

## Supplemental Information

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## Appendix A: Expanded table of intervention types and associated delivery platforms of conditions and interventions aimed to be included in this review.

Condition/Risk Factors	Intervention	Facility-based	Community-based	School-based	Family-based
<b>Asthma</b>	Improve medication related behavior (adherence, inhaler technique), use of bronchodilators or inhaled corticosteroids	√	√	√	√
	Improve residential environment (reduce housing damp/mold, improve indoor air quality)		√	√	√
<b>Diabetes Type 1 (Insulin-independent diabetes)</b>	Medical management, Self-monitoring of blood glucose levels, reminders for self-administration of Insulin	√	√		√
	Public awareness to promote awareness and earlier diagnosis	√	√	√	√
	Educational and psychosocial interventions	√	√	√	√
<b>Rheumatic heart disease</b>	Primary prevention of rheumatic fever- Penicillin for streptococcal pharyngitis	√	√		
	Prevention of rheumatic heart disease (heart valve damage)- with use of antibiotics	√	√		
	Surgical repair for heart valve damage	√			
<b>Sickle Cell Disease</b>	Reducing the rate of vaso-occlusive crises with medical management and education (e.g. Hydroxyurea, adequate hydration)	√	√		
	Prophylaxis for infection, enrollment in comprehensive care, and stroke prevention	√	√		
	Prophylaxis for infection, pneumococcal vaccines, oral penicillin, use of insecticide treated bed nets, and anti-malarial therapy.	√	√		
<b>Childhood cancer</b>	Prompt and correct diagnosis followed by effective therapy	√			
	Pediatric cancer care plan at diagnosis	√			
	Palliative care and pain management aimed at reducing disease symptoms	√	√		
<b>Epilepsy</b>	Medical management plans aimed at reducing risk of epileptic seizures	√			
	Education and management of triggers and behaviours to reduce the risk of epileptic seizure (e.g. Consistent sleep routines, adequate diet, relaxation techniques	√	√	√	√
	Public health interventions addressing maternal and child health care, immunizations, public sanitation, brain injury prevention, and stroke prevention	√	√	√	√
<b>Indoor air pollution (pollution, smoke, dust)</b>	Programs aimed at parental behaviour to eliminate children's exposure to second-hand smoke	√	√	√	√
	Educational and supportive programs aimed at improving home air quality (e.g. improvement of stoves, air filters, uptake of smoke alarms)		√	√	√
<b>Outdoor air pollution (pollution, pollens and molds)</b>	Environmental awareness interventions- Reducing ambient particulate matter air pollution		√	√	√
	Educational programs for preventive measures and reducing exposure during heavy air pollution episodes (e.g. avoiding vigorous, extended outdoor activity, face masks)		√	√	√
<b>Environmental contaminants (e.g. lead exposure)</b>	Preventive measures reducing exposure, elimination of lead-based products in homes	√	√	√	√

**Appendix B: Search strategies for each condition (OVID MEDLINE)****ASTHMA**

Category	#	Term
Age	1	exp child/
	2	children*.mp.
	3	child*.mp.
	4	(schoolchild* or school child*).mp.
	5	adolescen*.mp.
	6	teen*.mp.
	7	pubescen*.mp.
	8	school.mp.
	9	school-age.mp.
	10	1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7 OR 8 OR 9
	11	Limit 10 to systematic reviews
	12	Limit 11 to 2000-current
Condition	13	exp Asthma/
	14	exp Anti-asthmatic agents/
	15	exp Bronchial Hyperreactivity/
	16	exp Respiratory Hypersensitivity/
	17	13 OR 14 OR 15 OR 16
	18	Limit 17 to systematic reviews
	19	Limit 18 to 2000-current
Intervention	20	Program*.mp.
	21	Intervention*.mp.
	22	Surgery .mp.
	23	Education.mp.
	24	Assess*.mp.
	25	Exam*.mp.
	26	exp Health promotion/
	27	exp Health Knowledge, Attitudes, Practice/
	28	Treatment or exp therapeutics/
	29	exp Early diagnosis/
	30	Screening.mp. or exp Mass Screening/
	31	exp Rehabilitation/
	32	exp Patient care management/
	33	Prevention.mp.
	34	exp Self-Management/
	35	Self-monitoring.mp.
	36	20 OR 21 OR 24 OR 25 OR 26 OR 27 OR 28 OR 29 OR 30 OR 31 OR 32 OR 33 OR 34 OR 35

Category	#	Term
Combination	37	Limit 34 to systematic reviews
	38	Limit 35 to 2000-current
	39	10 AND 17
	40	10 AND 36
	41	10 AND 17 AND 36
	42	<b>Limit 41 to systematic reviews</b>
	43	Limit 42 to 2000-current

## SICKLE CELL

Category	#	Term
Age	1	exp child/
	2	children*.mp.
	3	child*.mp.
	4	(schoolchild* or school child*).mp.
	5	adolescen*.mp.
	6	teen*.mp.
	7	pubescen*.mp.
	8	school.mp.
	9	school-age.mp.
	10	1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7 OR 8 OR 9
	11	Limit 10 to systematic reviews
	12	Limit 11 to 2000-current
Condition	13	exp Anemia, Sickle cell/
	14	Vaso-occlusive crisis.mp
	15	exp Acute chest syndrome/
	16	Hemoglobin S Disease.mp OR Sickle cell disease.mp
	17	Sickle cell disease.mp
	18	13 OR 14 OR 15 OR 16 OR 17
	19	Limit 17 to systematic reviews
	20	Limit 18 to 2000-current
Intervention	21	Program*.mp.
	22	Intervention*.mp.
	23	Surgery .mp.
	24	Education.mp.
	25	Assess*.mp.
	26	Exam*.mp.
	27	exp Health promotion/
	28	exp Health Knowledge, Attitudes, Practice/

Category	#	Term
	29	Treatment or exp therapeutics/
	30	exp Early diagnosis/
	31	Screening.mp. or exp Mass Screening/
	32	exp Rehabilitation/
	33	exp Patient care management/
	34	Prevention.mp.
	35	exp Self-Management/
	36	Self-monitoring.mp.
	37	21 OR 24 OR 25 OR 26 OR 27 OR 28 OR 29 OR 30 OR 31 OR 32 OR 33 OR 34 OR 35 or 36
	38	Limit 37 to systematic reviews
	39	Limit 38 to 2000-current
Combination	40	10 AND 18
	41	10 AND 37
	42	10 AND 18 AND 37
	43	<b>Limit 42 to systematic reviews</b>
	44	Limit 43 to 2000-current

## RHEUMATIC FEVER

Category	#	Term
Age	1	exp child/
	2	children*.mp.
	3	child*.mp.
	4	(schoolchild* or school child*).mp.
	5	adolescen*.mp.
	6	teen*.mp.
	7	pubescen*.mp.
	8	school.mp.
	9	school-age.mp.
	10	1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7 OR 8 OR 9
	11	Limit 10 to systematic reviews
	12	Limit 11 to 2000-current
Condition	13	exp rheumatic fever/
	14	exp rheumatic heart disease/
	15	acute rheumatic fever.mp
	16	group A streptococcus.mp.
	17	13 OR 14 OR 15 OR 16
	18	Limit 17 to systematic reviews
	19	Limit 18 to 2000-current

Category	#	Term
Intervention	20	Program*.mp.
	21	Intervention*.mp.
	22	Surgery .mp.
	23	Education.mp.
	24	Assess*.mp.
	25	Exam*.mp.
	26	exp Health promotion/
	27	exp Health Knowledge, Attitudes, Practice/
	28	Treatment or exp therapeutics/
	29	exp Early diagnosis/
	30	Screening.mp. or exp Mass Screening/
	31	exp Rehabilitation/
	32	exp Patient care management/
	33	Prevention.mp.
	34	exp Self-Management/
	35	Self-monitoring.mp.
	36	20 OR 21 OR 24 OR 25 OR 26 OR 27 OR 28 OR 29 OR 30 OR 31 OR 32 OR 33 OR 34 OR 35
	37	Limit 34 to systematic reviews
	38	Limit 35 to 2000-current
Combination	39	10 AND 17
	40	10 AND 36
	41	10 AND 17 AND 36
	42	<b>Limit 41 to systematic reviews</b>
	43	Limit 42 to 2000-current

## EPILEPSY

Category	#	Term
Age	1	exp child/
	2	children*.mp.
	3	child*.mp.
	4	(schoolchild* or school child*).mp.
	5	adolescen*.mp.
	6	teen*.mp.
	7	pubescen*.mp.
	8	school.mp.
	9	school-age.mp.
	10	1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7 OR 8 OR 9

