Supplementary Material 1: Full table of included study details, effectiveness and quality ratings for peer learner outcomes

Author, Year	Study Design	Nation	Sample size	Health Area	Outcome & effectiveness	Effectiveness	Quality Score	Quality Rating
Aslan & Sahin, 2007	Non- randomised, pre-post design	Turkey	279	Alcohol, smoking, substance use	↑ Knowledge & attitudes (See paper for a breakdown of results as reported by the author at the level of multiple individual statements)	Effective	2	Medium
Bloor et al. 1999	Non- randomised, intervention vs. control	UK	1300	Alcohol, smoking, substance use	↔ Change in smoking behaviour immediately post intervention (p=0.22) ↑ Smoking abstinence in ex-smokers (p =0.004)	Mixed	1	Low
Botvin et al. 1990	Randomised, peer-led vs. teacher-led	USA	1185	Alcohol, smoking, substance use	Peer intervention, peer intervention + booster $\leftrightarrow, \uparrow$ Smoking use (NS), (<.01) $\leftrightarrow, \leftrightarrow$ Alcohol use (NS), (NS) $\leftrightarrow, \uparrow$ Marijuana use (NS), (<.05) \uparrow, \uparrow Knowledge: Tobacco (p < .0001), (p < .0001) \uparrow, \uparrow Knowledge: Alcohol (p < .01), (p < .0001) $\leftrightarrow, \leftrightarrow$ Knowledge: Marijuana (NS), (NS) $\leftrightarrow, \uparrow$ Attitudes: Tobacco (NS), (p < .01) $\leftrightarrow, \leftrightarrow$ Attitudes: Alcohol (NS), (NS) $\leftrightarrow, \leftrightarrow$ Marijuana (NS), (NS) $\leftrightarrow, \leftrightarrow$ Personality: Assertiveness (NS), (NS)	Ineffective	2	Medium

					$\begin{array}{c} \leftrightarrow, \leftrightarrow \\ \text{Personality: Locus of control (NS), (p < .01)} \\ \leftrightarrow, \uparrow \\ \text{Personality: Social anxiety (NS), (NS)} \\ \leftrightarrow, \leftrightarrow \\ \text{Personality: Self-esteem (NS), (NS)} \\ \leftrightarrow, \leftrightarrow \\ \text{Personality: Smoking influenceability (NS), (NS)} \\ \leftrightarrow, \leftrightarrow \\ \text{Personality: General influenceability (NS), (NS)} \end{array}$			
Campbell et al. 2008	Cluster randomised controlled trial, intervention vs. control	UK	10,730	Alcohol, smoking, substance use	个 All students: Smoking prevalence immediately after intervention (<i>p</i> =0.031)	Effective	5	High
Demirezen et al. 2020	Non- randomised, pre-post survey	Turkey	663	Alcohol, smoking, substance use	\uparrow Knowledge and attitude scores ($p = < .01$) $\uparrow \leftrightarrow$ Incidence of smoking: just once ($p = < .001$), yes (NS) $\leftrightarrow \leftrightarrow$ Incidence of alcohol use: just once (NS), yes (NS) $\leftrightarrow \leftrightarrow$ Incidence of cannabis use: just once (NS), yes (NS) $\leftrightarrow \leftrightarrow$ Incidence of using ecstasy: just once (NS), yes (NS) $\leftrightarrow \leftrightarrow$ Incidence of using volatiles: just once (NS), yes (NS) $\uparrow \leftrightarrow$ Incidence of using non-prescription drugs: just once ($p = < .001$), yes (NS)	Ineffective	3	Medium
Erhard, 1999	Non- randomised, peer-led vs. adult-led	Israel	2447	Alcohol, smoking, substance use	\uparrow Evaluation of knowledge: (p =< .05) \uparrow Evaluation of motivation: (p =< .05) \uparrow	Effective	2	Medium

					Increased curiosity: $(p = < .05)$ \uparrow Facilitators as an address: $(p = < .05)$ \uparrow Improved relations: $(p = < .05)$ \uparrow Satisfaction: $(p = < .05)$			
LaChause, 2008	Randomised, intervention vs. control	USA	114	Alcohol, smoking, substance use	$ \uparrow \\ FAS knowledge (p = .01) \\ \leftrightarrow \\ Attitudes toward alcohol use during pregnancy (NS) \\ \leftrightarrow \\ Likelihood to use alcohol during pregnancy (NS) \\ \leftrightarrow \\ Intention to use alcohol during pregnancy (NS) \\ \end{array} $	Ineffective	1	Low
Lotrean et al. 2010	Randomised, intervention vs. control	Romania	1071	Alcohol, smoking, substance use	\uparrow Pros of smoking (p = <0.01) \leftrightarrow Cons of smoking (NS) \uparrow Self-efficacy social (p = <0.05) \leftrightarrow Self-efficacy emotional (NS) \leftrightarrow Self-efficacy situational (NS) \uparrow Intention to smoke (p=<0.05)	Mixed	4	High
Mall & Bhagyalaxmi, 2017	Cluster randomised trial, intervention vs. control	India	802	Alcohol, smoking, substance use	\uparrow Tobacco consumption at follow-up (p =< 0.01)	Effective	1	Low
Mohammadi et al. 2019	Cluster randomised trial,	Iran	1807	Alcohol, smoking, substance use	$ \uparrow \\ Smoking-related knowledge: (p = <0.001) \\ \leftrightarrow \\ Attitude toward smoking : (p=0.124) $	Effective	4	High

