Tabla I: Database search strategy (Pubmed, ERIC; PsycINFO, Scopus

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| **Base de datos** | **Descriptores** | **Limits** |
| **Pubmed** | MESH TOOL: “PROGRAM EVALUATION” AND “HEALTH PROMOTION” AND “ADOLESCENT” | Articles types: clinical trial, evaluation studies, meta-analysis, systematic reviews  Languages: English, Spanish, Portuguese  Publication dates: 5 years |
| **ERIC + PsycINFO** | THESAURUS TOOL: “PROGRAM EVALUATION” AND “HEALTH PROMOTION” | Articles types: articles or review  Publication dates: 5 years  Languages: English, Spanish, Portuguese |
|  | THESAURUS TOOL: “PROGRAM EVALUATION” AND “HEALTH PROMOTION” AND “ADOLESCENTS” | Articles types: articles or review  Publication dates: 5 years  Languages: English, Spanish, Portuguese |
| **Scopus** | “PROGRAM EVALUATION” AND “HEALTH PROMOTION” AND “ADOLESCENT” | Articles types: article or review  Publication year: >2006  Exclude: adult, young adult, middle aged  Articles types: articles or review |

Table II. Principal contributions about effectiveness evaluation of school health promotion programs: physical activity and nutrition.

| **Project** | **Study characteristics: Design\*; Country; Population; Sample & follow-up; number of variables** | **Intervention features** | **Main effects\*\*** |
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| **Bere et al18** | Quasi-experimental two group, EG & CG, design; Norway; 6º & 7º graders; 38 schools. Pretest: 1950; 1 year-follow-up: 1794; 2 year-follow-up: 1602. Mean age: 11.8 years. Number of variables: Four. | Setting: school.  Objective: To encourage healthy nutrition; Theory: Ecological Model.  Implementation: accessibility improvements at school. | It was effective on daily (mean difference: 0.38 in girls, 0.44 in boys) and usual FV intake (mean difference: 1.6) (p<.001). |
| **Dunton et al19** | Quasi-experimental two group, EG & CG, design; USA; Female students; 2 schools. Pretest: 146; 6 months: 132; 12 months follow-up: 122. Mean age: 15.1 years, SD: 0.81.Number of variables: 10. | Setting: school.  Objective: to promote PA and cardiovascular health; Theory: Social-cognitive.  Implementation: Interactive lessons + PA training. | Effect on VPA (p<.001, *d*=0.58), and on cardiovascular fitness (p=.008, *d*=0.45) was found. |
| **Haerens et al20,21** | Experimental two EG & one CG; design (school) ; Belgium; 7º & 8º graders; 15 schools. Pretest, posttest, 1 year follow-up: 2840. Mean age: 13.1 years; SD: 0.81.Number of variables: 14. | Setting: school; family.  Objective: to promote PA and healthy nutrition; Theory: Health promotion  Implementation: accessibility improvements at school, computer tailored training. An EG involves parents. | It was effective on PA of light intensity (*d*=0.54) and MVPA (*d*=0.46) and on school PA (*d*=0.40) in EG with parental involvement, and on school PA in EG without parental involvement (*d*=0.29) (p<.05). And on percentage of energy from fat in girls of EG with parental support (p<.001, *d*=1.56). |
| **Covelli22** | Quasi-experimental one group (EG) design; USA; Afro-American 14 to17 year-old students; One school. Pretest y posttest: 48. Mean age: 15 years.Number of variables: 5. | Setting: school.  Objective: to promote PA, healthy nutrition and cardiovascular health; Theory: Health promotion (Sidani y Braden).  Implementation: Interactive lessons + PA training. | It was effective on health knowledge (*d*=4.37), daily intake of FV (*d*=2.82), and exercise (*d*=2.32) (p<001). |
| **Taymoori et al23** | Experimental, 2 EG & CG, design (school); Iran; Female 9º & 10º graders; Three schools. Pretest, Posttest, and six-month follow-up: 166. Mean age: 14.8 years; SD: 0.48.Number of variables: 12 | Setting: school, family.  Objective: to promote PA; Theory: Health promotion (Pender); trans-theoretical model.  Implementation: interactive group and individual lessons; physical training, mountaineering (involving parents). | It was effective on overall PA minutes per week (p=.000, R2=.29) and mean minutes PA per day (p=.000, R2 =.34) in posttest.  It was effective on overall PA minutes per week (*p*=.01, *d*[GI.1]=0.43, *d*[GI.2]=0.59), and mean minutes PA per day (*p*=.008, *d*[GI.1]=0.47, *d*[GI.2]=0.29) in follow-up. |
