us better understand how each daily experience is associated with the likelihood of scoring “on track” in each domain and overall, after accounting for the role of every other daily experience and children’s sociodemographic characteristics.

In the next section, we highlight key findings from these analyses—displaying and describing which factors show significant associations with each domain of development and overall developmental well-being after accounting for all other daily experiences and sociodemographic characteristics. For full regression findings, please see Table A2. Table A3 summarizes findings from models that examined how each daily experience, individually, was associated with each HRTL outcome, controlling only for sociodemographic characteristics. Together, these tables help illustrate how daily experiences relate to development, both when considered on their own and when examined alongside the full set of daily experiences.

Findings

Accounting for all daily experiences and sociodemographic conditions, outdoor time, preschool enrollment, screen time limits, and singing and storytelling showed robust, independent associations with developmental well-being among 3-year-olds. Table 1 summarizes the findings from the analyses. Next, we take a look at each daily experience.

Table 1. Summary of significant associations between children’s daily experiences and HRTL measure

	Overall	Early Learning Skills	Social-Emotional Skills	Self-Regulation Skills	Motor Skills	Physical Health
Outdoor time 2+ hours/day	+	+	+		+	+
Preschool enrollment	+	+			+	-
Screen time ≤1 hour/day	+				+	+
Songs/stories daily	+	+			+	
Fruits & vegetables daily	+			+		
Read to daily		+				
Sleep 10+ hours/day						+
Sugary drinks ≤3/week						
Family meals daily						

Note: This table summarizes findings from logistic regression models using the 2022-2024 NSCH data sets, including a set of sociodemographic control variables and applying a Benjamini-Hochberg (B-H) correction. Findings that remained statistically significant following B-H correction are marked in the table. We use a (+) for a positive association and a (-) for a negative association. See table A2 for full logistic regression findings, including odds ratios.

Outdoor time

Spending two or more hours outdoors each day represents a strong and consistent association with developmental well-being. Children with more outdoor time were more likely to be “on track” overall and in four developmental domains: Early Learning Skills, Social-Emotional Development, Motor Development, and Physical Health. Self-Regulation was the only domain that did not have a significant independent association after accounting for other daily experiences, suggesting its relationship with outdoor time may overlap with other experiences.

Preschool enrollment

Children enrolled in preschool were significantly more likely to be “on track” across nearly all domains. The strongest association appeared for Early Learning Skills, likely reflecting the structured learning environments of early care and education settings that support the cognitive, math, and pre-literacy skills this domain captures. Preschool enrollment also showed significant positive associations with being “on track” overall and the Motor domain. One exception is that preschool enrollment had a significant negative association with the Physical Health domain, meaning children enrolled in preschool were less likely to be rated “on track” in the Physical Health domain than children not in school. This pattern may reflect the fact that a higher proportion of children with special health care needs were enrolled in preschool than those without special health care needs (50% vs. 43%).^a

^a Authors’ analysis of 2022-2024 NSCH.

Screen time

Limiting screen time to one hour or less per day maintained a significant, independent association with overall HRTL, and the Social-Emotional, Motor, and Physical Health domains, after controlling for other experiences and sociodemographic characteristics. The NSCH data on screen time is a single aggregate measure that does not distinguish between type of screen (e.g., phone, television, tablet), media type or content (e.g., music videos, shows, social media, educational), or passive versus interactive use (e.g., on in the background vs. game on a tablet). Because this blunt measure is nonetheless independently associated with several domains of development and the overall HRTL measure it suggests that its association with development is not explained by other sociodemographic or daily routine factors.

Singing songs, telling stories, and reading

Daily singing and storytelling was significantly associated with being “on track” on overall HRTL, and on the Early Learning Skills and Motor domains. The association with Early Learning Skills was particularly strong, consistent with previous research on the importance of songs and stories as a way to promote language and early phonological skills.⁸ Daily reading was only significantly associated with being “on track” in Early Learning Skills domain, suggesting that daily reading has a unique, independent association with early literacy, math, and cognitive skills.

Sleep

Getting 10 or more hours of sleep per day was significantly, independently associated with being “on track” in the Physical Health domain. The association of sleep with Physical Health was the largest among daily experiences in the Physical Health domain model, suggesting that sleep is strongly associated with physical health status at age 3. Sufficient sleep was also significantly correlated with family income ($r = .24$), parental education ($r = .20$), and daily reading ($r = .21$), which may partly explain why sleep does not have an independent association with being “on track” in the domains of Early Learning and Motor, as well as overall HRTL.