	intervention vs. control				\uparrow Normative beliefs: (<i>p</i> =<0.001) \uparrow Intention to tobacco use: (<i>p</i> = <0.013) \leftrightarrow			
Murray et al. 1987	Non- randomised, pre-post survey	USA	Study 1: 3154 Study 2: 3820	Alcohol, smoking, substance use	个 Reduced smoking incidence at 1 year 个 Smoking intensity levels at 1 year 个 Peer-led social influence condition	Effective	2	Medium
Perry et al. 1980	Non- randomised, intervention vs. control	USA	707	Alcohol, smoking, substance use	个 Smoked in past week 个 Smoked in past month	Effective	4	High
Perry et al. 1989	Randomised, peer-led, teacher-led, control	Multination al (Australia, Chile, Norway Switzerland)	2536	Alcohol, smoking, substance use	\uparrow Alcohol use (p =<.005) \uparrow Knowledge (p =<.005) \uparrow Attitudes (p =<.005) \downarrow Skills (p =<.08) \uparrow Friends' Drinking (p =<.005)	Effective	2	Medium
Severson et al. 1991	Randomised, peer-led vs. teacher-led	USA	1768	Alcohol, smoking, substance use	\uparrow Smokeless tobacco use in males (p =<0.05) \uparrow Smokeless tobacco cessation rate \leftrightarrow Cigarette Smoking (NS) \downarrow Carbon monoxide level (p =<0.05) \leftrightarrow Alcohol use (NS)	Ineffective	4	High

					↔ Marijuana use (NS)			
Weichold & Silbereisen, 2012	Randomised, peer-led, teacher-led, control	Germany	105	Alcohol, smoking, substance use	Alcohol consumption – higher in peer-led condition compared to teacher-led ($p = < .05$ for T2) than in control ($p = < .01$ for T2).	Ineffective	2	Medium
Al-Sheyab et al. 2012	Cluster randomised controlled trial, intervention vs. control	USA	240	Asthma	个 Health-related quality of life (p =<.05) 个 Self-efficacy to resist smoking (p =<.05) 个 Knowledge of asthma self-management (p =<.05)	Effective	2	Medium
Al-Sheyab et al. 2016	Cluster, randomised controlled trial, intervention vs. control	USA	486	Asthma	\uparrow Smoking related knowledge ($p = < 0.001$) \uparrow Level of nicotine dependence ($p = < 0.001$) \uparrow Asthmas control scores ($p = < 0.001$)	Effective	2	Medium
Gibson et al. 1998	Controlled trial,	Australia	935	Asthma	\uparrow Mean scores of asthma Knowledge (p =< 0.001)	Effective	3	Medium

	intervention vs. control							
McCallum et al. 2017	Non- randomised, pre – post survey	Australia	203	Asthma	↔ 'Asthma control test score: no change	Ineffective	2	Medium
Shah et al. 2001	Cluster randomised controlled trial, intervention vs. control	Australia	272	Asthma	\uparrow Quality of life (p =0.01) \uparrow Activities domain (p =0.028) \uparrow Emotions domain (males only), (p =0.02) \uparrow School 6bsenteeism (p =<.05) \leftrightarrow Asthma attacks at school (NS)	Effective	3	Medium
Palladino et al. 2016	Non- randomised, intervention vs. control	Italy	Trial 1: 622 Trial 2: 461	Bullying	\uparrow Victimization: (p =.003) \uparrow Bullying - (p =.010) \uparrow Cybervictimization - (p =0.002) \uparrow Cyberbullying - (p = 0.009)	Effective	4	High
lsik et al. 2013	Non- randomised, cross- sectional survey	Turkey	2829	Disease prevention	\uparrow Intention to participate in BB rituals (<i>p</i> =<0.001)	Effective	3	Medium
Sadoh et al. 2018	Non- randomised, pre-post survey	Nigeria	1443	Disease prevention	个 Awareness of cervical cancer 个 Knowledge of risk factors and cause of cervical cancer	Effective	2	Medium
Acemoglu, 2011	Non- randomised,	Turkey	2930	Disease prevention	↑ Knowledge scores (p =0.001)	Effective	1	Low

	pre-post survey				个 Attitudes of students towards people infected with hepatitis virus (p =0.002) 个 Change in behaviours (p =0.000)			
Liu et al. 2015	Randomised, peer-led vs. teacher-led	China	1265	Disease prevention	↑ Pre-post knowledge, attitude & practice ↓ Knowledge, attitude & practice (larger improvement in teacher-led, <i>p</i> =<.01)	Mixed	3	Medium
Ajuwon & Ajuwon, 2019	Non- randomised, pre-post survey	Nigeria	120	Healthy lifestyles	个 Knowledge of CHI resources 个 Understanding of roles as peer educators	Effective	2	Medium
Bell et al. 2017	Randomised, intervention vs. control	UK	928	Healthy lifestyles	\uparrow Consumption of breakfast (p =0.004) \leftrightarrow Consumption of at least three portions of fruit a day (p= 0.055) \leftrightarrow No statistically significant difference in the reported consumption of other target foods \uparrow Counts per minute (CPM) \uparrow Sedentary minutes per day \leftrightarrow MVPA minutes per day	Mixed	4	High
Bogart et al. 2014	Randomised trial, intervention vs. wait-list control	USA	2997	Healthy lifestyles	\uparrow Fruit servings (p =<.10) \leftrightarrow Vegetable servings: ns \uparrow All lunches (p =<.01) \uparrow Free/reduced lunch (p =<.001)	Effective	4	High