| **Webber et al24** | Observational repeated measures (one group); USA; Female 6º to 8º graders; 36 schools. Pretest: 1721; One-year: 3504; Two-year follow-up: 3502. Number of variables: Four. | Setting: school, community.  Objective: to promote PA; Theory: operant learning; social cognitive; ecological model.  Implementation: interactive lessons+ physical training, accessibility improvements at school and community. | Long-term effect in adjustment mean of PA per day o MET-weighted minutes of MVPA (difference of mean: 10.9, 95%CI=0.5, 21.2), and minutes of daily sedentary activities (difference of mean: −8.2, 95%CI: −16.5, 0.0) were found (p<.05) |
| **Araújo-Soares et al25** | Experimental two groups, EG & CG, design (school); Portugal; 6º and 7º graders; Eight schools. Pretest: 291; Posttest: 291; Three months: 291 Nine months follow-up: 195. Mean age: 12.1 years; SD: 1.01. Number of variables: Six. | Setting: school, family.  Objective: to promote PA; Theory: social cognitive, self-regulation and planning  Implementation: interactive lessons+ physical training, parent information | It was effective on MVPA per week (*d*=0.30, p=.016) |
| **Chatzisarantis & Hagger26** | Experimental two groups, EG & CG, design (school); England; 14 to16 years old students; 10 schools. Pretest: 235; Posttest: 215. Mean age: 14.84 years; SD: 0.40. Number of variables: Four. | Setting: school.  Objective: to engage PA at least 40 minutes, 4 days per week in leisure-time; Theory: self-determination.  Implementation: autonomy-supportive intervention | Effect on PA behaviour (R2=0.22, p<0.11) at follow-up 2, and intentions to PA (*d*=0.73, p<0.05). |
| **Dzewaltowski et al27** | Experimental two groups, EG & CG, design (school); USA; 7º and 8º graders; 16 schools. Pretest: 2311; One-year: 1869; Two year follow-up: 1582. Mean age: 12.4 years; SD: 0.40. Number of variables: 12 | Setting: school.  Objective: to encourage PA and healthy nutrition; Theory: Social-cognitive and participative action.  Implementation: accessibility improvements by an action team (adult place and students leaders). | Effect on VPA (p=.003, *d*=1.88) and MVPA (p=.005, *d*=1.24) were found.  It was effective on PA proxy efficacy for environmental changes at school (p=.001, *d*=3.25), FV self-efficacy (p=.04, *d*=1.47), FV group norm (p=.03, *d*=2.29). |
| **Singh et al28** | Experimental two groups, EG & CG, design (school); The Netherlands; 12 to 14 year-old students; 18 schools. Pretest, Eight months, 12 months, and 20 months follow-up: 1108 (21% drop out). Mean age: 12.7 years. SD: 0.50. Number of variables: 11 | Setting: school.  Objective: to promote energy balance.  Implementation: interactive lessons+ physical training; accessibility improvements. | It was effective on sugar-containing beverage after 8 months (*d*=0.37), and 12 months (*d*(boys)=0.13, *d*(girls)=0.04).  It was effective on waist circumference after 8 months (*d*=0.29), on biceps (*d*=0.05), triceps (*d*=0.10) and sub-scapular (*d*=0.18) skin-fold thickness, and on TV/ computer use after 20 months in boys (*d*=0.15). And on biceps (*d*=0.34) and sum of skin-fold thickness after 8 months (*d*=0.10) and after 20 months (*d*=0.18) in girls (p<.05). |
| **Forneris et al29** | Experimental two groups, EG & CG, design (school); USA; 6º graders from rural areas; 23 schools. Pretest: 2120, Posttest: 1830, One-year follow-up: 1410, Two year follow-up: 999. Number of variables: Seven. | Setting: school.  Objective: To promote healthy nutrition.  Implementation: Lessons by peers previously trained. | It was effective on self-efficacy in posttest (*d*=3.16) and after one-year follow-up (*d*=1.86), on knowledge in posttest (*d*=1.92) and after One-year follow-up (*d*=2.37) (p<.05). |