Family meals, nutritious foods, and sugary drinks

Neither regular family meals nor sugary drink consumption showed significant independent associations with any HRTL domain. As shown in Table A3, when examined in models without all other daily experiences, family meals and sugary drink consumption did associate with being “on track,” developmentally. This signals that these two daily experiences associate with HRTL through their co-occurrence with other factors, and not independently. However, daily consumption of fruits and vegetables was significantly, independently associated with being “on track” on overall HRTL and in the Self-Regulation domain. This finding is consistent with evidence that nutritional quality supports neurocognitive development, including behavioral regulation, in early childhood,⁹ though the direction of influence may be bidirectional: children who are better regulated may also more readily eat a more varied and nutritious diet.¹⁰

Social and demographic characteristics and their association with HRTL

Several social and demographic characteristics known to be associated with developmental well-being were included in our models. Their inclusion aids in understanding the significance and strength of associations between daily experiences and HRTL over and above the effects of these social and demographic factors. Findings from our models summarized in Table 1 and A2, those with all daily experiences, sociodemographic controls, and B-H correction to reduce false positives indicated that:

- Girls were consistently more likely than boys to be “on track” overall and in all domains except for Motor development.
- Children born at normal birth weight were more likely to be “on track” overall and in the Motor domain, compared to children born at low birthweight.
- Experiencing an adverse childhood experience (ACEs) by age 3 was associated with a lower likelihood of being “on track” overall, and in the Early Learning Skills, Self-Regulation, and Physical Health domains.
- Higher parental education was positively associated with being “on track” overall.
- Household income was positively associated with the likelihood of being “on track” in Physical Health.
- Child race and ethnicity, household language, and family structure did not significantly associate with any HRTL outcome.

Discussion

This brief provides recent national, representative evidence on how everyday experiences relate to developmental well-being among 3-year-olds. Nationally representative developmental data for this age group have only recently become available through the HRTL measure in the NSCH. The ability to examine these associations at the national level, and soon at the state level, is new and allows us to situate findings from the research literature in the broader context of young children across the United States.

The associations we found are consistent with the existing research on the correlates of young children’s development. Studies have found associations between preschool participation and children’s developmental skills, particularly in high-quality settings.¹¹ Similarly, research has documented links between preschool attendance and parents’ confidence in children’s social-emotional and pre-academic skills.¹² Studies have also connected outdoor play with cognitive and motor development.¹³ Associations between screen time and developmental outcomes are now well-established, with a growing body of longitudinal research suggesting that earlier screen exposure negatively affects later language development, attention, and physical development.^{14, 15, 16} Developmental science has also consistently found that language-rich interactions—such as reading, storytelling, and singing—support early literacy and phonological development.¹⁷ Research also supports links between nutritious food and self-regulation,¹⁸ and adequate sleep and physical health.¹⁹

The novel contribution of the evidence in this brief is that by simultaneously testing whether these associations hold independently of one another and of sociodemographic factors in a very large, nationally representative sample of 3-year-olds, findings offer a more nuanced view of how malleable daily experiences relate to different domains of child well-being, as well as overall developmental well-being.

The ecology of developmental well-being

Developmental well-being emerges from the ecology of children’s everyday experiences rather than any single behavior in isolation. Although our models did not capture every aspect of children’s daily lives, the overall pattern indicates that children were more likely to be developmentally “on track” at age 3 when their everyday ecologies included preschool participation, language-rich interactions, outdoor time, healthier nutrition, and lower screen exposure. The sociodemographic findings point to factors that may directly via developmental differences, or indirectly, via unmeasured social and biological mechanisms, influence development, including child sex, birthweight, parental education, ACEs, and family income. Further, descriptive, correlational analyses suggest that daily experiences co-occur – sugary drink consumption, while not independently associated with any developmental outcome when tested head-to-head against other factors, was correlated with family income, parental education, and screen time, each of which were associated with at least one developmental domain.^b

Importantly, these relationships may operate in both directions. Children’s developmental strengths and needs can shape the experiences available to them, just as these experiences can shape development. For example, the finding linking preschool enrollment to lower likelihood of being “on track” in Physical Health may reflect the greater likelihood that children with special health care needs enroll in preschool at age 3. In addition, the links between social-emotional development and screen time is reciprocal, meaning increased screen time is linked to later social-emotional problems, and children with social-emotional difficulties also use more screens over time.²⁰ Because these analyses are cross-sectional, we cannot interpret the findings as fully one-directional from experience to development. Future research that explicitly tests the directionality can provide more targeted evidence to inform policy and practice.