					\uparrow			
					Full-price lunch (<i>p</i> =<.01)			
					\uparrow			
					Cafeteria attitudes ($p = < .05$)			
					\uparrow			
					Tap water attitudes ($p = < .05$)			
					ት *			
					Knowledge about healthy eating/physical activity			
					(n = < 05)			
					() 个			
					Intentions to drink tap water $(n - < 05)$			
					\wedge			
					Intentions to drink from refillable bottled $(n - < 05)$			
					\wedge			
					Tap water consumption $(n - < 0E)$			
					Tap water consumption ($p = < .05$)			
					Pofillable bottle use (NS)			
					Students obecant squarth grade $(n - c 01)$			
	Randomised				Students obese at seventh grade ($p = <.01$)			
Desert at al	trial,			Llaste	\longleftrightarrow			
Bogart et al.	intervention	USA	4576	Healthy	Students overweight at seventh grade (no	Ineffective	2	Medium
2016	vs. wait-list			intestyles	intervention effect)			
	control				\leftrightarrow			
					Students healthy weight/ underweight at seventh			
					grade (no intervention effect)			
	Neg				Blood pressure benavioural capabilities (NS)			
	Non-				$\longleftrightarrow \qquad (NC)$			
Conen et al.	randomised,	USA	886	Healthy	Smoking experimentation (NS)	Ineffective	3	Medium
1989	peer-led vs.			lifestyles				
t	teacher-led				Nutrition behavioural capabilities (NS)			
					\leftrightarrow (NC)			
					Family discussion (NS)			
	Randomised,				\leftrightarrow			
Cui et al. 2012	intervention China vs. control	682	Healthy I	Decrease in time spent on sedentary behaviour: 3	Ineffective	3	Medium	
		Cinita	002	lifestyles	months $(p = 0.21)$			
					\leftrightarrow			

					Decrease in time spent on sedentary behaviour on weekdays: 3 months (p =0.21)			
					\leftrightarrow Decrease in time spent on sedentary behaviour on weekends: 3 months ($p = 0.25$)			
					\leftrightarrow , Time spent on computer: 3 months: (p =0.13) \leftrightarrow			
					Time spent on computer on weekdays: 3 months - ($p = 0.07$) \leftrightarrow			
					Time spent on computer on weekend: 3 months (<i>p</i> =0.27)			
					Time spent on Television and DVD: 3 months $(p = 0.13)$			
					\leftrightarrow Time spent on Video games: 3 months (p =0.26) \leftrightarrow			
					Time spent on extracurricular reading, writing, drawing and listening to music: 3 months ($p = 0.4$)			
					Time spent on passive commuting: 3 months (p =0.22)			
					\leftrightarrow Time spent sitting and talking: 3 months (<i>p</i> =0.16)			
					\uparrow Self-Efficacy to Eat Healthy (p =<.05) \leftrightarrow			
Forneris et al 2010	Randomised, intervention vs. wait-list	USA	523	Healthy lifestyles	Perceived Taste of Low-Fat Foods "not significant" 个 Fat and Fiber Knowledge (<i>p</i> =<.003)	Ineffective	1	Low
	control				\leftrightarrow Fat Food Frequency Score (<i>p</i> = .98) \leftrightarrow			
					Fiber Food Frequency Score (p = .89)			

					$\leftarrow \rightarrow$ Fruit and Vegetable Food Frequency Score (n = 76)			
Haleem et al. 2012	Cluster randomised controlled trial, per-led, dentist-led and teacher- led	Pakistan	1657	Healthy lifestyles	Oral health knowledge (NS) \leftarrow Oral hygiene status (NS) \uparrow Oral health behaviour (<i>p</i> =<0.05)	Ineffective	5	High
Ishak et al. 2019	Non- randomised, intervention vs. control	Malaysia	76	Healthy lifestyles	$ \uparrow \\ Knowledge score at time interval one (p = 0.006) \\ \uparrow \\ Knowledge score at time interval two (p = 0.005) $	Effective	4	High
Lytle et al. 2004	Group- randomised trial, intervention vs. control	USA	2883	Healthy lifestyles	\leftrightarrow Scores for total fruit and veg (p =.11) \leftrightarrow Scores for energy from total fat (p =.90) \uparrow Food choice score (p =p=.01)	Ineffective	4	High
Ping et al. 2014	Cluster randomised control trial, intervention vs. control	China	645	Healthy lifestyles	个 Sun safe knowledge (<i>p</i> =<.001)	Effective	4	High
Sebire et al. 2018	Cluster randomised controlled trial, intervention vs. control	UK	427	Healthy lifestyles	 ↔ Mean weekday moderate-to-vigorous physical activity ↔ Mean weekend moderate-to-vigorous physical activity ↑ Mean weekday sedentary (mins) ↔ Mean weekend sedentary (mins) 	Ineffective	5	High
Shankar et al. 2020	Non- randomised,	India	755	Healthy lifestyles	\uparrow Health knowledge ($p = < 0.001$)	Effective	1	Low

