

# Supplementary File

## Appendix 1. School-based Prevention Interventions for Tobacco

	Effectiveness	Middle Childhood (5 - 10)	Early adolescence, Adolescence (11 - 18)	Adulthood (19 and Above)
<b>Type of intervention</b>	Effective	Universal	Universal	No data
	Ineffective	No data	No data	No data
<b>Theoretical model</b>	Effective	Social competence model/ Combined social competence and social influence model/Health education model/Social learning model/Social skill training / Self-control training problem solving	Social competence model/Combined social competence and social influence model/Health education model/Social learning model, social skill training/Self-control training problem solving	No data
	Ineffective	Social influence model/Information only model/ Incentives model/Multi-curricula/Resilience protective factors programs	Social influence model/Information only model/Incentives model/Multi-curricula/Resilience protective factors programs	No data
<b>Duration of intervention and follow-up</b>	Effective	Long term program (12 month or more)/ At longest follow-up tobacco-only curricula	Long term program (12 month or more)/At longest follow-up tobacco-only curricula	No data
	Ineffective	No data	No data	No data
<b>Program provider</b>	Effective	Adult-led (combined social competence and social influences curricula)/Professionals alone (short-term programs)/Professionals and teachers together (long-term programs)	Adult-led (combined social competence and social influences curricula)/Professionals alone (short-term programs)/Professionals and teachers together (long-term programs)	No data
	Ineffective	Peer-led (higher-risk)	Peer-led (higher-risk)	No data

## Appendix 2. School-based Prevention Intervention for Alcohol

	Effectiveness	Middle Childhood (5 - 10)	Early Adolescence, Adolescence (11 - 18)	Adulthood (19 and Above)
<b>Type of intervention</b>	Effective	Universal	Universal/Universal multi-component programs	Universal/Universal multi-component programs
	Ineffective	No data	No data	No data
<b>Theoretical model</b>	Effective	Multi-component programmed/Interventions directed to parents achieve mostly positive effects especially the Strengthening Families Program.	Brief alcohol interventions (BAIs)/Motivational enhancement therapy components/multi-component programmed/Interventions directed to parents achieve mostly positive effects especially the strengthening families Program	Brief motivational interventions Personalized cognitive behavioral intervention Computer- or web-based prevention intervention Multi-component programs (personalized feedback, moderation strategies, expectancy challenge, identification of risky situations, and goal setting)
	Ineffective	No data	Traditional (universal) media campaigns or education/information campaign/Social norms campaign against alcohol consumption/Resilience protective factors programs	Social norms campaign against alcohol consumption/Resilience protective factors programs
<b>Duration of intervention and follow-up</b>	Effective	No data	Short-time interval (< 3 months) and (4 - 12 months)/Long term program (12 month)	Long term program (12 months) More than 4 months follow-up for web/computer feedback in individual face-to-face feedback
	Ineffective	No data	Intervention effects > 13 months/Long-term follow up for multi component program	More than 4 months follow-up for web/computer feedback in social norms programs in university or college students/More than 4 months follow-up for web/computer feedback in social marketing campaigns in university or college students,
<b>Program provider</b>	Effective	No data	Professionals alone in short-term programs/Professionals and teachers together in short-term programs/Professionals and teachers together in long-term programs	Web/computer-based model Professionals
	Ineffective	No data	Teacher-led /Mentor	Mentor

### Appendix 3. School-based Prevention Intervention for Cannabis

	Effectiveness	Middle Childhood (5 - 10)	Early Adolescence, Adolescence (11 - 18)	Adulthood (19 and Above)
<b>Type of intervention</b>	Effective	No data	Universal/Universal multimodal programs/Targeted uni-modal programs	No data
	Ineffective	No data	Targeted uni-modal programs delivered during early adolescence	Late adolescence/young adult (18+years)
<b>Theoretical model</b>	Effective	No data	Health education model/Social learning model/Social competence model for smoking/Mixed model Prevention/Combined programs in the long-time intervention (12+ months), skill-based intervention models	No data
	Ineffective	No data	Social influence versus usual curricula or no intervention for Long-term follow-up (12+ months)/Resilience protective factors programs	No data
<b>Duration of intervention and follow-up</b>	Effective	No data	Short universal multi-modal programs/Long-term intervention >15 session/Long term program (12 month)/Short-term follow-up (< 12 months) for social competence/Short-term follow-up (< 12 months) for social influence/Short-term follow-up (< 12 months) combined programs/Long-term follow-up (12+ months) combined programs	No data
	Ineffective	No data	Without boosters/Long-term follow-up (12+ months) for social competence/Long-term follow-up (12+ months) social influence	No data
<b>Program provider</b>	Effective	No data	Non-teacher facilitators for universal multi-modal programs/Multiple facilitators (teacher in combination with a project worker or a parent in combination with a CD-ROM intervention) in multi-modal programs Mentor/Professional and teacher together Peer-led /Computer-delivered BI and MI+CBT	No data
	Ineffective	No data	Non-teacher facilitators unimodal programs/Peer-led interactive middle school-based programs potentially delay or prevent cannabis use in middle school students/Teacher-led the program with booster sessions	No data