Category	#	Term
Condition	11	Limit 10 to systematic reviews
	12	Limit 11 to 2000-current
	13	exp Epilepsy/
	14	exp Drug resistant epilepsy/
	15	exp Seizures/
	16	13 OR 14 OR 15
Intervention	17	Limit 16 to systematic reviews
	18	Limit 17 to 2000-current
	19	Program*.mp.
	20	Intervention*.mp.
	21	Surgery .mp.
	22	Education.mp.
	23	Assess*.mp.
	24	Exam*.mp.
	25	exp Health promotion/
	26	exp Health Knowledge, Attitudes, Practice/
	27	Treatment or exp therapeutics/
	28	exp Early diagnosis/
	29	Screening.mp. or exp Mass Screening/
	30	exp Rehabilitation/
	31	exp Patient care management/
	32	Prevention.mp.
	33	exp Self-Management/
	34	self-monitoring.mp.
	35	19 OR 20 OR 21 OR 24 OR 25 OR 26 OR 27 OR 28 OR 29 OR 30 OR 31 OR 32 OR 33 OR 34
	36	Limit 35 to systematic reviews
	37	Limit 36 to 2000-current
Combination	38	10 AND 16
	39	10 AND 35
	40	10 AND 16 AND 35
	41	<b>Limit 40 to systematic reviews</b>
	42	Limit 41 to 2000-current

**TYPE 1 DIABETES**

Category	#	Term
Age	1	exp child/
	2	children*.mp.
	3	child*.mp.
	4	(schoolchild* or school child*).mp.
	5	adolescen*.mp.
	6	teen*.mp.
	7	pubescen*.mp.
	8	school.mp.
	9	school-age.mp.
	10	1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7 OR 8 OR 9
	11	Limit 10 to systematic reviews
	12	Limit 11 to 2000-current
Condition	13	exp Diabetes Mellitus, Type 1/
	14	(Type 1 diabetes mellitus or T1DM).mp.
	15	13 OR 14
	16	Limit 15 to systematic reviews
	17	Limit 16 to 2000-current
Intervention	18	Program*.mp.
	19	Intervention*.mp.
	20	Surgery .mp.
	21	Education.mp.
	22	Assess*.mp.
	23	Exam*.mp.
	24	exp Health promotion/
	25	exp Health Knowledge, Attitudes, Practice/
	26	Treatment or exp therapeutics/
	27	exp Early diagnosis/
	28	Screening.mp. or exp Mass Screening/
	29	exp Rehabilitation/
	30	exp Patient care management/
	31	Prevention.mp.
	32	exp Self-Management/
	33	Self-monitoring.mp.
	34	18 OR 19 OR 20 OR 21 OR 24 OR 25 OR 26 OR 27 OR 28 OR 29 OR 30 OR 31 OR 32 OR 33
	35	Limit 34 to systematic reviews
	36	Limit 35 to 2000-current
Combination	37	10 AND 15
	38	10 AND 34



Category	#	Term
	39	10 AND 15 AND 34
	40	<b>Limit 39 to systematic reviews</b>
	41	Limit 40 to 2000-current

## CANCER

Category	#	Term
Age	1	exp child/
	2	children*.mp.
	3	child*.mp.
	4	(schoolchild* or school child*).mp.
	5	adolescen*.mp.
	6	teen*.mp.
	7	pubescen*.mp.
	8	school.mp.
	9	school-age.mp.
	10	1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7 OR 8 OR 9
	11	Limit 10 to systematic reviews
	12	Limit 11 to 2000-current
Condition	13	Childhood cancer.mp.
	14	Adolescent cancer.mp.
	15	exp Neoplasms/
	16	exp Cancer Pain/
	17	Cancer.mp.
	18	13 OR 14 OR 15 OR 16 OR 17
	19	Limit 18 to systematic reviews
	20	Limit 19 to 2000-current
Intervention	21	Program*.mp.
	22	Intervention*.mp.
	23	Surgery .mp.
	24	Education.mp.
	25	Assess*.mp.
	26	Exam*.mp.
	27	exp Health promotion/
	28	exp Health Knowledge, Attitudes, Practice/
	29	Treatment or exp therapeutics/
	30	exp Early diagnosis/
	31	Screening.mp. or exp Mass Screening/
	32	exp Rehabilitation/

Category	#	Term
	33	exp Patient care management/
	34	Prevention.mp.
	35	exp Self-Management/
	36	self-monitoring.mp.
	37	exp Palliative Care/
	38	Chronic pain management.mp. or exp Pain Management/
	39	21 OR 24 OR 25 OR 26 OR 27 OR 28 OR 29 OR 30 OR 31 OR 32 OR 33 OR 34 or 35 OR 36 OR 37 OR 38
	40	Limit 39 to systematic reviews
	41	Limit 40 to 2000-current
Combination	42	10 AND 18
	43	10 AN 39
	44	10 AND 18 AND 39
	45	<b>Limit 39 to systematic reviews</b>
	46	Limit 40 to 2000-current

## OUTDOOR POLLUTION

Category	#	Term
Age	1	exp child/
	2	children*.mp.
	3	child*.mp.
	4	(schoolchild* or school child*).mp.
	5	adolescen*.mp.
	6	teen*.mp.
	7	pubescen*.mp.
	8	school.mp.
	9	school-age.mp.
	10	1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7 OR 8 OR 9
	11	Limit 10 to systematic reviews
	12	Limit 11 to 2000-current
Condition	13	Outdoor air pollution.mp.
	14	exp Environmental Exposure/
	15	exp Air Pollution/
	16	exp Smog/
	17	13 OR 14 OR 15 OR 16
	18	Limit 17 to systematic reviews

Category	#	Term
	19	Limit 18 to 2000-current
Intervention	20	Program*.mp.
	21	Intervention*.mp.
	22	Surgery .mp.
	23	Education.mp.
	24	Assess*.mp.
	25	Exam*.mp.
	26	exp Health promotion/
	27	exp Health Knowledge, Attitudes, Practice/
	28	Treatment or exp therapeutics/
	29	exp Early diagnosis/
	30	Screening.mp. or exp Mass Screening/
	31	exp Rehabilitation/
	32	exp Patient care management/
	33	Prevention.mp.
	34	exp Self-Management/
	35	Self-monitoring.mp.
	36	20 OR 21 OR 24 OR 25 OR 26 OR 27 OR 28 OR 29 OR 30 OR 31 OR 32 OR 33 OR 34 OR 35
	37	Limit 36 to systematic reviews
	38	Limit 37 to 2000-current
Combination	39	10 AND 17
	40	10 AND 36
	41	10 AND 17 AND 36
	42	<b>Limit 41 to systematic reviews</b>
	43	Limit 42 to 2000-current

## INDOOR POLLUTION

Category	#	Term
Age	1	exp child/
	2	children*.mp.
	3	child*.mp.
	4	(schoolchild* or school child*).mp.
	5	adolescen*.mp.
	6	teen*.mp.
	7	pubescen*.mp.
	8	school.mp.
	9	school-age.mp.
	10	1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7 OR 8 OR 9

Category	#	Term
Condition	11	Limit 10 to systematic reviews
	12	Limit 11 to 2000-current
	13	exp Air Pollution, Indoor/
	14	exp Tobacco Smoke Pollution/
	15	Indoor smoke.mp.
	16	Home air quality.mp.
	17	13 OR 14 OR 15 OR 16
	18	Limit 17 to systematic reviews
Intervention	19	Limit 18 to 2000-current
	20	Program*.mp.
	21	Intervention*.mp.
	22	Surgery .mp.
	23	Education.mp.
	24	Assess*.mp.
	25	Exam*.mp.
	26	exp Health promotion/
	27	exp Health Knowledge, Attitudes, Practice/
	28	Treatment or exp therapeutics/
	29	exp Early diagnosis/
	30	Screening.mp. or exp Mass Screening/
	31	exp Rehabilitation/
	32	exp Patient care management/
	33	Prevention.mp.
	34	exp Self-Management/
	35	Self-monitoring.mp.
	36	20 OR 21 OR 24 OR 25 OR 26 OR 27 OR 28 OR 29 OR 30 OR 31 OR 32 OR 33 OR 34 OR 35
	37	Limit 34 to systematic reviews
	38	Limit 35 to 2000-current
Combination	39	10 AND 17
	40	10 AND 36
	41	10 AND 17 AND 36
	42	<b>Limit 41 to systematic reviews</b>
	43	Limit 42 to 2000-current

## ENVIROMENTAL CONTAMINENTS

Category	#	Term
Age	1	exp child/
	2	children*.mp.