	pre-post survey				\uparrow Health-related attitudes (p =< 0.001)			
Shrewsbury et al. 2020	Non- randomised, pre-post survey	Australia	2056	Healthy lifestyles	$\leftrightarrow \uparrow$ Daily breakfast (behaviour, p =.675, intention, p =<.05) $\uparrow \uparrow$ Fruit ≥ 2 serves/day (behaviour, p=<.001), intention, p=<.001) $\leftrightarrow \uparrow$ Vegetables ≥ 5 serves/day (behaviour, p=.156, intention, p=<.01) \uparrow <1 cup/day SSB (behaviour, p=<001.) $\leftrightarrow \uparrow$ Screen-time $\leqslant 2$ hours/day (behaviour, p=<.01, intention, p=<.001)	Effective	5	High
Tamiru et al. 2017	Non- randomised, pre-post survey	Ethiopia	992	Healthy lifestyles	\leftrightarrow Dietary diversity score (p =0.093) \leftrightarrow Food variety score (p =0.075 \uparrow Animal source food intake (p <0.001)	Ineffective	1	Low
Vangipuram et al. 2016	Randomised controlled trial, peer- led, dentist- led & control	India	450	Healthy lifestyles	个 Oral health knowledge 个 Attitude 个 Oral hygiene practices 个 Oral health status 个 Oral health behaviour	Effective	1	Low
Ciao et al. 2015	Non- randomised, intervention	USA	50	Mental health	\uparrow Internalization (p =<0.001) \uparrow	Effective	3	Medium

	vs. wait-list control				Body dissatisfaction ($p = <0.005$) \uparrow			
					Eating pathology (p =<0.012)			
Eisenstein et al. 2019	Non- randomised, pre-post survey	UK	950	Mental health	\uparrow Understanding of key terms ($p = <0.001$) \uparrow Key skills ($p = <0.001$) \uparrow Confidence to talk about mental health ($p = 0.03$) \leftrightarrow Knowledge of information and resources ($p = 0.07$) \uparrow Readiness to support others ($p < 0.001$) \uparrow Emotional difficulties ($p = 0.005$) \leftrightarrow Behavioural difficulties ($p = 0.10$) \uparrow	Effective	2	Medium
Ellis 2009	Non- randomised, pre-post survey, intervention vs. control	Australia	483	Mental health	\uparrow Pro bully attitude (p = < .05) \leftrightarrow Pro victim attitude (NS) \uparrow Honesty/trustworthiness: (p =< .05) \leftrightarrow Self Confidence (NS) \leftrightarrow Global self esteem (NS) \leftrightarrow Self-efficacy (NS) \leftrightarrow Same sex relations (NS) \uparrow Opposite-sex relations (p = < .01)	Ineffective	4	High

					\leftrightarrow			
					Cooperative teamwork (NS)			
Kaveh et al. 2014	Cluster randomised controlled trial, intervention vs. control	Iran	223	Mental health	\uparrow Self-esteem general scale (p=<0.001) \uparrow Academic scale (p=<0.001) \uparrow Social scale (p=<0.001) \leftrightarrow Family scale (p=0.529) \uparrow Body scale (p=<0.001) \uparrow Total scale (p=<0.001)	Effective	3	Medium
Parikh et al. 2018	Non- randomised, pre-post survey	USA	878	Mental health	$ \uparrow \\ Confidence in identifying peers with depression (p<.001) \\ \uparrow \\ Confidence in referring peers with depression (p =<.001) \\ \leftrightarrow \\ Knowing whether to tell someone if a friend informs them they are suicidal (NS) \\ \uparrow \\ Feelings about visiting school social worker/psychologist: (p = <.001) \\ \uparrow \\ Depression knowledge questions: (p = <.001) \\ \uparrow \\ Knowledge of depression symptoms: (p = <.001) \\ \leftrightarrow \\ Attitudes to a new student with depression: ns \\ \uparrow \\ Comfort speaking to other students about mental health (p =< 0.001) \\ \end{tabular} $	Effective	1	Low

					$ \uparrow \\ Willingness to confide in authority figures (p = <0.01) $			
Aten et al. 2002	Non- randomised controlled trial, intervention vs. control	USA	1352	Sex education	Sexual activity at follow-up for students who were abstinent at pretest: \leftrightarrow Females: ($p = 0.07$) \uparrow Males: ($p = 0.04$)	Mixed	3	Medium
Borgia et al. 2005	Randomised controlled trial, peer-led vs. teacher- led	Italy	1295	Sex education	个个个 Pre-post: Skills, knowledge, attitudes, risk perception (p=<0.05) \leftrightarrow 个 \leftrightarrow ↔ Between arms: Skills, knowledge, attitudes, risk perception (<i>p</i> =<0.05)	Effective	4	High
Caron et al. 2004	Non- randomised, intervention vs. control	Canada	1004	Sex education	\uparrow Postponing sexual intercourse: Intention (<i>p</i> =0.001) \uparrow Postponing sexual intercourse: Attitude direct (p = < 0.001) \uparrow Postponing sexual intercourse: Attitude indirect (p = < 0.001) \uparrow Postponing sexual intercourse: Perceived self- efficacy (<i>p</i> = < 0.001) \uparrow Postponing sexual intercourse: Role beliefs (p = < 0.001) \uparrow Postponing sexual intercourse: Anticipated regret (p = < 0.001) \uparrow Condom use: intention (<i>p</i> = < 0.001)	Effective	3	Medium