**Appendix 4. School-based Prevention Intervention for Substance and Drugs**

	Effectiveness	Middle Childhood (5 - 10)	Early Adolescence, Adolescence (11 - 18)	Adulthood (19 and Above)
<b>Type of intervention</b>	Effective	Universal	Universal	No data
	Ineffective	No data	No data	No data
<b>Theoretical model</b>	Effective	No data	Health education model/Social learning/Social competence for smoking/Social influences in/preventing the onset of smoking/Affective-based programs (compared to usual curricula) Skills-based interventions/Resilience protective factors as part of a multidimensional intervention approach/Cognitive-behavioral based programs	No data
	Ineffective	Fear based models/Information model (Providing information on specific substances, including fear-arousal)/Models that Focus only on the building of self-esteem and on emotional education/Programs that involve parent	Information-giving alone, particularly fear-arousal/Address only ethical/ moral decision making or values/Complex interventions that included CB/Alcohol-specific or generic programs/Focusing on the consequences of substance use/Programs that involve parent	No data
<b>Duration of intervention and follow-up</b>	Effective	No data	High intensity, and meet consistently and frequently in mentoring /Long term program (12 months)	No data
	Ineffective	Programs with booster sessions	Programs with booster sessions /Short-term follow-up (< 12 months)/Combined programs/Long-term follow-up (12+ months) Combined programs/Long-term follow-up (12+ months) for social competence	No data
<b>Program provider</b>	Effective	Trained teachers or facilitators	Professionals alone in short-term program/Professionals and teachers together in the long-term program/Peer-led programs to be more effective than adult-led programs/Programs led by specialists (e.g., program developers, prevention agency staff, mental health professionals, graduate students) are more effective than other adult leaders (e.g., teachers and school staff)/Programs delivered by those other than teachers/Trained facilitator (including trained peers) External educators/by adults	No data
	Ineffective	No data	Peer education/ Ex-drug users as testimonials Police officers.Random drug testing /Peer-group program leads to iatrogenic effects when high-risk youth are exposed to high-risk peers	No data

**Appendix 5. Family-based Prevention Intervention for Tobacco**

	<b>Effectiveness</b>	<b>Middle Childhood (5 - 10)</b>	<b>Early Adolescence, Adolescence (11 - 18)</b>	<b>Adulthood (19 and Above)</b>
<b>Type of intervention</b>	Effective	Selective	Selective	No data
	Ineffective	No data	No data	No data
<b>Theoretical model</b>	Effective	Authoritative parenting/Motivational interviewing/Strengthen parental skills/Strengthen children's prosocial and peer resistance skills	Authoritative parenting/Motivational interviewing/Strengthen parental skills Strengthen children's prosocial and peer resistance skills	No data
	Ineffective	Healthy School and Drugs program, which consisted of online lessons for students/Focused exclusively on parents	Healthy School and Drugs program, which consisted of online lessons for students.Focused exclusively on parents	No data
<b>Duration of intervention and follow-up</b>	Effective	No data	High intensity of family intervention	No data
	Ineffective	No data	Low and medium intensity	No data
<b>Program provider</b>	Effective	Parents or family with a professional	Parents or family with a professional/Combined family plus school intervention	No data
	Ineffective	No data	No data	No data