Category	#	Term
	3	child*.mp.
	4	(schoolchild* or school child*).mp.
	5	adolescen*.mp.
	6	teen*.mp.
	7	pubescen*.mp.
	8	school.mp.
	9	school-age.mp.
	10	1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7 OR 8 OR 9
	11	Limit 10 to systematic reviews
	12	Limit 11 to 2000-current
Condition	13	Lead contaminants.mp.
	14	exp Lead/ or exp Lead Poisoning, Nervous System, Childhood/
	15	exp Environmental Pollutants/
	16	exp Water Pollutants, Chemical/
	17	exp Arsenic/
	18	13 OR 14 OR 15 OR 16 OR 17
	19	Limit 18 to systematic reviews
	20	Limit 19 to 2000-current
Intervention	21	Program*.mp.
	22	Intervention*.mp.
	23	Surgery .mp.
	24	Education.mp.
	25	Assess*.mp.
	26	Exam*.mp.
	27	exp Health promotion/
	28	exp Health Knowledge, Attitudes, Practice/
	29	Treatment or exp therapeutics/
	30	exp Early diagnosis/
	31	Screening.mp. or exp Mass Screening/
	32	exp Rehabilitation/
	33	exp Patient care management/
	34	Prevention.mp.
	35	exp Self-Management/
	36	Self-monitoring.mp.
	37	21 OR 24 OR 25 OR 26 OR 27 OR 28 OR 29 OR 30 OR 31 OR 32 OR 33 OR 34 OR 35 OR 36
	38	Limit 37 to systematic reviews
	39	Limit 38 to 2000-current
Combination	40	10 AND 18

Category	#	Term
	41	10 AND 37
	42	10 AND 18 AND 37
	43	<b>Limit 42 to systematic reviews</b>
	44	Limit 43 to 2000-current

## Appendix C: Eligibility Criteria

### *Eligibility Criteria for Inclusion*

**Objective of review:** To synthesize the effectiveness of interventions that are being delivered to 5 to 19.9 year olds, in LMIC and HIC that may impact one of the three outcomes:

1. Morbidity
2. Mortality
3. Development

Inclusion	Exclusion
<p><b>AGE-</b> if the mean age falls within 5-15, or the majority of participants are within that age range.</p> <p>*If a review does not specify an age range, but it appears to be specifically focused on children and adolescents, Include it.</p>	<p><b>AGE-</b> the majority of participants are under 5, or the majority are adults, or includes a wide range of ages, e.g. 0-68 with no disaggregated data.</p>
<p>Any <b>intervention</b> ( except interventions that would otherwise fall under and are specific to mental health or digital health review)</p> <p>*interventions that are delivered via a digital method and target our condition and outcomes of interest should be included.</p> <p>E.g., “Mobile app for children with diabetes to self-monitor blood glucose levels”. In this example the outcome is blood glucose levels, and since it’s directly related to the condition this should be included.</p> <p>E.g., “Psychosocial interventions for newly diagnosed children with type 1 diabetes to encourage regular self-glucose monitoring”, in this example the intervention is group therapy, but the outcome is improved glucose levels, since the outcome is directly related to diabetes this should be included.</p>	<p><b>Interventions</b> specifically targeting mental health conditions, and digital health (Screen time/screen use).</p> <p>E.g., “Treating depression with antidepressant medications in children with diabetes”. In this example the effectiveness of the intervention being measured is antidepressants, and the outcome is reduction of symptoms of depression. Since both intervention and outcomes are related to a secondary condition, this would not fall under our scope.</p> <p>E.g., “Interventions aimed at reducing screen time in youth with diabetes”. In this example the outcome is hours of screen time per day, and thus should be excluded.</p>
Includes quantitative data on the effectiveness of interventions (i.e. RR, OR, SMD).	Narrative or descriptive summaries of results. No data on effectiveness of interventions (except Cancer)

## Appendix D: Included Reviews

Asthma
Chan M, Gray M, Burns C, et al. Community-based interventions for childhood asthma using comprehensive approaches: a systematic review and meta-analysis. <i>Allergy, Asthma &amp; Clinical Immunology</i> . 2021;17(1):1-16.
Fares MM, Alkhaled LH, Mroueh SM, Akl EA. Vitamin D supplementation in children with asthma: a systematic review and meta-analysis. <i>BMC Research Notes</i> . 2015;8:23.
Guevara JP, Wolf FM, Grum CM, Clark NM. Effects of educational interventions for self management of asthma in children and adolescents: systematic review and meta-analysis. <i>BMJ</i> . 2003;326(7402):1308-1309.
Harris K, Kneale D, Lasserson TJ, McDonald VM, Grigg J, Thomas J. School-based self-management interventions for asthma in children and adolescents: a mixed methods systematic review. <i>Cochrane Database of Systematic Reviews</i> . 2019(1).
Kneale D, Harris K, McDonald VM, Thomas J, Grigg J. Effectiveness of school-based self-management interventions for asthma among children and adolescents: Findings from a Cochrane systematic review and meta-analysis. <i>Thorax</i> . 2019;74(5):432-438.
Lin J, Zhang Y, He C, Dai J. Probiotics supplementation in children with asthma: A systematic review and meta-analysis. <i>Journal of Paediatrics and Child Health</i> . 2018;54(9):953-961.
Mikhailov A, Kane I, Aronoff SC, Luck R, Delvecchio MT. Utility of adjunctive macrolide therapy in treatment of children with asthma: A systematic review and meta-analysis. <i>Journal of Asthma and Allergy</i> . 2013(6):23-29.
Mohammed S, Goodacre S. Intravenous and nebulised magnesium sulphate for acute asthma: Systematic review and meta-analysis. <i>Emergency Medicine Journal</i> . 2007;24(12):823-830.
Pojsupap S, Iliriani K, Sampaio TZ, et al. Efficacy of high-dose vitamin D in pediatric asthma: a systematic review and meta-analysis. <i>Journal of Asthma</i> . 2015;52(4):382-390.
Riverin BD, Maguire JL, Li P. Vitamin D supplementation for childhood asthma: A systematic review and meta-analysis. <i>PLoS ONE</i> . 2015;10 (8) (no pagination)(e0136841).
Rodrigo GJ, Castro-Rodriguez JA. Anticholinergics in the treatment of children and adults with acute asthma: A systematic review with meta-analysis. <i>Thorax</i> . 2005;60(9):740-746.
Rodrigo GJ, Neffen H. Systematic review on the use of omalizumab for the treatment of asthmatic children and adolescents. <i>Pediatric Allergy and Immunology</i> . 2015;26(6):551-556.
Rodrigo GJ, Neffen H. Efficacy and safety of tiotropium in school-age children with moderate-to-severe symptomatic asthma: A systematic review. <i>Pediatric Allergy and Immunology</i> . 2017;28(6):573-578.
Su Z, Li R, Gai Z. Intravenous and Nebulized Magnesium Sulfate for Treating Acute Asthma in Children: A Systematic Review and Meta-Analysis. <i>Pediatric Emergency Care</i> . 2018;34(6):390-395.
Wu J, Yang XW, Zhang M. Massage Therapy in Children with Asthma: A Systematic Review and Meta-Analysis. <i>Evidence-based Complementary and Alternative Medicine</i> . 2017;2017 (no pagination)(5620568).
Xu X, Wang HY, Zhang ZW, Han H, Wang Y. Effect of massage therapy on pulmonary functions of pediatric asthma: A systematic review and meta-analysis of randomized controlled trials. <i>European Journal of Integrative Medicine</i> . 2016;8(2):98-105.
Yorke J, Fleming SL, Shuldham C. A systematic review of psychological interventions for children with asthma. <i>Pediatric Pulmonology</i> . 2007;42(2):114-124.
Zhang W, Wang Q, Liu L, Yang W, Liu H. Effects of physical therapy on lung function in children with asthma: a systematic review and meta-analysis. <i>Pediatric research</i> . 2020:1-9.