$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	
Condom use: roles beliefs ($p = < 0.001$)Information \leftrightarrow \leftrightarrow sexually inexperienced (NS) \uparrow \uparrow sexually experienced ($p = < .01$)Attitudes \bullet	
Information → ↔ sexually inexperienced (NS) ↑ sexually experienced (p= < .01)	
↔ sexually inexperienced (NS) ↑ sexually experienced (<i>p</i> = < .01) Attitudes	
sexually inexperienced (NS)	
↑ sexually experienced (p = < .01) Attitudes	
sexually experienced (<i>p</i> = < .01) Attitudes	
Attitudes	
Attitudes	
\leftrightarrow	
sexually inexperienced (NS)	
\uparrow	
sexually experienced: $(p = <.01)$	
Quasi-	
experimental Norms	
controlled \leftrightarrow	
Fisher et al. trial, USA 1577 Sex Sex Sexually inexperienced (NS) Ineffective 1 L	ow
2002 classroom- education ↔	
based, peer-	
based and	
combined. Intentions	
\leftrightarrow	
sexually inexperienced (NS)	
\leftrightarrow	
sexually experienced (NS)	
Behavioural skills	
\leftrightarrow	
sexually inexperienced (NS)	
\leftrightarrow	
sexually experienced (NS)	
\uparrow	
HIV-related knowledge ($p = <0.001$)	
Randomised, Huang et al. \uparrow	
2008 peer-led vs. China 3068 education Attitudes (p =<0.001)	dium
teacner-lea	

Jennings et al. 2014	Non- randomised intervention vs. control	USA	157	Sex education	\downarrow Knowledge (p=0.10) \downarrow Parental communication (p=0.46) \downarrow Self-efficacy (p=0.06) \downarrow Sexual health information (p=0.06) \uparrow Opportunity to practice skills (p=0.01) \uparrow Intentions (p=0.04)	Ineffective	4	High
Mahat et al. 2010	Non- randomised, pre-post survey	USA	106	Sex education	\uparrow Mean score of total HIV/AIDS knowledge ($p = < .001$) \uparrow Mean of the self-efficacy for limiting HIV risk behaviour score ($p = < .001$)	Effective	2	Medium
Mason-Jones, Mathews & Fisher 2011	Non- randomised, intervention vs. control	South Africa	2339	Sex education	\uparrow Not had sex (p=0.002) \leftrightarrow First age sex (p=0.84) \leftrightarrow Used a condom at last sex (p=0.32) \leftrightarrow Goal orientation (p=0.20) \leftrightarrow Decision-making (p=0.58) \leftrightarrow Future orientation score (p=0.32)	Ineffective	3	High
Mellanby et al. 2001	Non- randomised, peer-led vs. adult-led	UK	1320	Sex education	Knowledge of STDs (greater increase in adult-led, p = < 0.001) \leftrightarrow Assertiveness score ($p = 0.32$) \uparrow Attitude scores ($p = < 0.001$)	Ineffective	3	Medium

					\downarrow Involvement in sessions (greater in adult-led, p = 0.016) \downarrow Feeling embarrassed (greater in peer-led, p = <0.001) \leftarrow Talking to others about the sessions (p=0.12)			
Menna et al. 2015	Non- randomised, intervention vs. control	Ethiopia	560	Sex education	$ \uparrow \\ Knowledge of HIV (p=0.004) \\ \leftrightarrow \\ Ever initiated sexual intercourse (p=0.72) \\ \leftrightarrow \\ Ever tested for HIV (0.53) \\ \uparrow \\ Limiting sexual parter only to one in last 12 months (p=0.21) \\ \leftrightarrow \\ Consistent use of condom in last 12 months (p=0.24) \\ \uparrow \\ Willingness to go for HIV counselling and testing (p=0.01) \\ \end{array} $	Mixed	3	Medium
Merakou & Kourea- Kremastinou 2006	Non- randomised, intervention vs. control	Greece	702	Sex education	↑ Increased personal responsibility ↑ Safer behaviour in sexual practice ↔ Knowledge	Effective	1	Low
Michielsen et al. 2012	Non- randomised controlled trial, intervention vs. control	Rwanda	1400	Sex education	\leftrightarrow Sexual risk behaviour (NS) \leftrightarrow Increased knowledge (NS) \leftrightarrow Perceived severity (NS) \leftrightarrow Perceived susceptibility (NS)	Ineffective	3	Medium

					个 Stigma (<i>p</i> =0.05)			
Ozcebe, Akin & Aslan, 2004	Non- randomised, pre-post survey	Turkey	369	Sex education	个 HIV/AIDS knowledge scores (<i>p</i> =<.001)	Effective	4	High
Parwej, 2005	Randomised, peer-led vs. nurse-led	India	273	Sex education	个 Reproductive health domains 个 Reproductive health knowledge (See full paper for full list of individual statements)	Effective	3	Medium
Rotz et al. 2018	Matched comparison group design, intervention vs. comparison	USA	1522	Sex education	$\begin{array}{c} \longleftrightarrow \\ \text{Rates of sexual activity } (p=.83) \\ \longleftrightarrow \\ \text{Rates of unprotected sex } (p=.93) \\ \uparrow \\ \text{Exposure to information about sexual health topics} \\ (p=<.01) \\ \uparrow \\ \text{Knowledge of preventing pregnancy and} \\ \text{transmission of STIs } (p=<.01) \end{array}$	Mixed	3	Medium
Siegel et al. 1998	Non- randomised, intervention vs. control	USA	3635	Sex education	Postintervention Knowledge Scores: \uparrow Middle School: Boys ($p = <.001$) \uparrow Middle School: Girls ($p = <.001$) \uparrow High School Boys ($p = <.001$) \uparrow High School Girls ($p = <.001$) Self-efficacy Scores: \leftrightarrow Middle School: Boys (NS) \leftrightarrow Middle School: Girls (NS)	Effective	3	Medium