| **Mauriello et al30** | Experimental two groups, EG & CG, design (school); USA; 9º to 11º graders; Eight schools. Pretest: 1800; Two months: 1300; Six months: 1430; 12 months follow-up: 1182. Mean age: 15.97 Number of variables: 3 | Setting: school.  Objective: to promote energy balance; Theory: Trans-theoretical model.  Implementation: Computer tailored self-training. | It was effective on PA after two months (p<0.01, *d*=0.31), on FV consumption after two, six and 12 months (p<.001, *d*=0.21; *d*=0.30; *d*=0.29, respectively). |

\*Group allocation level between brackets. \*\* FV: Fruits and vegetables; PA: Physical activity; VPA: Vigorous physical activity; MVPA: moderate to vigorous physical activity; EG: Experimental Group; CG: Control Group; SD: standard deviation; p: significance level value; d: Cohen’s d standardized mean difference.

Table III. Principal contributions about effectiveness evaluation of school health promotion programmes: mental health and holistic health promotion.

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| **Project** | **Study characteristics: Design\*; Country; Population; Sample & follow-up; number of variables** | **Intervention features** | **Main effects** |
| **Hampel et al31** | Quasi-experimental two groups, EG & CG, design; Austria; 5º to 8º graders; Two schools. Pretest, posttest, three months follow-up: 458. Mean age: 11.7 years; SD: 1.18. Number of variables: 3 | Setting: school, family.  Objective: to promote psycho-social adjustment; Theory: Stress management (Lazarus & Meichenbaum).  Implementation: Interactive lessons, homework with parents. | It was effective on stress self-perception (R2=0.05), on coping (R2=0.73), and on self-efficacy (R2=0.04) (p<.001) |
| **Kimber et al32** | Quasi-experimental two EG & two CG design; Sweden; 4º to 7º graders; Eight schools. Pretest: 1003; One year: 937; Two year follow-up: 468. Number of variables: 22 | Setting: school, family.  Objective: to promote psycho-social competences; Theory: social and emotional training.  Implementation: Interactive lessons, parental information. | It was effective on body image self-perception (p=.004, *d*= 0.48), on psychosocial well-being (p=.035, *d*=0.33), and on relationship with other people (p=.029, *d*=0.32).  It was effective on aggressiveness (p=.001, *d*=0.33), on attention seeking (p=.009, *d*=0.32), and on bullying, (p=.046, *d*=0.39).  It was effective on alcohol (p=.029, *d*=0.26), and narcotic drugs use (p=0.051, *d*=0.23). |
| **Fridrici & Lohaus33** | Quasi-experimental three EG & one CG, design: Germany; 8º & 9º graders; Eight schools. Pretest, pos-test: 904. Mean age: 14.83 years; SD: 0.81. Number of variables: 5 | Setting: school.  Objective: Stress prevention; Theory: Social skills training.  Implementation: three kinds of training, i.e., on-line at school, on-line at home, interactive lessons. | It was effective on knowledge of stress and coping (R2=0.10), and stress evoking situations (R2=0.03) (p=.001). |
| **Shek et al34-36** | Experimental two groups, EG & CG, design (school); China; 7º to 10º graders; 24 schools. Pretest, posttest: 6656. Mean age: 13 years. Number of variables: 4  Descriptive analysis of 1250 interviews and 77 in-depth interviews from instructors, and 216 reflexive diaries from students. | Setting: school.  Objective: to improve adolescents’ skills and their empowerment; Theory: positive development.  Implementation: interactive lessons | It was effective on four indicators of adolescent positive development CPYDS-15 (p <.05, *d*=0.16), CPYDS-10 (p<.005, *d*=0.20), CPYDS-11 (p<.001, *d*=1.57), KEY15 (p< .001, *d*=0.37).  Instructors perceive that program promotes positive health and students that they gained social, family and personal competences. |