The findings also highlight that many enriching experiences are not universal in children’s daily lives. More than half of 3-year-olds (53%) were reported to have two or more hours of screen time daily, while fewer than half (44%) were enrolled in preschool or read to daily. Only half (50%) are sung to or told stories daily. About 61% spend two or more hours outdoors each day, suggesting that outdoor time is more common, but still not universal.

Many factors shape children’s developmental ecologies, including broader structural and policy conditions, and, as our analyses showed, sociodemographic and health factors. Access to preschool,²¹ neighborhood and environmental conditions that support safe outdoor play,²² and parents’ understanding of child development and the importance of daily reading²³ all influence the experiences available to young children; and families demographic characteristics may intersect with these daily experiences to influence varied developmental trajectories. At the same time, many of the daily experiences associated with developmental well-being are malleable. The data reveal that many, and in some cases most, children are not consistently experiencing these supportive conditions. This presents an important opportunity for further research, improved practice, and stronger policy to support the ecologies that promote young children’s holistic developmental well-being.

^b These findings are based on additional authors’ analyses of the NSCH 2022-2024 not reported in this brief. Please contact the authors for the correlation table.

Conclusion

Children’s daily experiences are one set of conditions that shape developmental well-being at age 3, but they are not the only ones. This brief is the first in a series of four companion briefs examining family conditions (including parental mental health, parental aggravation, and family resilience), health and health care access (including insurance adequacy, special health care needs, and access to a medical home), and neighborhood conditions (including amenities, safety, and community supports).

No single brief—and no single set of factors—tells the complete story of children's developmental well-being. Together, these briefs provide a multi-level portrait of the conditions that support, and sometimes undermine, the developmental well-being of 3-year-olds in the United States.

Further Reading

- [School Readiness Among United States Children: Results From the 2022 National Survey of Children’s Health](#)
- [Healthy and Ready to Learn: Prevalence and Correlates of School Readiness among United States Preschoolers](#)
- [State Variation in School Readiness, 2022 – 2023 Data Brief](#)
- [School Readiness, 2022 Data Brief](#)
- [National Outcome Measure of Healthy and Ready to Learn: Research Briefs on the Pilot Measure](#)

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Appendix A

Table A1. National weighted prevalence of sociodemographic characteristics and daily experiences among 3-year-olds in the U.S. 2022-2024

Variable	Category	National Prevalence
Sociodemographic Controls		
Sex	Male	51.1%
	Female	48.9%
Race/Ethnicity	White, non-Hispanic	48.6%
	Hispanic, any race	27.6%
	Black, non-Hispanic	10.5%
	Other/Multi-racial, non-Hispanic	13.4%
Family Poverty Level (FPL)	<100% FPL	18.1%
	100–199% FPL	19.4%
	200–399% FPL	27.2%
	400%+ FPL	35.4%
Primary Household Language	English	81.7%
	Non-English	18.3%
Family Structure	Two biological/adoptive parents	74.7%
	Single parent	21.5%
	Other	3.7%
Parent Education	Less than HS	7.8%
	High school (HS) degree or GED	18.1%
	Some college	17.2%
	College degree+	57.0%
Birth Weight	Normal birth weight	88.9%
	Low birth weight (<2500g)	11.1%
Adverse Childhood Experiences	Zero ACEs	73.7%
	Any ACEs	26.3%
Daily Experiences		
Outdoor Time	2+ hours/day	61.1%
	<2 hours/day	38.9%
Child is in Preschool	Yes	44.3%
	No	55.7%

Variable	Category	National Prevalence
Screen Time	≤1 hour/day	46.7%
	2+ hours/day	53.3%
Sing or Tell Stories	Daily	50.1%
	Less than daily	49.9%
Fruits & Vegetables	Less than daily	57.2%
	Daily	42.8%
Read to Child	Daily	43.9%
	Less than daily	56.1%
Sleep	10+ hours/day	74.4%
	<10 hours	25.6%
Sugary Drink Consumption	≤3/week	75.9%
	4+ times/week	24.1%
Family Meals Together	Daily	61.8%
	Less than daily	38.2%

Table A2. Odds Ratios (OR) from Logistic Regression Analyses of HRTL on Child Daily Experiences, with Sociodemographic Controls

This table shows results from 6 logistic regression models – one per developmental outcome – examining how each sociodemographic variable and daily experience factor is associated with children's likelihood of being “on track” across six HRTL domains. Each column represents a separate model for one HRTL outcome. Values are odds ratios, which can be read as the relative likelihood of being “on track” for a given characteristic compared to the reference group shown in parentheses. An odds ratio greater than 1 means children with that characteristic were more likely to be “on track”; an odds ratio less than 1 means they were less likely. Values shown in bold with an asterisk (*) were statistically significant after applying the Benjamini-Hochberg correction to control the false discovery rate across all comparisons within each model.

