1. HEALTH			
A. Respiratory infections			
Risk factor	Direction of effect	References	<u>Comments</u>
Nutritional			
1. Breastfeeding	Decreases risk of	1	Māori sample
	infection		
2. Diet	Poor diet increases risk	1	Māori sample
	of infections		
3. Vitamin D	Low levels increase risk	2	
	ofinfections		
4. Zinc	Supplementation	3, 4	Meta analyses
	resulted in reduced		
	incidence of infections		
Environmental exposures			
5. Smoking	Increases risk of	1, 6, 9	1=Māori sample;
	infections		6=systematic review and
			meta analysis
6. Use of solid biomass	Increases risk of	5, 8	Systematic reviews and
fuels	infections		Meta analyses
7. Mould	Increases risk of	7	
	infections		
Cultural/ethnic			
8. Māori	Māori have higher rates	1	
Socioeconomic			
9. SES	Low SES increases risk	1	Māori sample
10. Overcrowding	Increases risk	1	Māori sample
11. Poor housing	Increases risk	1	Māori sample
Other			
12. Immunisation	Decreases risk	1	Māori sample

B. Obesity			
<u>Risk factor</u>	Direction of effect	<u>References</u>	<u>Comments</u>
Pre- and perinatal			
1. Pregnancy weight gain	Increases obesity	10	
2. Maternal smoking in	Increases obesity	11, 12	11=meta analysis &
pregnancy			systematic review; 12=
			Meta analyses
Nutritional			
3. Breastfeeding	Reduces obesity	13, 14, 21	13=meta analysis &
			systematic review; 14,
			21 = Systematic review
4. Sugar sweetened	No effect	20	Meta analysis
drinks			
Biological/Medical			
5. Sleep duration	Short sleep duration	15, 16	Meta analyses
	increases obesity	47.40.00	47.0.1.1.1
6. Exercise	17=Some evidence that	17, 18, 28	1/=Systematic review
	exercise programs		and meta analysis;
	reduce obesity but		18,28=meta analysis
	largely inconclusive; 18=		
	exercise reduce obesity;		
Darontal /family	28=N0 effect		
7 Darantal violance	Increases obesity	10	
7. Parental violence	increases obesity	19	
8 Child neglect	Increases obesity	22	
9. TV watching	22-Increases obesity	22 24	24-moto analysis
	21-Increases obesity,	23, 24	
	but by amount that is		
	unlikely to be clinically		
	relevant		
	Increases obesity	25	
	nossible mediated by	25	
	excessive enting		
Cultural/ethnic	excessive eating		
11 Māori	Increased obesity	26	
Socioeconomic			
12. SFS	Increases obesity	27	

C. Asthma			
<u>Risk factor</u>	Direction of effect	<u>References</u>	<u>Comments</u>
Pre- and perinatal			
1. Smoking in pregnancy	Increases asthma	31,59	
2. Ceasarean section	Increases asthma	32	Meta analysis
3. Pre-term delivery	Increases asthma	33	Meta analysis and
			systematic review
Nutritional			
4. Breastfeeding	29,30=Increases asthma;	29,30,34	34=systematic review
	34=Reduces asthma		and meta analysis
5. Vitamin E	Reduces asthma	51, 52	52= Systematic review
			and meta analysis
6. Vitamin A	Reduces asthma	52	Systematic review and
			meta analysis
7. Vitamin D	Reduces asthma	52	Systematic review and
			meta analysis
8. Zinc	Reduces asthma	52	Systematic review and
			meta analysis
9. Fruits and vegatables	Reduces asthma	52	Systematic review and
			meta analysis
10. Mediterranean diet	Reduces asthma	52,53	52=Systematic review
			and meta analysis
11. Selenium	No effect	39	
Biological/Medical			
12. Genes	CD14 is candidate gene	35	Meta analysis
	-509C/T polymorphism	36	Meta analysis
	in TGF-beta1 gene is risk		
	factor		
	GST genes not	37	Systematic review and
	associated		meta analysis
	polymorphisms in	38	
	ORMDL3 and GSDML		
	contribute to asthma		
	IL-4 gene contributes to	40	Meta analysis
	asthma		
	TNF region associated	41, 43	Meta analyses
	with asthma		
	ADRB2 has no effect	45	Meta analysis
13. Intestinal parasites	Not typically protective	42	Systematic review and
	against asthma, with the		meta analysis
	exception of hookworm		
14. BMI	44,46=Increases risk of	44, 46,68	44=meta analysis;
	asthma; 68=Increases		46=sytematic review
	risk in women but not		
	men.		
15. Diabetes(type 1)	Small reduction in	66	Meta analysis
	asthma amongst		
	diabetics		
Parental/family			
16. Family history of	Increases risk of asthma;	31, 47, 48, 49, 50, 117	50=meta analysis
asthma	50=maternal history		