| **Bonell et al37** | Experimental two group, EG & CG, design (school); England; 7º graders; Two schools. Pretest: 614; Posttest (9 months): 735. Mean age: 11.65; SD: 0.3. Number of variables: 14  Qualitative analysis of 60 in-depth interviews from school personal and students. | Setting: school, family.  Objectives: to improve teacher-student relationship, engagement, security, social support, self esteem, and to reduce substance use.  Implementation: Action team (school personal, students, and parents) revised school policy and implemented different activities. | It was effective on school safe perception (OR=2.89; 95% CI:1.63, 5.14, p<.05).  Categories from qualitative analysis: improving in participation, relationship, communication, security engagement, self-esteem, self-concept; contribution to reduce substance use and other risk behaviours. |
| **Cousineau et al38** | Experimental two group, EG & CG, design (student); USA; 6º graders; Five schools. Pretest, Posttest: 190; three months follow-up: 178. Mean age: 11.7 years; SD: 0.06. Number of variables: Eight | Setting: school.  Objectives: to educate about puberty, body image, and self-esteem  Implementation: training assisted by the internet. | Effects on feelings and attitudes about weight (p=.02, *d*=0.02 to 0.25), on self-perception of physical appearance (p =.008), global self-worth (p =.002), and self-perception profile of adolescent (p =.008) (*d*=0.07 to 0.89).  Effects on girls on the global self-worth and self-perception profile of adolescent (p<.01, *d*=0.18 to 0.53) |
| **Gravesteijn39** | Quasi-experimental two groups, EG & CG, design; The Netherlands; 13 to 17 year-old students; 11 schools. Pretest: 958, posttest: 731, nine months and a year follow-up: 720. Mean age: 14.4 years. SD: 0.62. Number of variables: 5 | Setting: school.  Objective: stimulating positive development and prevent problem behaviour; Theory: conflict situations are the optimal context for learning, panel meetings with adolescents, teachers and parents, social learning approach and rational emotive and competence learning  Implementation: interactive lessons. | Short term effect of decreased suicidality (*d*=0.16, p<.05) and on expressing negative emotions (*d*=0.22, p<.01), and on increased self-esteem (*d*=0.15, p<.05), attitude to using social and emotional skills (*d*=0.26, p<.001) and general belief in self-efficacy (*d*=0.28, p<.001) were found.  Long term effect on negative emotions (*d*=0.16, p<.05), and on attitude to using social-emotional skills (*d*=0.20, p<.01) and self-efficacy (*d*=0.23, p<.01) were found. |
| **Jemmott III et al40,41** | Experimental two intervention group design (school); South Africa; 6º graders; 35 schools. Pretest: 1057; three months: 1029; six months: 1030; One-year follow-up: 1022. Mean age: 12.4 years; SD: 1.2. Number of variables: Five | Setting: school, family.  Objective: increasing knowledge, attitudes, self-efficacy, and skills on healthy behaviour and sexual health; Theory: Social cognitive, planned behaviour and focus groups  Implementation: Afterschool interactive sessions and homework with parents.  EG 1: health promotion intervention (HP).  EG 2: sexual transmission diseases and HIV prevention (SH). | HP was effective on percentage of 5-a-Day FV (OR=1.30, p=.008), fruit per day (*d*=0.19, p=.003), vegetables per day (*d*=0.24, p=.001); meeting PA guideline (OR=1.56, p<.001), on intensive cardiovascular PA (*d*=0.33, p<.001), on moderate cardiovascular PA (*d*=0.43, p<.001) and on strength-building PA (*d*=0.22, p=.006); on knowledge (*d*=1.03, p<.001), on attitude towards health promoting (*d*=0.89, p<.001) and on intention to health promoting (*d*=0.81, p<.001).  SH on unprotected vaginal intercourse (p=.01, OR=0.51; 95%CI=0.30-0.85), vaginal intercourse (p=.02, OR=0.61; 95%CI=0.42-0.94), and multiple sexual partners (p=.02, OR=0.50; 95%CI=0.28-0.89). |

\*Group allocation level between brackets; PA: physical activity; CPYDS: Chinese Positive Youth Development Scale; EG: Experimental Group; CG: Control Group; SD: standard deviation; p: significance level value; d: Cohen’s d standardized mean difference; CI: confidence interval; OR: odds ratio.

