

Additional File 3. Risk of bias and relevance assessments

Study	1. Risk of bias in sampling / recruitment	2. Risk of bias in response rate	3. Risk of bias in outcome measurement	4. Appropriate adjustment of SEP for confounding?	5. Risk of bias after statistical methods to address missing data	6. Any design-specific sources of bias?	7. Any conflicts of interests reported?	8. Overall risk prevalence results could be due to bias / chance	9. Relevance to young people in UK?
[Aarhus Screening Study][1]	LOW	HIGH	LOW	N/A	HIGH	NO	NO	HIGH	MEDIUM
ALSPAC [2]	LOW	HIGH	LOW	YES	MEDIUM	NO	NO	MEDIUM	HIGH
[Amsterdam Postal Screening][3]	LOW	MEDIUM for women; HIGH for men	LOW	F: Not adjusted; M: YES	HIGH	YES-LOW	NO	MEDIUM	MEDIUM
[Antwerp School Study][4]	MEDIUM	LOW	LOW	YES	MEDIUM	NO	NO	MEDIUM	MEDIUM
MSSP[5]	MEDIUM	HIGH	LOW	YES	MEDIUM	YES-LOW	NO	MEDIUM	LOW
BSBS[6]	LOW	LOW	LOW	N/A	MEDIUM	YES-LOW	NO	MEDIUM	LOW
ClasS[7, 8]	LOW	HIGH	LOW	YES	MEDIUM	NO	NO	MEDIUM	HIGH
[Copenhagen HPV Study][9]	LOW	MEDIUM	HIGH	N/A	HIGH	NO	NO	HIGH	MEDIUM

[Croatian survey][10]	LOW	HIGH	LOW	N/A	HIGH	YES-MEDIUM	NO	HIGH	MEDIUM
[Finnmark school study][11]	MEDIUM	LOW	LOW	F: YES; M: Not adjusted	HIGH	YES-LOW	NO	MEDIUM	LOW
[NatChla][12]	LOW	HIGH	LOW	F: YES; M: Not adjusted	MEDIUM	YES-LOW	NO	MEDIUM	MEDIUM
[Netherlands MHS screening pilot][13, 14]	LOW	HIGH	LOW	YES	MEDIUM	NO	NO	MEDIUM	MEDIUM
NSSLAH Slovenia[15]	LOW	MEDIUM	LOW	N/A	MEDIUM	NO	NO	MEDIUM	MEDIUM
[Eight country HPV study][16]	HIGH	HIGH	LOW	N/A	HIGH	NO	NO	HIGH	MEDIUM
[Swedish women's HPV study][17]	LOW	MEDIUM	HIGH	N/A	HIGH	NO	NO	HIGH	LOW
[Prevalence Survey Estonia][18]	LOW	HIGH	LOW	N/A	MEDIUM	NO	NO	HIGH	LOW
Natsal-2[19] & Natsal-3[20]	LOW	HIGH	LOW	Natsal-2: Not adjusted; Natsal-3: YES	MEDIUM	NO	NO	MEDIUM	HIGH
NHANES[21, 22]	LOW	LOW	LOW	YES	MEDIUM	NO	NO	LOW	MEDIUM
Add Health[23, 24]	MEDIUM	MEDIUM	LOW	F: Not adjusted M: YES	MEDIUM	NO	NO	MEDIUM	MEDIUM
[Nattraby Study][25]	LOW	MEDIUM	HIGH	N/A	HIGH	NO	NO	HIGH	LOW
Aarhus Cluster Randomised Home Sampling Trial[26, 27]	MEDIUM	HIGH	LOW	N/A	HIGH	NO	NO	HIGH	MEDIUM

[Vasteras school study][28]	MEDIUM	LOW	HIGH	N/A	HIGH	YES	NO	HIGH	MEDIUM
NSAM[29]	LOW	MEDIUM: 18-19 year olds; HIGH : 22-26 year olds	LOW	N/A	UNCLEAR	NO	NO	MEDIUM	MEDIUM
[Chlamydia Prevalence in Laviana][30]	HIGH	HIGH	LOW	N/A	HIGH	NO	YES	HIGH	MEDIUM
KiGGS (German Health Interview and Examination Survey for Children and Adolescents)[31]	LOW	MEDIUM	LOW	YES	MEDIUM	NO	NO	MEDIUM	MEDIUM
[Rogaland county, Norway][32]	HIGH	HIGH	LOW	Not adjusted.	HIGH	NO	NO	HIGH	MEDIUM
Canadian Health Measures Survey (CHMS)[33]	LOW	MEDIUM	LOW	N/A	MEDIUM	NO	UNCLEAR	MEDIUM	LOW
CSI[34]	MEDIUM	HIGH	LOW	N/A	MEDIUM	NO	NO	HIGH	MEDIUM
Melbourne survey[35]	MEDIUM	HIGH	LOW	N/A	MEDIUM	NO	NO	MEDIUM	MEDIUM

N/A: not applicable.

Aspects of studies assessed as involving high risk of bias are highlighted in bold.

Note: Question 4 examined the appropriateness of analyses of associations between chlamydia and socioeconomic position for the purposes of this review. Studies that did not report adjusted odds ratios were classified as not adjusting appropriately, since adjusted odds ratios were required for meta-analysis in this review.

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