When paired with Table A3, findings paint a fuller picture of how each daily experience is associated with HRTL outcomes, either independently or in relation with other daily experiences.

Variable	HRTL Overall	Early Learning	Social Emotional	Self-Regulation	Motor	Physical Health
	OR (SE)	OR (SE)	OR (SE)	OR (SE)	OR (SE)	OR (SE)
Sociodemographic Controls						
Child sex: Female (Ref: Male)	1.58* (0.14)	1.55* (0.15)	1.67* (0.22)	1.22 (0.12)	1.89* (0.17)	1.49* (0.24)
Race/ethnicity: White, non-Hispanic (Ref: Hispanic)	1.05 (0.14)	1.00 (0.14)	1.10 (0.18)	1.01 (0.14)	1.06 (0.14)	1.07 (0.21)

Variable	HRTL Overall	Early Learning	Social Emotional	Self-Regulation	Motor	Physical Health
Race/ethnicity: Black, non-Hispanic (Ref: Hispanic)	1.03 (0.22)	1.21 (0.26)	0.89 (0.22)	1.24 (0.27)	0.65 (0.13)	1.33 (0.41)
Race/ethnicity: Other/Multi-racial, non-Hispanic (Ref: Hispanic)	0.98 (0.14)	1.30 (0.20)	0.86 (0.16)	0.92 (0.14)	1.09 (0.17)	0.66 (0.16)
Income: 100–199% FPL (Ref: <100% FPL)	0.98 (0.21)	1.19 (0.24)	0.96 (0.29)	1.01 (0.23)	0.96 (0.18)	1.54 (0.39)
Income: 200–399% FPL (Ref: <100% FPL)	1.04 (0.24)	1.12 (0.22)	1.06 (0.33)	0.84 (0.18)	0.99 (0.18)	1.79* (0.42)
Income: 400%+ FPL (Ref: <100% FPL)	1.31 (0.30)	1.36 (0.29)	1.46 (0.44)	0.93 (0.21)	0.86 (0.16)	3.27* (0.88)
Language: English (Ref: Non-English)	1.18 (0.20)	1.21 (0.21)	1.56 (0.32)	1.04 (0.18)	1.10 (0.19)	1.09 (0.30)
Birth weight: Normal birth weight (Ref: Low birth weight [<2500g])	1.39* (0.21)	1.37 (0.22)	1.45 (0.34)	1.26 (0.23)	1.61* (0.25)	1.53 (0.38)
Family Structure: Two biological/adoptive parents (Ref: Single parent)	0.96 (0.15)	0.77 (0.12)	1.20 (0.22)	1.15 (0.17)	0.94 (0.14)	0.83 (0.18)
Family Structure: Other (Ref: Single parent)	0.90 (0.26)	1.58 (0.49)	0.59 (0.20)	1.06 (0.37)	0.80 (0.25)	0.97 (0.35)
Education: HS degree or GED (Ref: Less than HS)	1.43 (0.42)	0.80 (0.22)	1.06 (0.40)	0.68 (0.22)	1.21 (0.35)	1.30 (0.57)
Education: Some college (Ref: Less than HS)	2.11* (0.62)	1.27 (0.35)	1.26 (0.48)	0.93 (0.30)	1.73 (0.49)	1.77 (0.73)
Education: College degree+ (Ref: Less than HS)	2.19* (0.63)	1.32 (0.36)	1.52 (0.56)	1.11 (0.35)	1.66 (0.47)	1.68 (0.71)