Table IV. Principal contributions about effectiveness evaluation of school risk prevention programmes.

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| **Proyecto** | **Study characteristics: Design\*; Country; Population; Sample & follow-up; number of variables** | **Intervention features** | **Main findings** |
| **McVey et al42** | Experimental two groups, EG & CG, design (school); Canada; 6 & 7º graders; Four schools. Pretest: 1438 ; Posttest (after 8 months): 1203; 14 months follow-up: 687. Mean age: 11.3 years; SD: 0.67. Number of variables: Five | Setting: school, family, community.  Objective: to prevent from eating disorder; Theory: Social Cognitive, non-specific vulnerability-stressor approach, feminist, ecological.  Implementation: interactive lessons, workshops with teachers and parents, parents information, community activities, peer support | It was effective on internalization of media ideals (p=.03, *d*=0.27), and on disordered eating attitude and behaviours (p =.04, *d*=0.33, only female); and on reported ‘‘currently trying to lose weight’’ (p=.03, OR=0.66)  It was more effective in risk groups for internalization of media ideals (p=.003, *d*=0.73), and body satisfaction (p=.04, *d*=0.39), when risk was defined by trying to lose weight; and for the internalization of media ideals (p=.02, *d*=0.48), and disordered eating attitude and behaviours (p=.004, *d*=1.05), when risk was defined by trying to gain muscle. |
| **Raich et al43** | Experimental two groups, EG & CG, design (school); Spain; 8º female graders; 13 schools. Pretest: 323; Posttest: 288; 6 months follow-up: 256. Mean age: 13 years; SD: 0.47. Number of variables: 3 | Setting: school.  Objective: to prevent from eating disorder; Theory: Social-cognitive.  Implementation: Interactive lessons. | It was effective on eating attitude (EAT-40), on pressure to be slim (CIMEC-26), and nutrition knowledge (NUT-Q) in following risk groups: Early menarche (p<.001, R2=0.06); overweight (p<.001, R2=0.05); dieting (p=.015, R2=0.04); distorted attitudes towards food (p<.001, R2=0.05), high inﬂuence of the slim aesthetic models (p<.001, R2=0.05). |
| **Richardson et al44** | Quasi-experimental two groups, EG & CG, design; Australia; 7º graders, 4 schools. Pretest: 277; Posttest: 266; Three months follow-up: 258. Mean age: 12.8 years; SD: 5.58. Number of variables: 12 | Setting: school.  Objective: to prevent from body dissatisfaction  Implementation: Interactive lessons. | It was effective on media literacy: In girls, digital (p<.001, *d*=0.16; p<.01, *d*=0.07) and lighting manipulation (p<.001, *d*=0.16; p<.01, *d*=0.06), camera shoot (p<.01, *d*=0.14; p<.01, *d*=0.95) at posttest and follow-up, respectively. In boys, digital manipulation (p<.01, *d*=0.06 at posttest; p<.001, *d*=0.12) at follow-up), effect of media images on feelings (p<.05, *d*=0.04) at posttest, and lighting (p<.01, *d*=0.07) and camera shoot (p<.05, *d*=0.03) at follow-up.  It was effective on self-esteem (p<.05, *d*=0.05), body comparison (p<.05, *d*=0.05; *d*=0.03), and internalization of thin ideal (p<.01, *d*=0.07) in girls; and obody satisfaction (p<.01, *d*=0.05) in boys at posttest and follow-up. |