Zhong CS, Melendez-Torres GJ. The effect of peer-led self-management education programmes for adolescents with asthma: A systematic review and meta-analysis. <i>Health Education Journal</i> . 2017;76(6):676-694.
<b>Type 1 Diabetes</b>
Al Khalifah RA, Alnhdi A, Alghar H, Alanazi M, Florez ID. The effect of adding metformin to insulin therapy for type 1 diabetes mellitus children: A systematic review and meta-analysis. <i>Pediatric Diabetes</i> . 2017;18(7):664-673.
Armour TA, Norris SL, Jack L, Jr., Zhang X, Fisher L. The effectiveness of family interventions in people with diabetes mellitus: a systematic review. <i>Diabetic Medicine</i> . 2005;22(10):1295-1305.
Benkhadra K, Alahdab F, Tamhane S, et al. Real-time continuous glucose monitoring in type 1 diabetes: a systematic review and individual patient data meta-analysis. <i>Clinical Endocrinology</i> . 2017;86(3):354-360.
Hampson SE, Skinner TC, Hart J, et al. Effects of educational and psychosocial interventions for adolescents with diabetes mellitus: a systematic review. <i>Health Technology Assessment (Winchester, England)</i> . 2001;5(10):1-79.
Liu F, Guan Y, Li X, et al. Different Effects of Structured Education on Glycemic Control and Psychological Outcomes in Adolescent and Adult Patients with Type 1 Diabetes: A Systematic Review and Meta-Analysis. <i>International journal of endocrinology</i> . 2020;2020.
MacMillan F, Kirk A, Mutrie N, Matthews L, Robertson K, Saunders DH. A systematic review of physical activity and sedentary behavior intervention studies in youth with type 1 diabetes: study characteristics, intervention design, and efficacy. <i>Pediatric Diabetes</i> . 2014;15(3):175-189.
Winkley K, Ismail K, Landau S, Eisler I. Psychological interventions to improve glycaemic control in patients with type 1 diabetes: systematic review and meta-analysis of randomised controlled trials. <i>BMJ</i> . 2006;333(7558):65.
<b>Sickle Cell Disease</b>
Asnani MR, Quimby KR, Bennett NR, Francis DK. Interventions for patients and caregivers to improve knowledge of sickle cell disease and recognition of its related complications. <i>Cochrane Database of Systematic Reviews</i> . 2016;10:CD011175.
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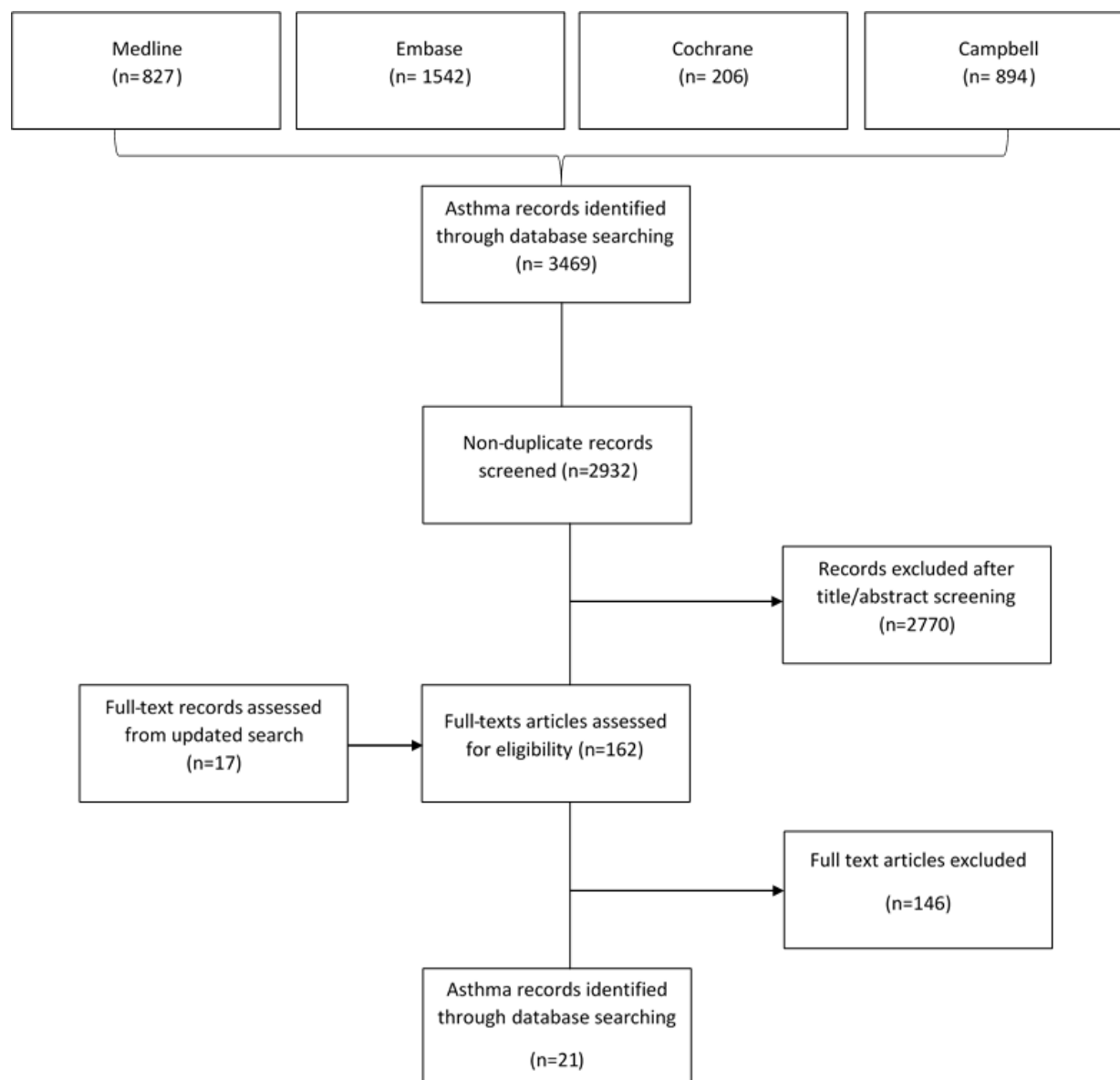
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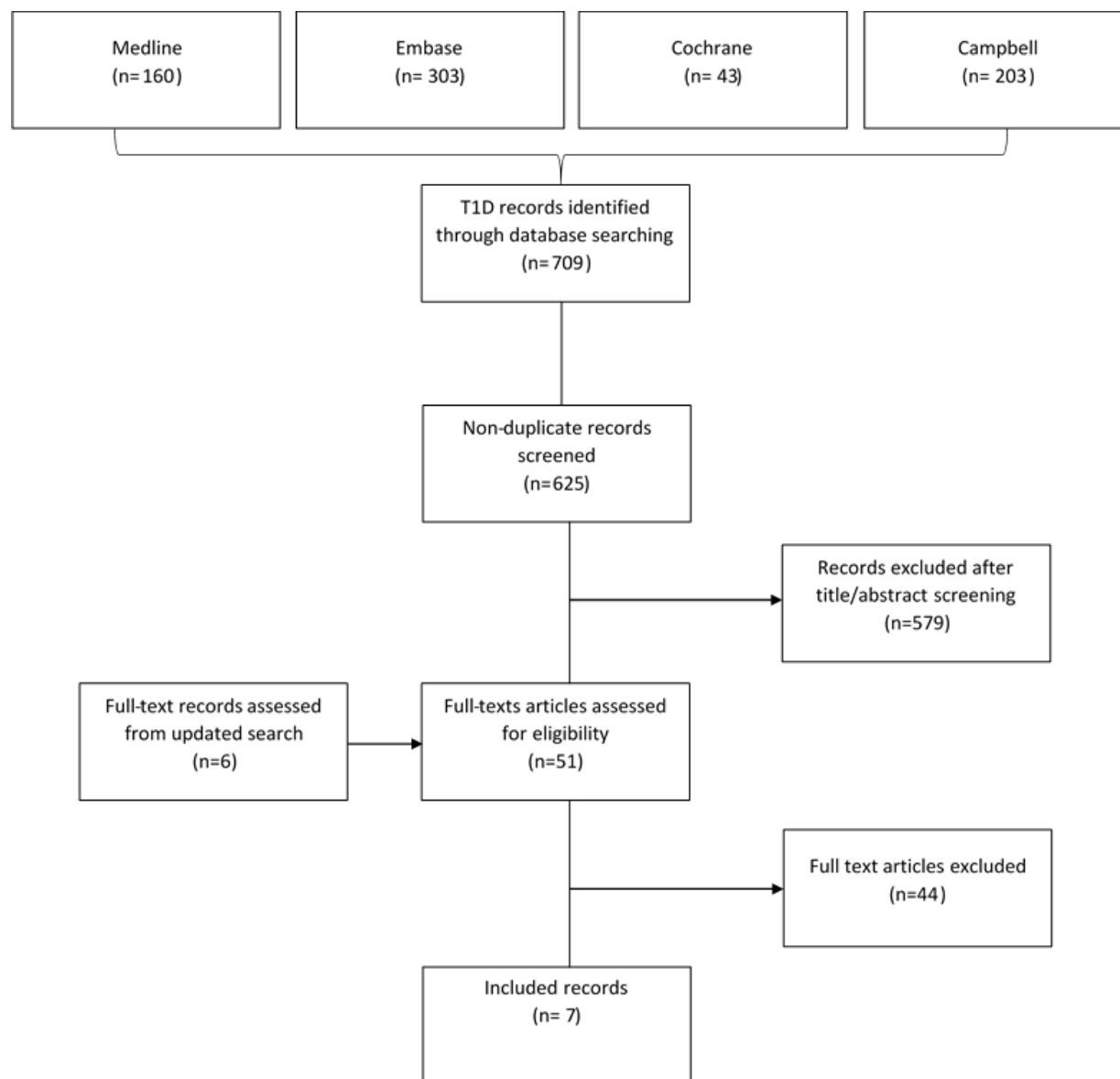
## Appendix F: PRISMA flow diagrams