	increases risk more than paternal history		
Environmental			
17. Smoking in family	Increases asthma	48,49	
18. Dust mite exposure	Increases asthma	47,48	
19. Formaldehyde	Increases asthma	54	Systematic review
20. Air pollution	55=No effect; 62=strong	55,62	
	assns with short-term		
	increases in asthma		
	hospitalisations		
21. Furry pets	Dogs have risk effect;	56	Meta analysis
	cats have slight		
	protective effect		
22. Secondhand Smoke	9,57=Increases asthma;	9,57,59,63	57=Meta regression;
	59=modest increase for		59=meta analysis
	postnatal smoking; 63=		
	Increases asthma		
	severity		
23. Allergen avoidance	Reduces asthma ONLY if	58	Meta analysis
	interventions target		
	multiple allergens		
24. Antibiotics	Exposure in 1 <sup>st</sup> year of	60	Meta analysis
	life increases asthma		
25. Vaccinations	No effect	65	Meta analysis
Cultural/ethnic			
26. Māori/Pacific	Māori > Pacific > Euro	64	
Socioeconomic/structural			
27. SES	No effect	67	

D. Dental Health			
<u>Risk factor</u>	Direction of effect	<u>References</u>	<u>Comments</u>
Pre- and perinatal			
1. Pre-term birth	Inconclusive	69	Systematic review
2. Low birth weight	No effect	70	Systematic review
Biological/Medical			
3. Asthma	Increases caries risk	71,72	
4. Mutans Streptococci	Increases caries risk	73,92	Systematic review
Nutrition			
5 Infant formula	Mild evidence of	75	Systematic review
	enamel flourosis		
6. Sugar & Sugary drinks	Increases caries	76,77,78,79,80,81	
Environmental exposures			
7. Fluoride	82-85,88=Fluoride	82,83,84,85,86,87,88	82-84=Cochrane ; 88=
	therapies and		Systematic review
	toothpaste prevent		
	caries; 86=fluoride in		
	salt/milk/tablets of little		
	benefit; 87=fluoridated		
	water reduces caries		
Cultural/ethnic			
8. Indigenous people	89=Worse rates of caries	89,90	
	in indigeneous		
	populations of USA,		
	Canada, Aus, NZ; 90=		
	Dental caries on rise in		
	Pacific Islands		
9. US. Minorities	Black > Hispanic > White	94	
Socio-economic			
10. SES	Worse caries and	27,74,91,94	
	peridontal disease in low		
	SES groups		
Other			
11. Pacifier use	No strong effect	93	

E. Metabolic Syndrome			
Risk factor	Direction of effect	<u>References</u>	<u>Comments</u>
Pre- and perinatal			
1. Birthweight	95=Low and high birth	95,96,97	97=Systematic review
	weight increases		
	syndrome; 96=Low birth		
	weight increases		
	syndrome; 97= small		
	effect of low birth		
	weight on syndrome		
Biological/Medical			
2. Adiposity	Increases blood pressure	98, 105	
	and syndrome		
3. Exercise	Decreased triglycerides	99	Meta analysis
	only		
4. Sleep-disordered	No effect	100	
breathing			
5. Inflammation	Low grade inflammation	101	
	assoc with syndrome		
6. Insulin resistance	Increases syndrome	103	
7. Adinocytekines	Increases syndrome	104	
Parental/family			
8. Family history of	Increases syndrome	95	
diabetes			
Nutritional			
9. Salt	Reduction in salt results	106	Meta analysis
	in decrease in blood		
	pressure		
Cultural/ethnic			
10. US minorities	Greater insulin	107	
	resistance in blacks vs		
	whites		