| **Wick et al45** | Quasi-experimental two groups, EG & CG, design; Germany; 6º female graders; 52 schools. Pretest: 887; Posttest: 793, Three months follow-up: 683. Mean age: 12 years; SD: 0.6. Number of variables: Four. | Setting: school, family.  Objective: to prevent from eating disorder.  Implementation: Interactive lessons, parental information. | It was effective on body self esteem (p=0.01, *d*=0.29), and on knowledge (p=0.01, *d*=0.22) in posttest, and on knowledge in follow-up (p=0.01, *d*=0.24). |
| **Swaim & Kelly46** | Experimental two groups, EG & CG, design (community); USA; 6º & 7º rural area graders; Six schools. Pretest, One-year, Two-year follow-up: 1492. Number of variables: Eight. | Setting: school, community.  Objective: to prevent peer violence; Theory: social influence, ecological model.  Implementation: media campaign by peers. | It was effective on violent intentions (p<.05, *d*=0.98), physical assault (p<.05, *d*=3.29); verbal victimization (p<.05, *d*=2.90) and perceived school safety (p<.05, *d*=4.04). |
| **Hill & Abraham47** | Experimental two groups, EG & CG, design (student); England; 6º graders; 12 schools. Pretest: 508, Posttest (four-week follow-up): 404. Number of variables: 13 | Setting: school.  Objective: to promote condom use; Theory: targeted cognitions and preparatory actions or skills  Implementation: leaflet plus motivational incentive (class session) | EG: Change pre-post in attitude new partner (p=.001, *d*=0.44), attitude steady partner (p=.001, *d*=0.45), normative belief use (p=.01, *d*=0.36), self-efficacy condom available (p=.001, *d*=1.82), intention (p=.001, *d*=0.98).  Effect (EG vs CG) in attitude new (p<.001, *d*=0.46), attitude steady (p<.01, *d*=0.30), normative belief condom available (p<.05, *d*=0.24), self-efficacy condom available (p<.001, *d*=0.71), self-efficacy use (p.01, *d*=0.28), intention (p<.001, *d*=0.47), purchased condoms (p<.001, *d*=0.59), carried condoms (p<.001, *d*=0.62), discussed condoms (p<.001, *d*=0.43) were found. |
| **Lemieux et al48** | Quasi-experimental two groups, EG & CG, design; USA; Urban areas secondary students; Three schools. Pretest: 422; Posttest: 306. Mean age: 16 years. Number of variables: Seven | Setting: school.  Objective: to prevent from HIV/AIDS and sexually transmitted diseases (STD). Theory: social influence.  Implementation: media campaign by peers. | Simple effect on attitudes toward condom use (p<.05, R2=0.33) was found.  Simple effect in perceived social normative support for abstinence in girls (p.<05, R2=0.24) was found.  Interactive effect on HIV prevention skills (p=.02, R2=0.02), and condom use (p<.05, R2=0.03). |
| **Jemmott III et al49** | Experimental five groups, 4 EG & CG, design (school); USA; 6º & 7º Afro-American graders; 4 schools. Pretest: 662; 3 months follow-up: 633; Six months follow-up: 636; One-year follow-up: 598; 18 months follow-up: 577; 2-year follow-up: 559. Mean age: 12.2 years; SD: 0.81. Number of variables: 5 | Setting: school.  Objective: to reduce having sexual intercouse; Theory: Social cognitive, planned behaviour reasoned action  Implementation: Afterschool interactive sessions: Abstinence-Only Intervention; Safer Sex–Only Intervention; 8-hour and 12-hour Comprehensive Intervention  Intervention+ maintenance was also compared. | The abstinence-only intervention reduced sexual initiation (p=.03; OR=0.67, 95% IC: 0.48-0.96), and recent sexual intercourse (p=.03; OR=0.94, 95% IC: 0.90-0.99).  The 8-hour (p=.03; OR=0.96, 95% IC: 0.92-1.00) and 12-hour comprehensive intervention (p=.02; OR=0.95, 95% IC: 0.91-0.99) reduced report of having multiple partners.  Abstinence-only + maintenance (p=.006; OR=0.93, 95%IC: 0.88-0.98), and 12-hour comprehensive+ maintenance (p=.004; OR=0.91, 95%IC: 0.86-0.96) reduced multiple partners. |