### Asthma

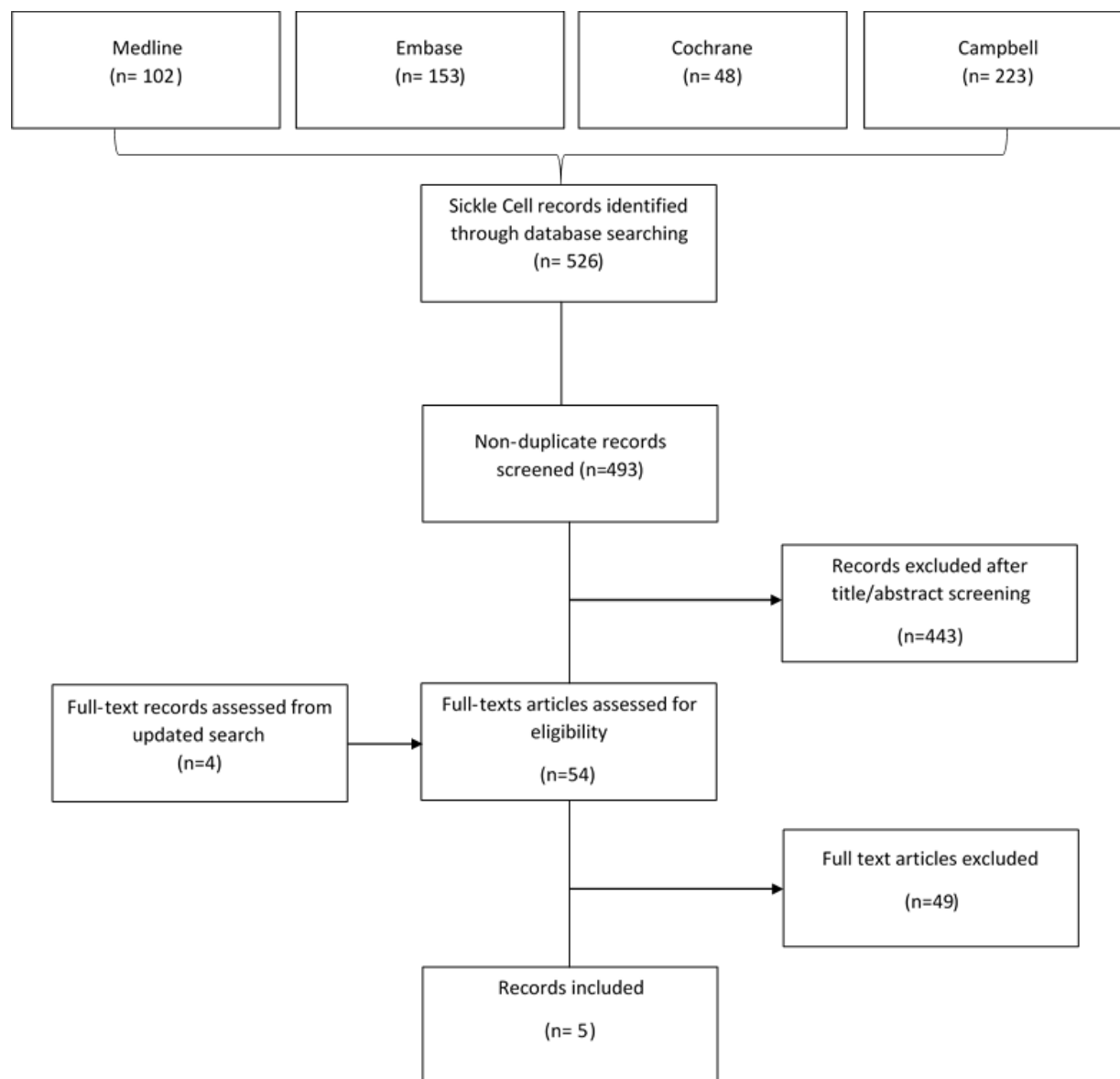




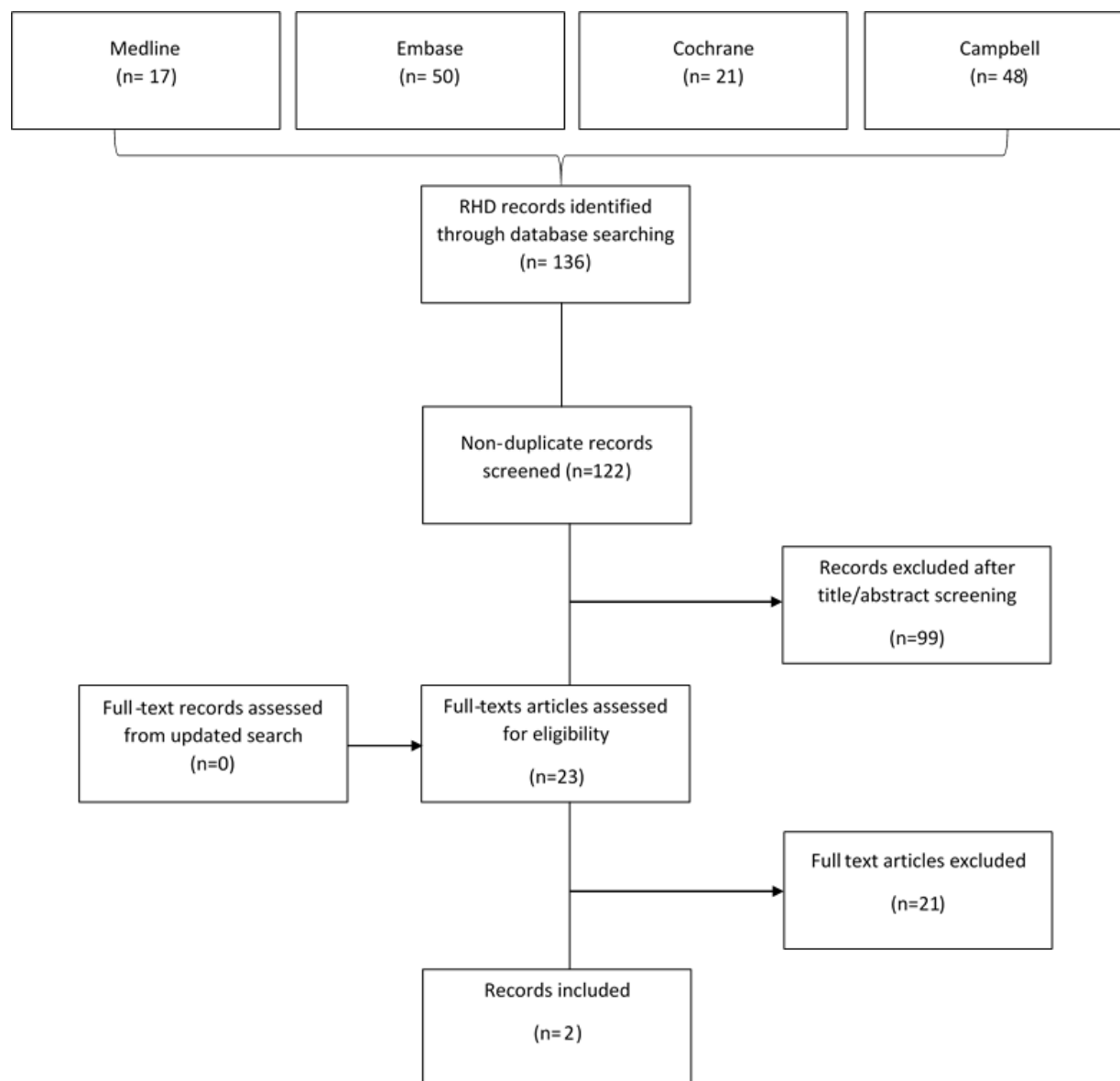
## Type 1 Diabetes



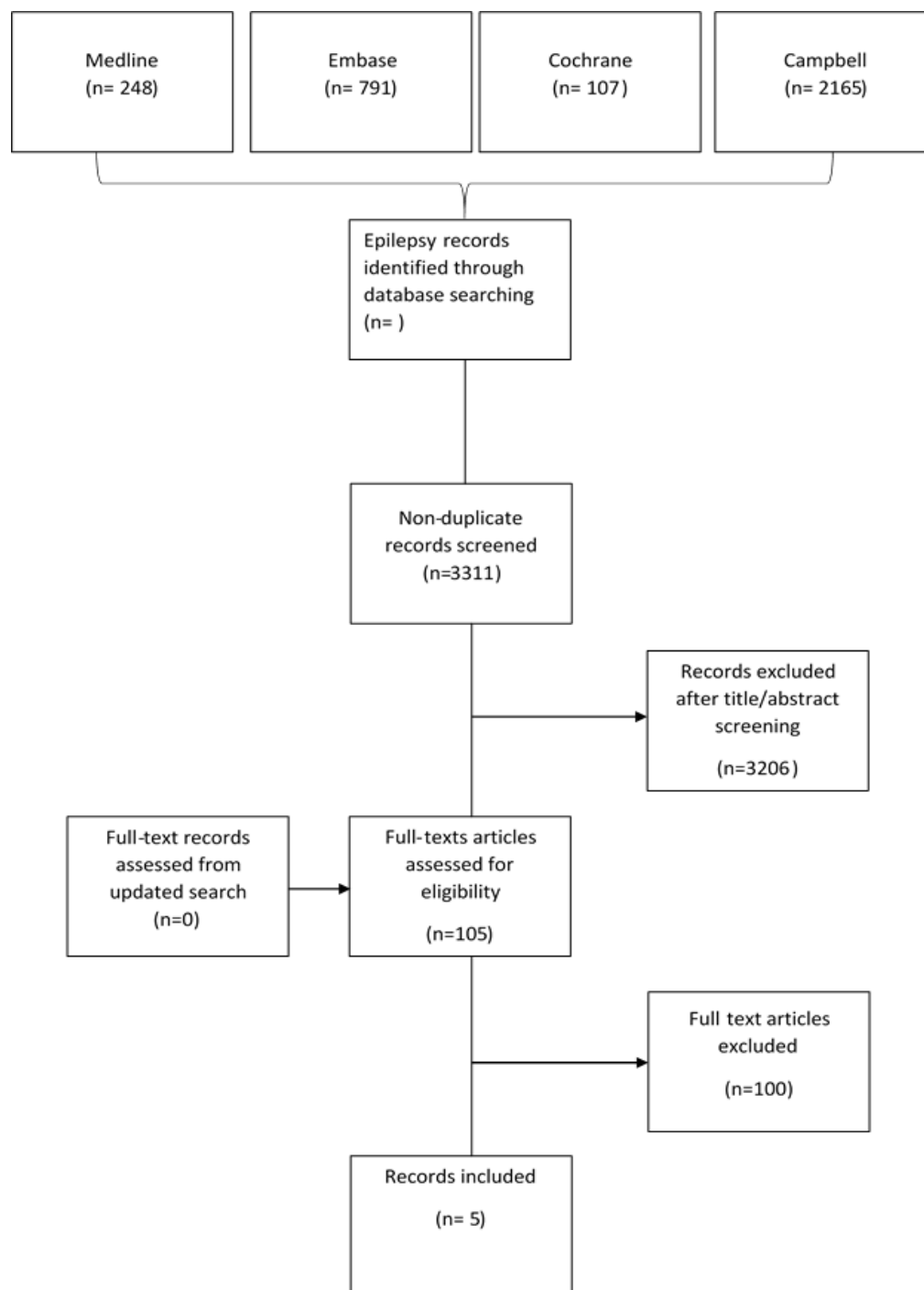