2. EDUCATION			
A. Cognitive Development	t		
Risk factor	Direction of effect	<u>References</u>	<u>Comments</u>
Pre- and perinatal			
1. Birthweight	Low birth weight decreases IQ	108,111	111=meta analysis
2. Prenatal drug exposure	No effect on IQ; 114= greater risk of learning and attention problems	110,114,115	
3. Preterm birth	112=Decreases IQ; 113=Decreases IQ but effect weaker for recent cohorts	112,113	112=meta analysis
Biological/Medical			
4. Sleep disordered breathing	No effect	116	
5. Hypoxia	Decreases IQ	118	
Parental/family			
6. Parental cognition	Increases children's cognition	119	
7. Maternal employment	Small significant effects of part-time (vs. full time) work on IQ	120,130	120=Meta analysis
Nutritional			
8. Breastfeeding	102=effect in association with FADS2 polymorphism; 109=No effect	102, 109	
9. Iron	121=Deficiency weakly related to cognitive deficiencies; 123= supplementation weakly related to cognitive improvements	121,123	123=Systematic review and meta-analysis
10. Methylmercury	High-mercury fish reduces cognitive function	122	
11. Breakfast omission	Decreases cognitive performance in poorly nourished (but not well- nourished) children	124,125	
Psychosocial			
12. TV watching	Decreases cognitive performance, depending on the content	126	Low income families
Environmental exposures			
13. Lead	Low-level exposure leads to reduced IQ	127	
Socioeconomic / Structura	I		
14. Early childhood education	Increases cognitive performance	128,129,130	

B. School performance			
Risk factor	Direction of effect	<u>References</u>	<u>Comments</u>
Biological/medical			
1. Asthma	Little or no effect	132	
2. Diarrhea	Early childhood diarrhea	134	
	adversely affects later		
	school performance		
3. Physical activity	Little or no effect	138	
4. Health conditions	Diabetes, sickle cell	139	
	anemia, and epilepsy all		
	adversely affect school		
	performance		
5. Fine motor skills	Preschool motor skills	154	
	improve school		
	performance		
Parenting/family		110	
6. Parental aspirations	Improves school	119	
7 Homo loorning	performance	110	
7. Home learning	Improves school	119	
environment 8. Interactive book		125	
o. Interactive DOOK	norformanco	155	
	Advorsaly affects school	127	
9. Divorce	nerformance	137	
10 Maternal	Small significant effects	120	Meta analysis
employment	of part-time (vs. full	120	
	time) work		
Nutrition			
11. Iron	Deficiency adversely	140	
	affects school		
	performance		
12. Food insufficiency	Inconclusive evidence	140	
13. Breakfast omission	140=Adversely affects	140,141	
	school performance in	,	
	poorly nourished (but		
	not well-nourished)		
	children; 141=No		
	noticeable impact		
Psychosocial			
14. Depression	Adversely affects school	142	
	performance		
15. TV watching	Adversely affects school	143	
	performance		
16. Conduct problems	Adversely affects school	119,144	
	performance		
17. ADHD, Hyperactivity	Adversely affects school	119,147,150	
	performance		
18. Smoking	Adversely affects school	119	
	pertormance		
19. Bully victimisation	Adversely affects school	119	
	performance	440	
20. Truancy	Adversely affects school	119	

	performance		
21. Drug use	Adversely affects school	119,145,146	
	performance		
Environmental exposures			
22. Lead	Low-level exposure	127	
	adversely affects school		
	performance		
Socioeconomic/Structural			
23. Reading recovery	Improves school	136	
	performance; greatest		
	gains for those with		
	lowest inital levels (esp.		
	Māori and Pacific)		
24. School readiness	Preschool maths, and to	148,149	149=meta analysis
	a lesser extent literacy/		
	attention ability		
	improves school		
	performance		
25. Early childhood	128/129=Improves	128,129,151	
education	school performance; 151		
	= mtigates effects of		
	poor background		
26. Material resources	Improves school	119	
	performance		
27. SES	Coming from a poorer	119, 152	
	background adversely		
	affects school		
	performance		
28. Quality of school	Improves school	136	
environment	performance (esp. For		
	Māori and Pacific)		