					个 High School Boys (p =<.001) 个 High School Girls (p =<.001)			
					Safe Behaviour Intention: \uparrow Middle School: Boys ($p = <.001$) \uparrow Middle School: Girls ($p = <.001$) \uparrow High School Boys ($p = <.001$) \uparrow High School Girls ($n = <.001$)			
Siegel et al. 2001	Non- randomised, intervention vs. control	USA	4001	Sex education	Postintervention Knowledge Scores: \uparrow Middle School: Boys ($p = <.001$) \uparrow Middle School: Girls ($p = <.001$) \uparrow High School Boys ($p = <.001$) \uparrow High School Girls ($p = <.001$) Self-efficacy Scores: \leftrightarrow Middle School: Boys (NS) \uparrow Middle School: Girls ($p = <.001$) \leftrightarrow High School Boys (NS) \uparrow High School Girls ($p = <.001$) Safe Behaviour Intention: \uparrow Middle School: Boys ($p = <.001$)	Mixed	3	Medium

					↔ Middle School: Girls (NS) ↔ High School Boys (NS) ↔ High School Girls (NS)			
Stephenson et al. 2004	Cluster- randomised trial, intervention vs. control (teacher-led)	UK	9508	Sex education	\uparrow Girls: Unprotected sex before age 16 (<i>p</i> =0.0008) \leftrightarrow Boys: Unprotected sex before age 16 (<i>p</i> =0.35) \uparrow Girls: Knowledge of methods to prevent STIs (<i>p</i> =0.002) \leftrightarrow Boys: Knowledge of methods to prevent STIs (NS)	Mixed	3	Medium
Stephenson et al. 2008	Cluster- randomised trial, intervention vs. control (teacher-led)	UK	9000	Sex education	Proportion of girls with one or more abortions by age 20 y (NS) \leftrightarrow Proportion of girls who had had sex by age 18.0 y (NS) \leftrightarrow Proportion of girls who had one or more live births by age 20.5 (NS)	Ineffective	3	Medium
Timol et al. 2016	Randomised, intervention vs. control	South Africa	2904	Sex education	\uparrow Sensation seeking (p =<.05) \uparrow Self-efficacy in sexual relations (p =<.05) \uparrow Future orientation (p =<.05) \uparrow HIV transmission knowledge (p =<.01) \uparrow HIV prevention knowledge (p =<.01) \uparrow HIV prevention knowledge (p =<.01) \uparrow HIV prevention knowledge (p =<.05)	Effective	3	Medium

	Non-				\leftrightarrow Psychological wellbeing (NS)			
Visser, 2007	randomised, intervention vs. control	South Africa	4086	Sex education	↔ Personal control (NS) ↔ School climate (NS)	Ineffective	1	Low

 \uparrow = improvement; \downarrow = negative effect for peer education; \leftrightarrow no effect

NS = *no significant change where p*-*value is not reported*

Effective = $\geq 60\%$ outcomes with a positive finding; Mixed = 41-59% outcomes with a positive finding; Ineffective = $\geq 40\%$ outcomes with a positive finding

High quality = 4-5; Medium quality = 2-3, Low quality = 0-1 (using the Mixed Methods Appraisal Tool, MMAT)

Supplementary Material 2: Full table of included study details, effectiveness and quality ratings for peer educator outcomes

Author, Year	Study Design	Nation	Sample Size	Health area	Outcome and effectiveness	Effectiveness	Quality Score	Quality Rating	Standalone paper?*
Audrey, Holliday & Campbell, 2006	Cluster randomised controlled trial, intervention vs. control	UK	10,730	Alcohol, smoking, substance use	Smoking prevalence at 1-year follow-up \uparrow 'High risk group' ($p = 0.045$) \leftrightarrow Never smoked ($p = 0.20$) \leftrightarrow Regular (weekly) smokers ($p = 0.68$)	Ineffective	5	High	Yes
Zambuto et al. 2019	Non- randomised, pre-post survey	Italy	524	Bullying	$\uparrow \leftrightarrow$ Victimization (p= .015 males, p= .093 females) $\leftrightarrow \leftrightarrow$ Bullying (p= .068 males, p= .854 females) $\uparrow \leftrightarrow$ Prosocial behaviour (p= .002 males, p= .455 females) $\uparrow \leftrightarrow$ Social support (p= .036 males, p= .627 females) $\leftrightarrow \uparrow$ Defending Behaviour(p= .925 males, p= .015 females)	Ineffective	3	Medium	Yes
Acemoglu, 2011	Non- randomised, pre-post survey	Turkey	2930	Disease prevention	个 Knowledge scores (<i>p</i> =0.000)	Effective	3	Medium	No
Foley et al. 2017	Non- randomised, pre-post survey	Australia	519	Healthy lifestyles	↑ Eating ≥2 serves fruit/day (p =<0.01) ↑ Eating ≥5 serves vegetables/day	Mixed	4	High	Yes