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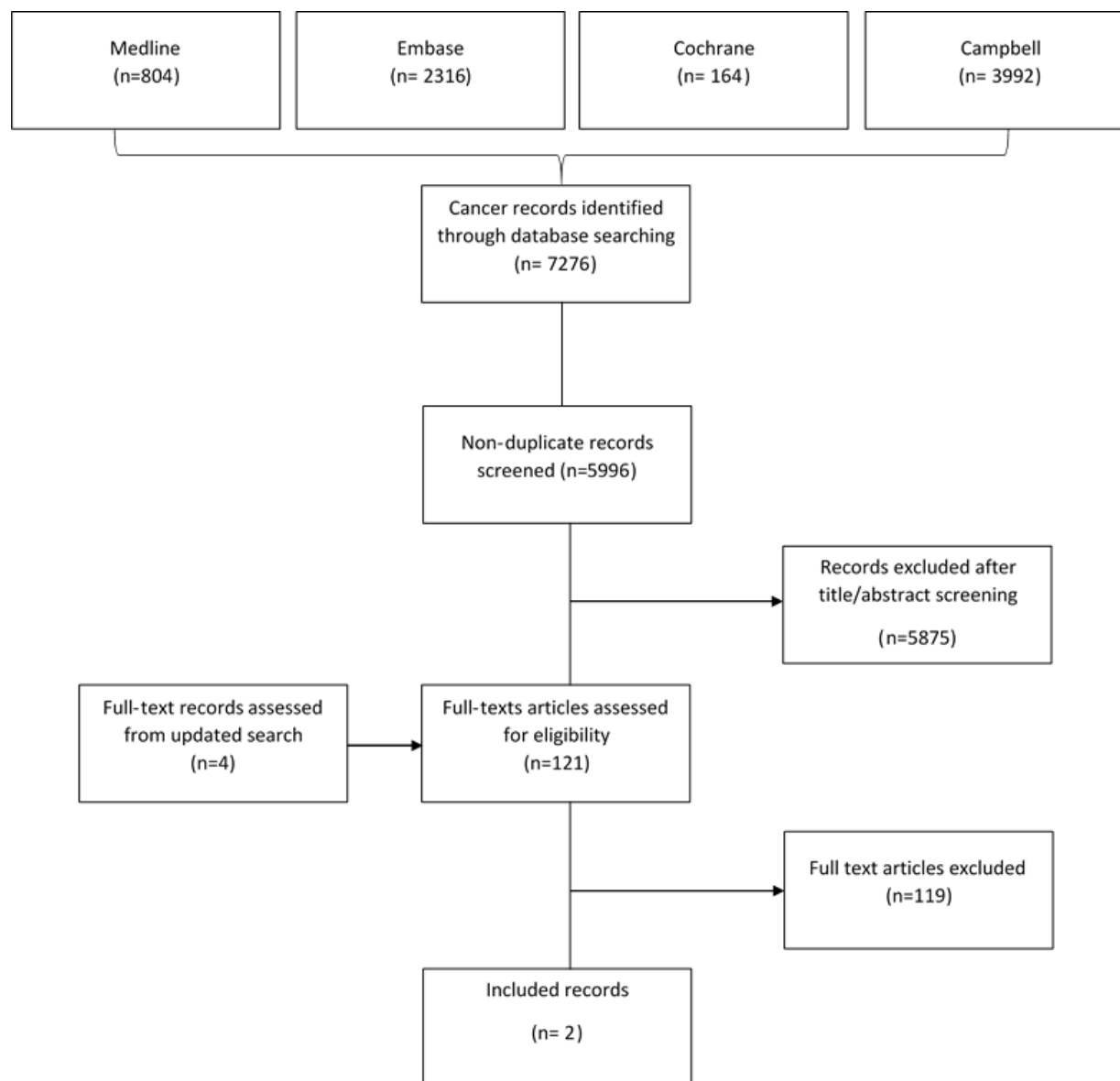
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