| **Germeni et al50** | Experimental two groups, EG & CG, design (school); Greek; Secondary students; 12 schools. Pretest: 741; Posttest: 513. Mean age: 16.3 years; SD: 0.71. Number of variables: Three | Setting: school.  Objective: to promote two-wheel motorized vehicles (TWMVs) - helmet use; Theory: Health promotion.  Implementation: Interactive lessons. | It was effective on Knowledge about TWMVs-helmet use (p <.001), TWMVs-attitude (p. <05), and TWMVs behaviour (p<.05).  Knowledge: Public schools (mean difference: 1.87±0.29), Private schools (mean difference: 2.58±0.29) (p <.001).  Attitude: Public schools (p=0.02, mean difference: 1.87±0.78), Private schools (p=0.61, mean difference: 0.40±0.78), Vocational schools (p=0.01, mean difference: 1.91±0.74).  Behaviour: Public schools (p=0.03, mean difference: 2.41±1.13), Private schools (p=0.85, mean difference: 0.24±1.29), Vocational schools (p<0.001, mean difference: 3.26±1.03). |
| **De Vries et al51-54** | Quasi-experimental two group, EG & CG, design; Denmark, Finland, The Netherlands; Portugal, Spain and the UK; 7º to 9º graders; 203. schools. Pretest: 19034; Two-year follow-up: 11119, Three-year follow-up: 10751; | Setting: school, family, community.  Objective: to prevent from tobacco use; Attitude, Social Influence and Self-efficacy model.  Implementation: Interactive lessons, parent lessons, school events, school policy and community activities. | Overall: It was effective on pros of smoking two-year and three-year follow-up (p<.05, *d*=0.06-0.08), on self-efficacy in three-year follow-up (p<.01, *d*=0.04), on tobacco use (becoming weekly smoker) in three-year follow-up (p=.03, OR=0.89).  Finland: On pros of smoking (p<.05, *d*=0.09), becoming weekly smoker(p=.05, OR=0.76) and regular smoker (p=.03, OR=0.77) in two-year follow-up  The Netherlands: Becoming weekly smoker in three-year follow-up in non-native Dutch (p=.01, OR=0.34)  Portugal: On pros of smoking in two-year and three-year follow-up (p<.05, *d*=0.11-0.17); on cons of smoking (p<.05, *d*=0.11-0.17), parents’ and friends’ pressure (p<.05), self-efficacy (p<.05, *d*=0.13-0.16) and intentions in all follow-ups (p<.05, *d*=0.12-0.17). On average tobacco consumption in two-year (p <.05, *d*=0.23), and three-year follow-up (p<.001, *d*=0.77), becoming ever-smoking in two-year (p=.02, OR=0.73) and three year follow-up (p=.000, OR=0.62) and becoming weekly smoker in three-year follow-up (p=.01, OR=0.56)  Spain: On pros of smoking (p<.001, *d*=0.17), on cons of smoking in two-year follow-up (p<.05, *d*=0.12), becoming ever-smoking in two-year follow-up (p=.05, OR=0.75), and a regular smoking in all follow ups (p<.001).  UK: On self-efficacy(p<.05, *d*=0.08) and intentions (p<.05, *d*=0.09) in three-year follow-up. |