					(<i>p</i> = <0.01)				
					\leftrightarrow				
					Breakfast everyday (<i>p</i> = 0.053)				
					\uparrow				
					Drinking <1 cup/day of Sugar sweetened				
					beverages ($p = < 0.01$)				
					\leftrightarrow				
					Screen Time ≤ 2 h/day (<i>p</i> = 0.592)				
					\leftrightarrow				
					Moderate-to-vigorous physical exercise				
					≥ 60 min/day (<i>p</i> =< 0.076)				
					\uparrow				
					Understanding of key terms				
					(<i>p</i> = 0.04)				
					\uparrow				
					Key skills (<i>p</i> = <0.001)				
					\leftrightarrow				
					Confidence to talk about mental health				
					(<i>p</i> =0.08)				
	Non-				\uparrow				
Eisenstein et al. 2019	randomised,	UK	950	Mental health	Knowledge of information and resources	Ineffective	2	Medium	No
	pre-post survey				(<i>p</i> = 0.02)				
					\leftrightarrow				
					Readiness to support others (p =0.8)				
					\leftrightarrow				
					Emotional difficulties (p = 0.24)				
					\leftrightarrow				
					Behavioural difficulties (<i>p</i> =0.65)				
					\leftrightarrow				
					School climate (p =0.5)				
					\uparrow				
					Confidence in identifying peers with				
	Non-				depression ($p = 0.036$)				
Parikh et al. 2018	randomised,	India	878	Mental health	\uparrow	Ineffective	1	Low	No
	pre-post survey				Confidence in referring peers with				
					depression (p = 0.023)				
					\downarrow				

					Knowing whether to tell someone if a				
					friend informs them they are suicidal				
					(NS)				
					\checkmark				
					Feelings about visiting school social				
					worker/psychologist (NS)				
					\checkmark				
					Depression knowledge questions (NS)				
					\checkmark				
					Knowledge of depression symptoms (p =				
					0.07)				
					\uparrow				
					Attitudes to a new student with				
					depression (NS)				
					\checkmark				
					Comfort speaking to other students				
					about mental health				
					(<i>p</i> = < 0.001)				
					\uparrow				
					Willingness to confide in authority				
					figures: peer educators: (NS)				
					\uparrow				
					Help for suicidal peers (p=<.001)				
					\uparrow				
					Rejects codes of silence (p=.002)				
					\uparrow				
					Maladaptive coping (p=.013)				
	Randomised,				\uparrow				
Wyman et al. 2010	intervention vs.	USA	4128	Mental health	Help-seeking from adults (<i>p</i> =<.001)	Effective	4	High	Ye
	wait-list control				\uparrow				
					Sources of Strength coping (p=.002)				
					\uparrow				
					School engagement (p=.043)				
					\uparrow				
					Trusted adults (p=<.001)				
					\uparrow				

					Defensed distances due serve (c. 20)				
					Referred distressed peers ($p=.08$)				
					\leftrightarrow (
					Support to peers (p=.015)				
					个 				
					Postponing sexual intercourse: Attitude				
					direct (<i>p</i> =< 0.001)				
					\uparrow				
					Postponing sexual intercourse: Attitude				
					indirect (<i>p</i> =< 0.001)				
					\uparrow				
		Canada 1004			Postponing sexual intercourse:				
	Non- randomised, intervention vs. control				Perceived behavioural control direct (p =				
					< 0.001)				
					\uparrow				
					Postponing sexual intercourse: personal				
					normative beliefs (p =0.01)				
					\uparrow				
					Postponing sexual intercourse: Role				
Caron et al. 2004					beliefs (<i>p</i> = < 0.001)				
			1004 Si	1004 Sex education	\uparrow	Effective	3	Medium	No
					Postponing sexual intercourse:				
					Perceived self-efficacy (p = < 0.001)				
					\uparrow				
					Postponing sexual intercourse:				
					Anticipated regret (p =< 0.001)				
					\uparrow				
					Condom use: behavioural control				
					indirect (<i>p</i> =< 0.001)				
					\uparrow				
					Condom use: perceived self-efficacy (p				
					=< 0.001)				
					\uparrow				
					Condom use: attitude direct measures (p				
					=0.05)				
					\uparrow				
					Condom use: attitude indirect measure				

					(<i>p</i> =0.05)				
					Condom use: nersonal normative beliefs				
					(p = 0.01)				
					()				
					Condom use: anticipated regret				
					(<i>p</i> =0.03)				
					\uparrow				
					Condom use: perceived behavioural				
					control direct measure (p =0.01)				
					<u>↑</u>				
					Condom use: role beliefs (p =0.05)				
					\uparrow				
					(p = 0.02)				
					I Had talked to their parents about the				
	Randomised, pre-post survey	USA 845			use of alcohol ($p = < .05$)				
					↓ ····,				
					Report having unwanted sex because				
					they were intoxicated after the				
				Sex education	intervention (<i>p</i> =< .05) intervention				
					inferior				
					\longleftrightarrow				
			845		Individual Difference Variables (NS)				
Ebreo et al 2002					\leftarrow	Ineffective	1	Low	Ves
2002						menective	-	LOW	163
					Parental Communication (NS)				
					\longleftrightarrow				
					Peer Norms (NS)				
					\leftrightarrow				
					Self-efficacy (NS)				
					\leftrightarrow				
					Intentions to Have Sex (NS)				
					\leftrightarrow				
					Sen-reported behaviours (NS)				
					$\overline{}$				