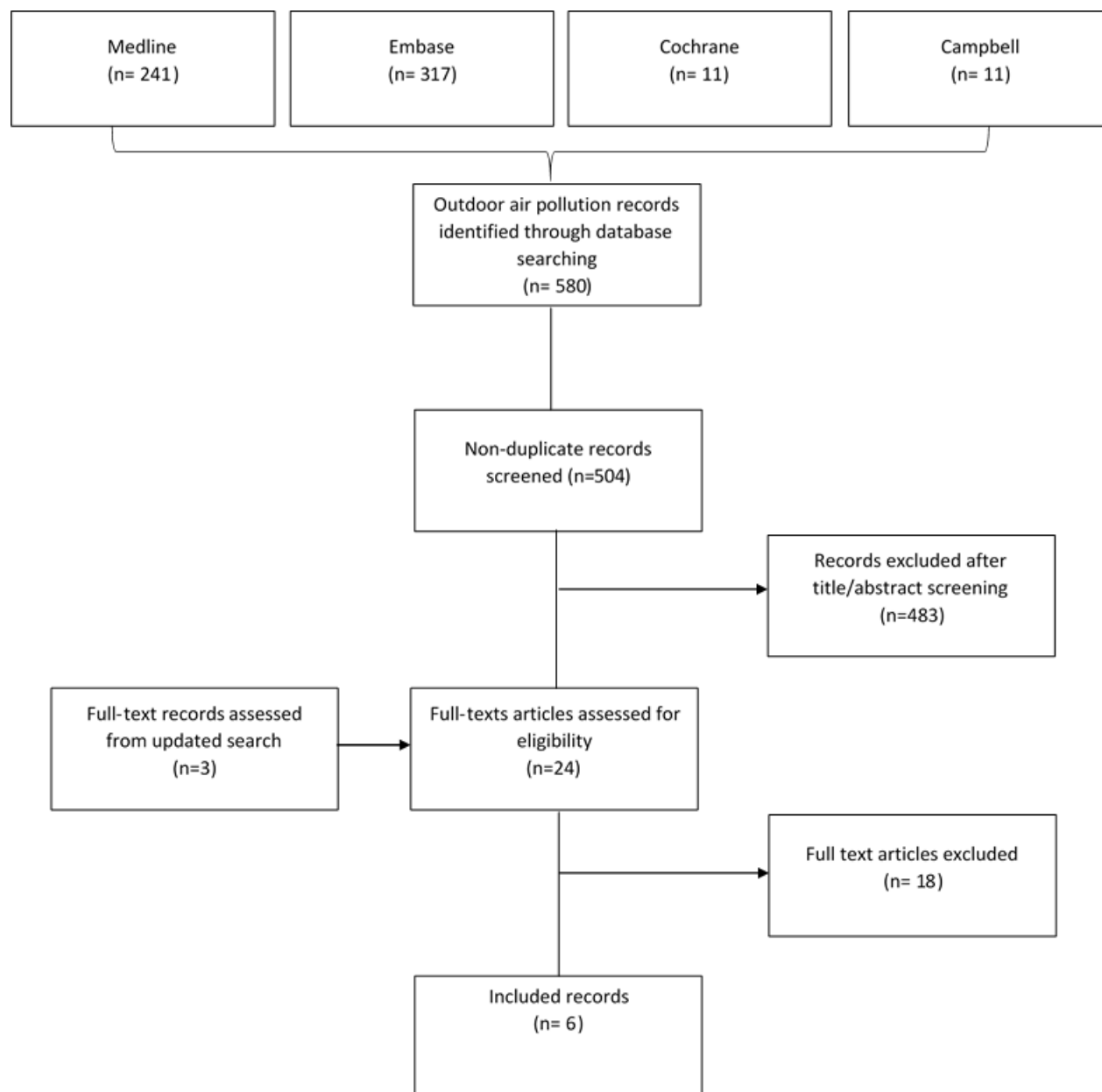
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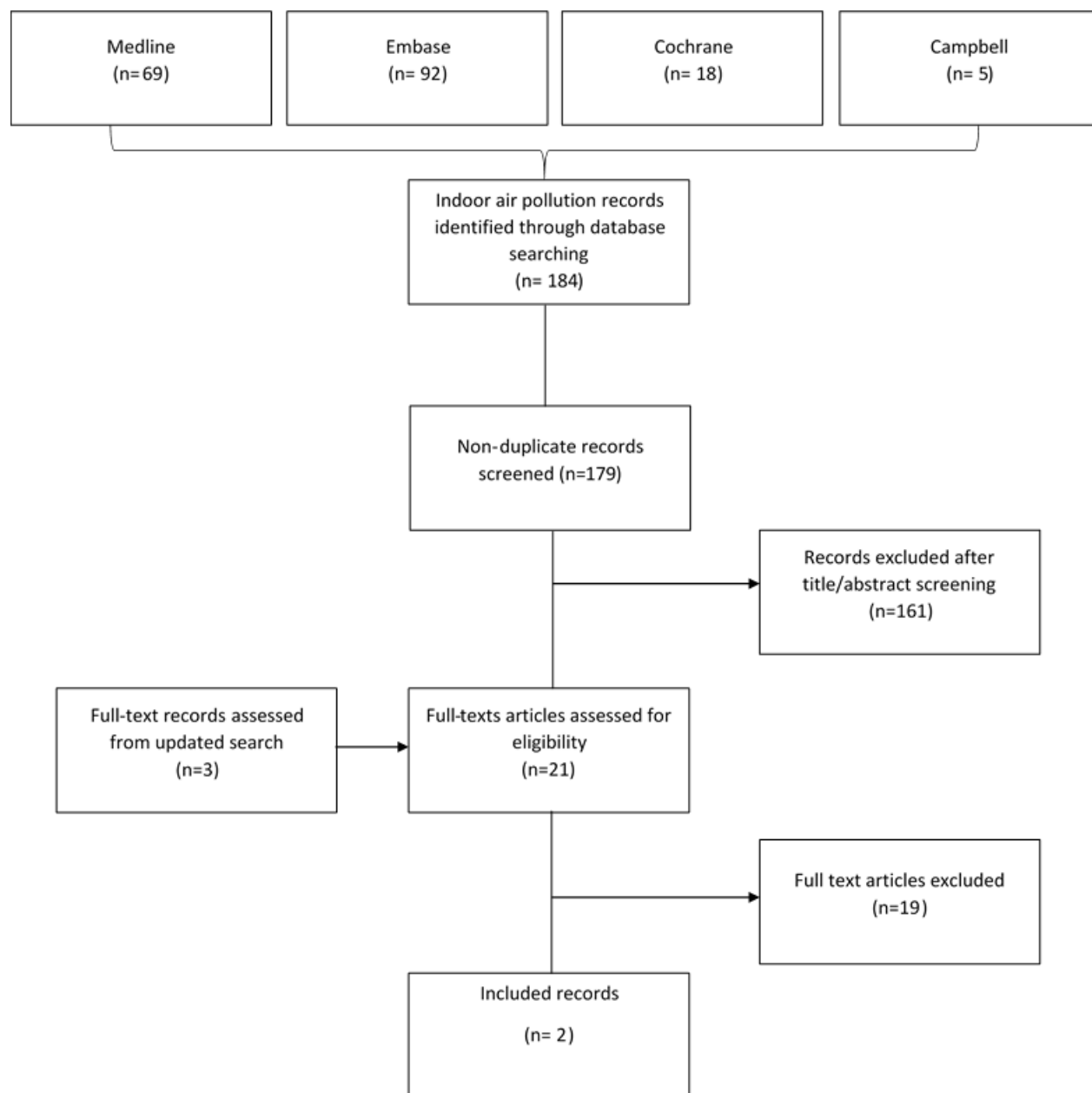
## Cancer