Variable	HRTL Overall	Early Learning	Social Emotional	Self-Regulation	Motor	Physical Health
ACEs: Zero ACEs (Ref: Any ACEs)	1.53* (0.18)	1.49* (0.18)	1.34 (0.21)	1.54* (0.19)	1.26 (0.15)	1.64* (0.30)
Daily Experiences						
Outdoor Time: 2+ hours/day (Ref: <2 hours/day)	1.48* (0.14)	1.42* (0.14)	1.63* (0.22)	1.09 (0.11)	1.47* (0.14)	1.45* (0.23)
Child is in preschool: Yes (Ref: No)	1.55* (0.15)	1.93* (0.19)	1.28 (0.16)	0.97 (0.09)	1.56* (0.15)	0.63** (0.10)
Screen Time: ≤1 hour/day (Ref: 2+ hours/day)	1.22* (0.12)	1.17 (0.11)	1.32 (0.17)	1.16 (0.11)	1.41* (0.13)	1.51* (0.24)
Sing or Tell Stories: Daily (Ref: Less than daily)	1.33* (0.14)	1.56** (0.17)	1.38 (0.20)	1.02 (0.12)	1.32* (0.14)	0.88 (0.16)
Fruits & Vegetables: Daily (Ref: Less than daily)	1.21* (0.11)	1.05 (0.10)	1.23 (0.16)	1.31* (0.13)	1.09 (0.10)	0.98 (0.15)
Read to Child: Daily (Ref: Less than daily)	1.11 (0.12)	1.28* (0.14)	0.92 (0.15)	1.04 (0.13)	0.85 (0.10)	1.41 (0.28)
Sleep: 10+ hours/day (Ref: <10 hours)	1.04 (0.12)	1.02 (0.12)	1.20 (0.19)	1.29 (0.16)	0.87 (0.10)	1.75** (0.32)
Sugary Drink Consumption: ≤3/week (Ref: 4+ times/week)	1.17 (0.14)	1.02 (0.13)	0.94 (0.16)	1.12 (0.14)	1.05 (0.13)	1.14 (0.21)
Family Meals Together: Daily (Ref: Less than daily)	1.12 (0.10)	1.07 (0.10)	0.99 (0.13)	1.04 (0.10)	1.02 (0.10)	1.24 (0.21)

Note: Results are from 6 logistic regression models adjusted using Benjamini-Hochberg corrections; models were estimated separately by HRTL outcome. Asterisk (*) indicate statistical significance after corrections.

Table A3. Daily experiences with significant associations to HRTL outcomes when examined one at a time, inclusive of sociodemographic controls

Table A3 presents odds ratios from models that examined how each daily experience was individually associated with each HRTL outcome, controlling for sociodemographic characteristics only, and not for other daily experiences simultaneously. Each value represents the odds of being on track for a given outcome among children with the specified daily experience compared to the reference group. Values in bold with asterisks indicate a statistically significant association ($p < 0.1$). This table complements Table A2 by showing how each daily experience relates to developmental outcomes before accounting for the full set of daily experiences together.

When paired with Table A2, it helps paint a fuller picture of how each daily experience is associated with HRTL outcomes, either independently or in relation with other daily experiences.

Variable	Overall HRTL	Early Learning Skills	Social-Emotional	Self-Regulation	Motor	Physical Health
Outdoor Time: 2+ hours/day (Ref: <2 hours/day)	1.63*** (0.15)	1.58*** (0.15)	1.81*** (0.23)	1.16 (0.12)	1.60*** (0.15)	1.40** (0.24)
Child is in preschool: Yes (Ref: No)	1.64*** (0.15)	2.05*** (0.20)	1.38*** (0.17)	0.99 (0.09)	1.65*** (0.15)	0.70** (0.11)
Screen Time: ≤1 hour/day (Ref: 2+ hours/day)	1.45*** (0.13)	1.36*** (0.13)	1.49*** (0.19)	1.23** (0.12)	1.51*** (0.14)	1.74*** (0.29)
Sing or Tell Stories: Daily (Ref: Less than daily)	1.52*** (0.14)	1.88*** (0.17)	1.48*** (0.18)	1.14 (0.11)	1.33*** (0.12)	1.07 (0.18)
Fruits & Vegetables: Daily (Ref: Less than daily)	1.38*** (0.12)	1.22** (0.11)	1.38*** (0.17)	1.35*** (0.13)	1.20** (0.11)	1.20 (0.18)
Read to Child: Daily (Ref: Less than daily)	1.49*** (0.13)	1.79*** (0.17)	1.26* (0.16)	1.15 (0.11)	1.12 (0.10)	1.53*** (0.22)
Sleep: 10+ hours/day (Ref: <10 hours)	1.22* (0.14)	1.16 (0.13)	1.33* (0.19)	1.33** (0.15)	0.91 (0.11)	1.99*** (0.36)
Sugary Drink Consumption: ≤3/week (Ref: 4+ times/week)	1.31** (0.15)	1.16 (0.14)	1.09 (0.17)	1.20 (0.15)	1.16 (0.14)	1.14 (0.22)
Family Meals Together: Daily (Ref: Less than daily)	1.27*** (0.11)	1.20* (0.11)	1.13 (0.14)	1.14 (0.11)	1.10 (0.10)	1.28 (0.21)

Note. * $p < 0.1$, ** $p < 0.05$, *** $p < 0.01$. Bold values indicate $p < 0.1$.

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