					Student Course Evaluations (NS)				
Jennings et al. 2014	Non- randomised intervention vs. control	USA	160	Sex education	$\begin{array}{c} \longleftrightarrow \\ \text{Knowledge } (p = 0.10) \\ \longleftrightarrow \\ \text{Parental communication } (p = 0.46) \\ \longleftrightarrow \\ \text{Self-efficacy } (p = 0.06) \\ \longleftrightarrow \\ \text{Sexual health information } (p = 0.06) \\ \uparrow \\ \text{Opportunity to practice skills } (p = 0.01) \\ \uparrow \\ \text{Intentions } (p = 0.04) \end{array}$	Ineffective	4	High	No
Strange, Forrest & Oakley, 2002	Randomised controlled trial, intervention vs. control	UK	331	Sex education	\leftrightarrow Knowledge; condoms ($p = 0.109$) \leftrightarrow Knowledge; the Pill ($p = 0.089$) \uparrow Knowledge; femidom ($p = 0.000$) \uparrow Knowledge; emergency contraception – ($p = 0.026$) \uparrow Knowledge; cap ($p = 0.000$) \uparrow Knowledge; coil ($p = 0.000$) \leftrightarrow Attitude; sex before marriage ($p = 0.336$) \uparrow Attitude; people having sex with someone the first time they meet them: ($p = 0.002$) \uparrow Attitude; two men having sex with each other ($p = 0.01$) \uparrow	Mixed	2	Medium	Yes

Attitude; two women having sex with		
each other (<i>p</i> =0.003)		
\leftrightarrow		
Attitude; abortion (p =0.7815)		
\leftrightarrow		
Attitude; using contraception		
(<i>p</i> =0.2414)		

 \uparrow = improvement; ↓ = negative effect for peer education; ↔ no effect

NS = no significant change where *p*-value is not reported

Effective = $\geq 60\%$ outcomes with a positive finding; Mixed = 41-59% outcomes with a positive finding; Ineffective = $\geq 40\%$ outcomes with a positive finding

High quality = 4-5; Medium quality = 2-3, Low quality = 0-1 (using the Mixed Methods Appraisal Tool, MMAT)

*Standalone paper: a paper that reported peer educator outcomes only rather than peer learner and peer educator outcomes

Supplementary Material 3: Example Search Strategy (Medline)

Search terms pertaining to schools and school	Search terms pertaining to peer	Search terms pertaining to health-related interventions, health-related outcome domains
students	education	
		MH ("Health Education+" OR "Health Literacy+" OR "Health promotion" OR "School Health Services" OR
(MH "Schools") OR TI ("Elementary School*" OR	TI ("peer educat*" OR "peer-led" OR	"Preventive Health Services" OR "School Mental Health Services" OR "Anxiety" OR "Self Concept" OR
"Primary School*" OR "Junior School*" OR "Junior	"Peer led" OR "Student-led" OR "Student	"Depression" OR "Emotional Intelligence" OR "Psychological Distress" OR "Adaptation, Psychological" OR
High School" OR "Secondary School*" OR "Middle	led" OR "Peer teach*" OR "Peer	"Sex Education" OR "Sexual Behavior" OR "Safe Sex" OR "Tobacco Use" OR "Underage Drinking" OR
School*" OR "Sixth Form*" OR "High School*" OR	Intervention* OR "Cross-age" or "Cross	"Alcoholism" OR "Substance-Related Disorders" OR "Substance Abuse, Intravenous" OR "Risk Reduction
"Primary education" OR "Secondary education" OR	age" or "Peer to Peer" or "Peer-to-Peer"	Behavior" OR "Impulsive Behavior" OR "Risk-Taking" OR "Health Risk Behaviors" OR "Health Behavior") OR
"Special Education*" OR "School-based" OR "school	OR "Peer-delivered" or "Peer Delivered"	TI ("Health Promotion" OR "Health Literacy" OR "health education" OR "School Based Intervention*" OR
based") OR AB ("Elementary School*" OR "Primary) OR AB ("peer educat*" OR "peer-led"	"Group Intervention*" OR "Smoking" OR "Drug abuse" OR "Substance abuse" OR "Drug education" OR
School*" OR "Junior School*" OR "Junior High	OR "PEER LED" OR "STUDENT-LED" OR	"alcohol*" OR "Mental health" OR "Esteem" OR "Confidence" OR "Emotional" OR "behaviour*" OR
School" OR "Secondary School*" OR "Middle	"STUDENT LED" OR "PEER TEACH*" OR	"Depression" or "anxiety" OR "Sex education" OR "Safe sex" OR "RISK TAKING" OR "HEALTH RISK*") OR AB (
School*" OR "Sixth Form*" OR "High School*" OR	"Peer Intervention* OR "Cross-age" or	"Health Promotion" OR "Health Literacy" OR "health education" OR "School Based Intervention*" OR "Group
"Primary education" OR "Secondary education" OR	"Cross age" or "Peer to Peer" or "Peer-to-	Intervention*" OR "Smoking" OR "Drug abuse" OR "Substance abuse" OR "Drug education" OR "alcohol*"
"Special Education*" OR "School-based" OR "school	Peer" OR "Peer-delivered" or "Peer	OR "Mental health" OR "Esteem" OR "Confidence" OR "Emotional" OR "behaviour*" OR "Depression" or
based")	Delivered")	"anxiety" OR "Sex education" OR "Safe sex" OR "RISK TAKING" OR "HEALTH RISK*")