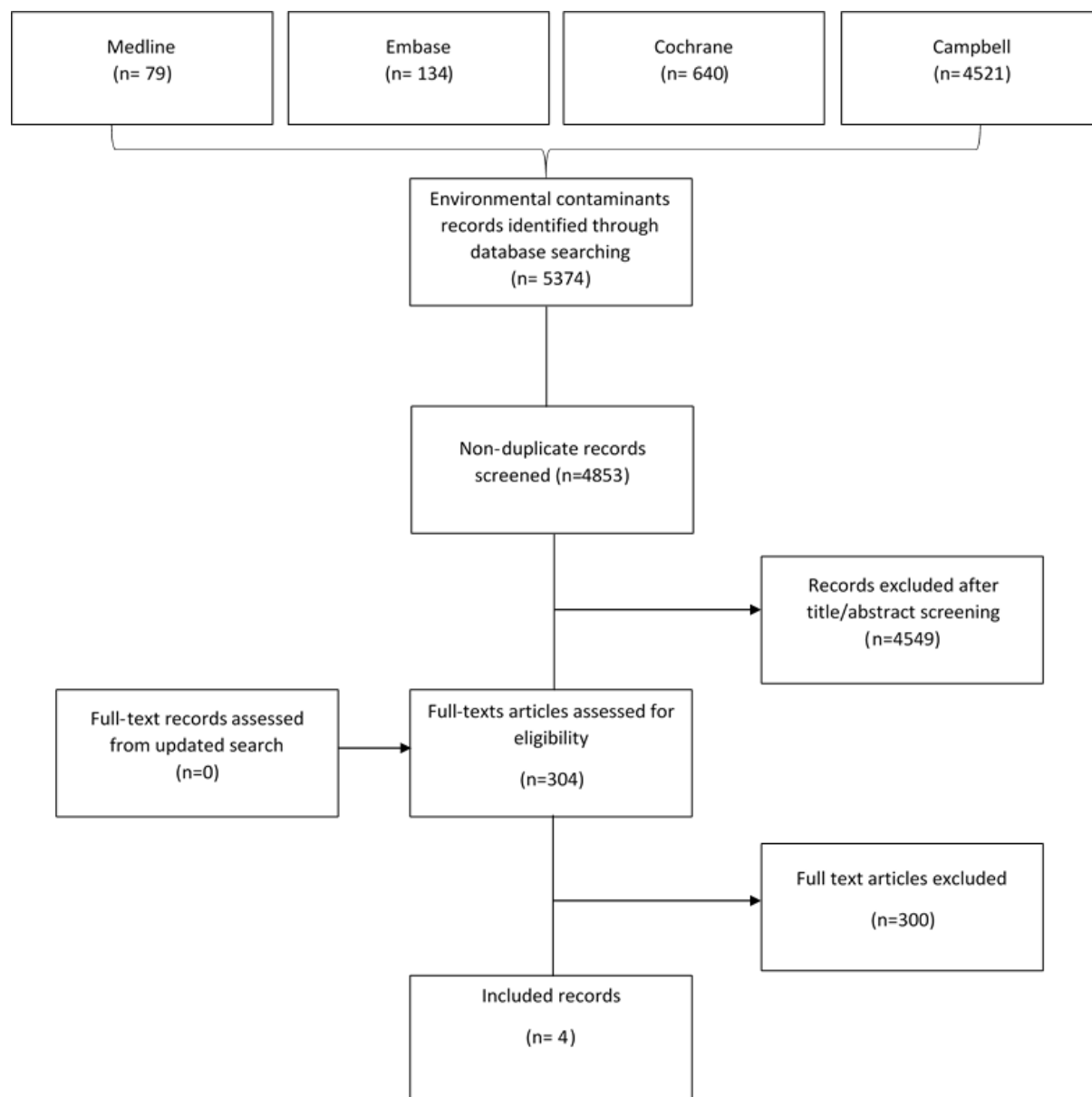
## Outdoor air pollution



## Indoor air pollution



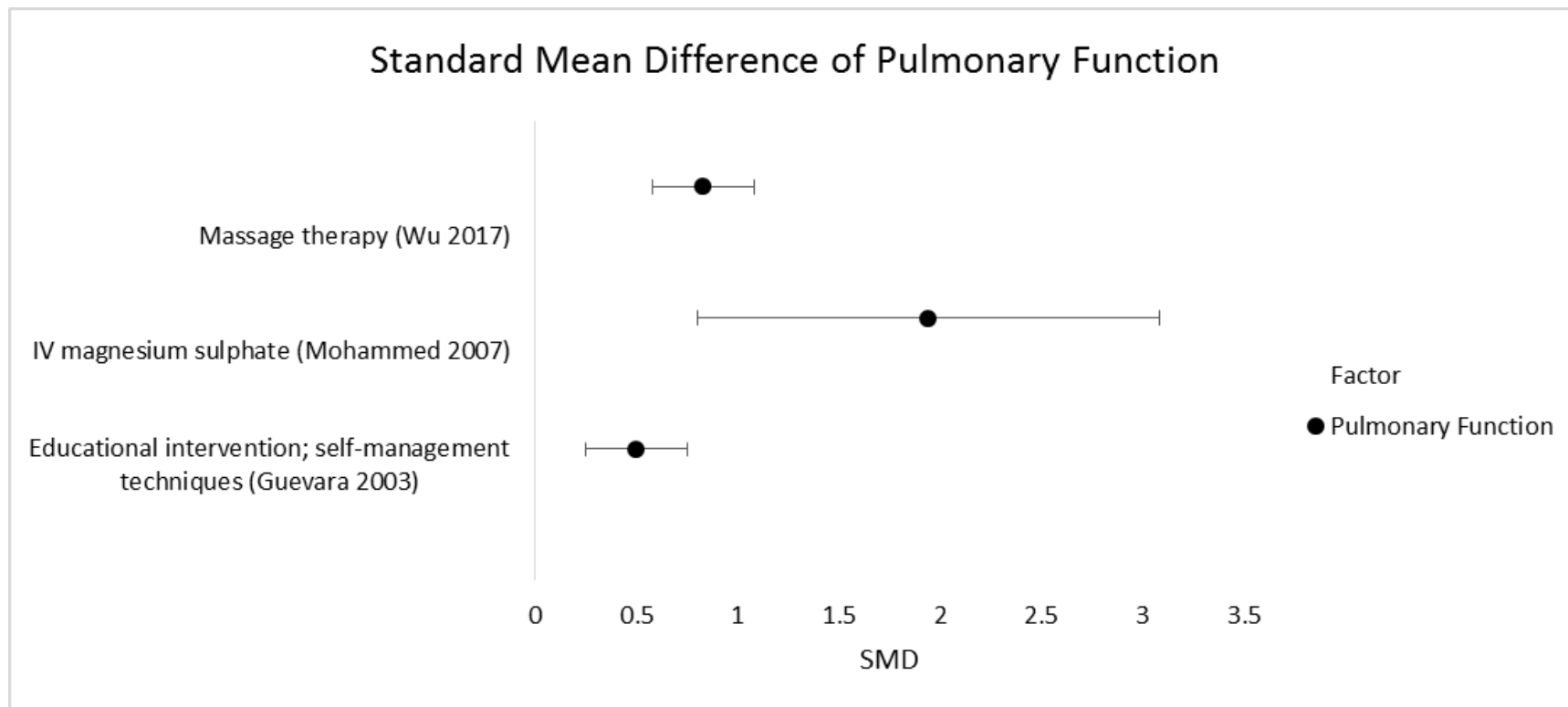
## Environmental Contaminants



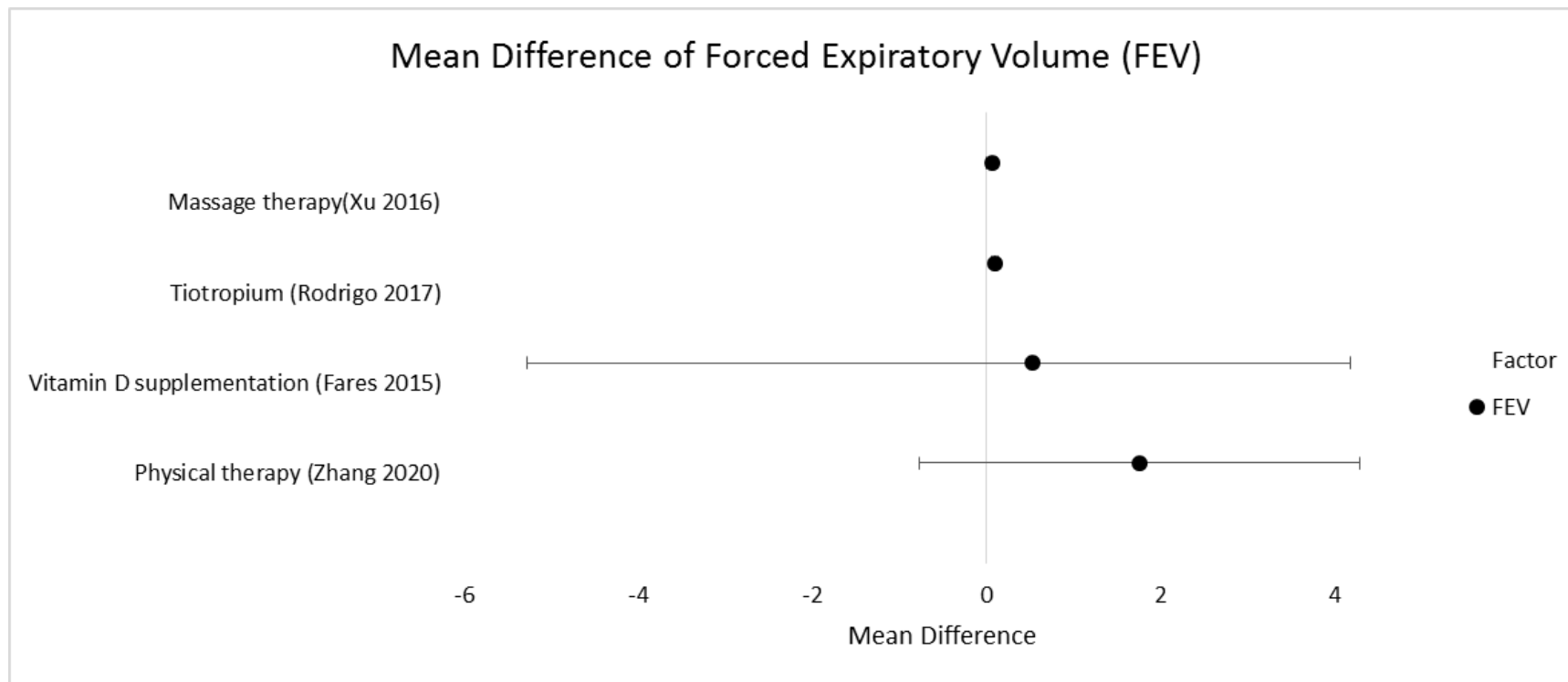


## Appendix G: Forest plots by condition, demonstrating effectiveness of interventions on select outcomes.

Supplementary Figure 1. Pulmonary function in asthma patients and the standard mean difference observed as a result of various interventions. All three intervention types show improvement in pulmonary function.



**Supplementary Figure 2. Pulmonary functioned in asthma patients measured as forced expiratory volume (L). Physical therapy showed the greatest impact on forced expiratory volume.**



**Supplementary Figure 3. Intervention effectiveness reported as mean difference percent change in HbA1c as a measure of Type 1 Diabetes status. Educational and psychosocial interventions showed the greatest impact on percent change in HbA1c while physical activity interventions had the lowest impact on percent change in HbA1c.**