### Appendix 6. Family-based Prevention Intervention for Alcohol

	Effectiveness	Middle Childhood (5 - 10)	Early Adolescence, Adolescence (11 - 18)	Adulthood (19 and Above)
<b>Type of intervention</b>	Effective	Universal	Universal multicomponent programs	No data
	Ineffective	No data	No data	No data
<b>Theoretical model</b>	Effective	No data	General and alcohol-specific parenting strategies/Parent-child programs/Self-directed parent programs/Combination of general and alcohol-specific parenting program/Combination of school- and family-based interventions (e.g., LST plus strengthening family's program; LST + SFP)/The intervention consisted of school-, parent-, and community-based components,	No data
	Ineffective	No data	Family-based intervention alone/Alcohol-specific parenting only.	No data
<b>Duration of intervention and follow-up</b>	Effective	No data	Training <12 hours	No data
	Ineffective	No data		No data
<b>Program provider</b>	Effective	No data	Computer-based approach/Parent self-directed and professional-delivered methods.	No data
	Ineffective	No data	No data	No data

### Appendix 7. Family-based Prevention Intervention for Cannabis

	Effectiveness	Middle childhood (5 - 10)	Early adolescence, adolescence (11-18)	Adulthood (19 and above)
<b>Type of intervention</b>	Effective	No data	Uni-modal programs (universal or targeted)	No data
	Ineffective	No data	No data	No data
<b>Theoretical model</b>	Effective	No data	No data	No data
	Ineffective	No data	Strengthening Families Program	No data
<b>Duration of intervention and follow-up</b>	Effective	No data	No data	No data
	Ineffective	No data	No data	No data
<b>Program provider</b>	Effective	No data	No data	No data
	Ineffective	No data	No data	No data

**Appendix 8. Family-based Prevention Intervention for Substance or Drugs**

	<b>Effectiveness</b>	<b>Middle Childhood (5 - 10)</b>	<b>Early Adolescence, Adolescence (11 - 18)</b>	<b>Adulthood (19 and Above)</b>
<b>Type of intervention</b>	Effective	No data	Selective prevention in family relationships dimension/Selective prevention in positive parenting dimension	No data
	Ineffective	No data	No data	No data
<b>Theoretical model</b>	Effective	Family bonding/Support parents on how to take a more active role in their children's lives Support parents on appropriate discipline/Support parents on how to be a role model for their children	Positive Family Relations/Future Orientation/Integrated preventive interventions that target common risk and protective factors for a variety of youth problem behaviors/Combined model for students and parents/School-based programs, which include both student and parent components/School-based and multiple prevention strategies	No data
	Ineffective	Information model (Provide information to parents about drugs so that they can talk about it with their children)/Focus exclusively on the child Programs that undermine parents' authority	Problem Solving/Resisting Peer Risk Parental monitoring and management of child behavior	No data
<b>Duration of intervention and follow-up</b>	Effective	Series of sessions (often around 10 sessions)	Illicit substance use: ≤ 24 hours of training	No data
	Ineffective	No data	No data	No data
<b>Program provider</b>	Effective	Parent(s)/Whole family/Delivered by trained individuals	Deliver by experts/Youth and parent(s) in the home/Youth and peers in the school setting/Youth with parents and teachers both in school and in the home	No data
	Ineffective	Delivered by poorly trained staff	No data	No data

**Appendix 9. Community-based Prevention Intervention for Tobacco**

	<b>Effectiveness</b>	<b>Middle Childhood (5-10)</b>	<b>Early Adolescence, Adolescence (11-18)</b>	<b>Adulthood (19 and Above)</b>
<b>Type of intervention</b>	Effective	No data	Universal	Universal
	Ineffective	No data	No data	No data
<b>Theoretical model</b>	Effective	No data	Social learning theory/School-based multi-component intervention/cardiovascular disease prevention programs aimed at entire populations /Combined with school-based multi-component interventions	Social learning theory/cardiovascular disease prevention programs aimed at entire populations
	Ineffective	No data	Social influences model Community action/organization theory/The focus of cancer prevention; with influencing youth and adult smoking behavior as secondary components	The focus of cancer prevention; with influencing youth and adult smoking behavior as secondary components
<b>Duration of intervention and follow-up</b>	Effective	No data	Intervention durations longer than 12 months/For daily and weekly smoking up until 8-year follow up for monthly smoking up until 4-year follow up	No data
	Ineffective	No data	No data	No data
<b>Program provider</b>	Effective	No data	Intervention delivery by school teachers and other faculty members/Parental involvement	No data
	Ineffective	No data	No data	No data