| **Campbel et al55** | Experimental two groups, EG & CG, design (school); England and Wales; 12 to13 years-old students; 113 schools. Pretest: 10047; Posttest: 9811; One-year: 9909; Two-year follow-up: 9660. Number of variables: One | Setting: school.  Objective: to prevent from tobacco use; Theory: social influence.  Implementation: informal peer mediation. | Effect on smoking prevalence in all students (OR=0.77, 95%CI: 0.59–0.99, p=.043) and smoker or ex-smokers (OR=0.75, 95%CI: 0.56–0.99, p=.046) after One-year were found. 22% reduction (OR=0.78, 95%IC: 0.65-0.96) of regular smoker. |
| **Komro et al56** | Experimental two groups, EG & CG, design (school); USA; 6º graders; 61 schools. Pretest: 4259; One-year: 4240; Two-year: 3778; 3-year follow-up: 3802. Number of variables: Eight | Setting: school, family, community.  Objective: to prevent from alcohol use; Theory: social influence, health promotion (Perry).  Implementation: Peer mediation lessons, parent activities, community services. | It was effective on alcohol use in those students with higher participation in the home programs ([mean= -0.05, standard error= 0.019, Z = -2.45, p=0.01). |
| **Faggiano et al57,58** | Experimental two groups, EG & CG, design (school); Europe (Austria, Belgium, Germany, Greek, Italy, Spain, and Sweden); 12 to 14 years-old students; 170 schools. Pretest: 7079; Pos-test: 6370. Number of variables: Eight | Setting: school, family.  Objective: to prevent from substance use; Theory: social influence.  Implementation: Interactive lessons, peer mediation and parent activities. | Effects on daily use of cigarettes (OR=0.70, 95%CI: 0.52–0.94), on any episode (OR=0.72, 95%CI: 0.58–0.90) and on frequent episodes of drunkenness in the past 30 days (OR=0.69, 95%CI: 0.49–0.99) (p<.05) were found. |
| **Perry et al59** | Quasi-experimental two groups, EG & CG, design; India; 6º & 8º students; 32 schools. Pretest: 11748; One-year: 12821; Two-year follow-up: 10,625 (but 6,365 completed all questionnaires). Number of variables: 16 | Setting: School.  Objective: to prevent tobacco consumption; Theory: Social-cognitive.  Implementation: Interactive lessons, peer mediation, school events, parent information. | Effect on cigarette smoking (p<.05), bidi smoking (p<.01), and any tobacco use (p=.04).  Effect on intentions chewing tobacco (p=.03, *d*=2.8), intentions cigarettes (p<.01, *d*=1.5); knowledge of effects of tobacco (p <.01, *d*=7), reasons to use (p <.01, *d*=9.3) and not to use tobacco (p<.01, *d*=5.2), perceived prevalence of chewing (p<.01, *d*=13) and cigarette smoking (p<.01, *d*=13.5); normative beliefs (p<.01, *d*=6.67), advocacy skills efficacy (p<.01, *d*=4.57); knowledge of anti-tobacco policies (p<.01, *d*=13); and social susceptibility to chewing use (p<.01, *d*=8) were found. |
| **Ringwalt et al60** | Experimental two groups, EG & CG, design (school); USA; 7º & 8º students; 34 schools. Pretest: 5782; Two-year follow-up: 5065; Three-year follow-up: 4940. Number of variables: Eight | Setting: School  Objective: To prevent from substance use.  Implementation: Interactive lessons, on-line training. | Marginally effect on 30-day alcohol in One-year follow-up OR=0.89 ±0.07, p<.10. |

\*Group allocation level between brackets; TWMV: two-wheel motorized; vehicles; EAT: Eating Attitudes Test; CIMEC: Questionnaire of Influences of the Aesthetic Beauty

Model; EG: Experimental Group; CG: Control Group; SD: standard deviation; p: significance level value; d: Cohen’s d standardized mean difference; CI: confidence interval; OR: odds ratio.