C. School readiness			
Risk factor	Direction of effect	References	Comments
Pre- and perinatal			
1. Low birth weight	Adversely affects school readiness	153	
2. Prenatal drug exposure	No effect	110,115	
Biological/Medical			
3. Physical activity	Improves school readiness	155	
4. Stress reactivity	High reactivity associated with poorer readiness in the face of high family adversity, and with better readiness in the face of low family adversity	158	
Parental/family			
5. Home environment	Quality of environment improves school readiness	131,156	
6. Parenting	Maternal and paternal supportiveness improves school readiness	157	
7. Family adversity	Adversely affects school readiness	158	
8. Birth interval	Intervals of <24 months adversely affect school readiness	159	
9. Mother's education	Low education adversely affects school readiness	162	
Psychosocial			
10. TV watching	Frequent TV watching ages 2-5 adversely affects school readiness	126	
11. Early language skills	Improves school readiness	156	
Cultural/ethnic			
12. Neighbourhood diversity	Ethnically diverse neighbourhoods mitigate school readiness deficits by ESL children	161	
Socioeconomic/structural			
13. Early childhood education	Quality and duration improves school readiness	129,162,163	
14. Pre-school intervention	Intervention to encourage parental interactions and positive clasroom management	165	

SOCIAL/JUSTICE	SOCIAL/JUSTICE			
A. Externalizing problems	(conduct problems, deling	uency, crime)		
Risk factor	Direction of effect	References	<u>Comments</u>	
Pre- and perinatal				
1. Prenatal stress	Increases conduct	166		
	problems			
2. Perinatal	Increases conduct	167		
complications	problems			
3. Smoking in pregnancy	167= Increases conduct	166,167		
	problems; 166=			
	Increases conduct			
	problems only in			
	mothers genetically-			
	related to their children,			
	so unlikely to be causal			
Biological/Medical				
4. MAOA genotype	Exaccerbates effect of	168,169,170		
	maltreatment			
5. Neurological problems	Increases conduct	171		
	problems			
6. Heart rate	Low heart rate is	167, 173		
	predictor of conduct			
	problems; 173=appears			
	to be a genetic pre-			
	disposition			
7. Asthma	Increases externalising	172	Meta analysis	
	behaviours			
Parenting/family				
8. Parenting	Reduce conduct	174,175,212	174,212=Cochrane,	
programmes	problems & crime		175=Campbell	
9. Parental drinking	Increases externalising	176,179		
	behaviours			
10. Parental antisocial	Increases externalising	117, 176, 177, 190, 213		
behaviour	behaviours;213=			
	association with			
	recidivism mediated by			
	prior delinquency			
11. Family history of	178=Increases	178,180		
depression	externalising behaviours,			
	180=No effect			
12. Family history of	Increases externalising	178		
alcohol abuse	behaviours			
13. Family stress	Increases externalising	179		
	behaviours			
14. Parenting	Cold parenting, erratic	171,190,191,214	214=meta analysis	
	discipline and poor			
	supervision increases			
	conduct problems			
15. Family history of	Increases conduct	180		
externalising disorders	problems			
16. Divorce	Increases conduct	137,190		
	problems			

17. Parental conflict	Increases externalising problems	181,182,190	Meta analysess
18. Large family size	Increases externalising problems	190	
Nutritional			
19. Food additives	No effect	183	
Psychosocial			
20. Verbal skills	Decreases conduct problems	167	
21. Executive functioning	High functioning decreases conduct problems	167	
22. Information	High ability decreases	167	
processing	conduct problems		
23. Difficult	Increases conduct	167,171,185	
temperament	problems		
24. Inattention	Increases conduct	171	
	problems		
25. Bully victimisation	Increases conduct problems	184	
26. Maltreatment	Increases conduct problems	168,169,170,190,215	215=meta analysis
27. Violent video games	Exposure increases aggressive behaviour	186,187	Meta analyses
28. Impulsiveness	Increases conduct problems	190	
29. IQ	Increased conduct problems among those with low IQ	190	
30. School performance	Poor performance increases conduct problems	190	
31. Antisocial peers	Increases conduct	190,191	
32. Witnessing violence	No clear effect	215	
33. Alcohol abuse	Increases conduct	217.218	
	problems		
Socioeconomic/structural			
34.SES	Low SES background increases conduct problems, 188=family factors predict conduct problems more strongly in low SES families	167,188,190	
35. Neighbourhod context 36. School context	189=Has greater impact on conduct problems in middle childhood, 190= neighbourhoods with high crime increase conduct problems Attending high	189,190	
	delinquency schools increase conduct		

	problems		
37. Early childcare	Reduces later conduct	128	
education	problems		

B. Internalizing problems (depression, anxiety)				
Risk factor	Direction of effect	References	Comments	
Pre- and perinatal				
1. Smoking in pregnancy	Increases internalising problems	193		
2. Birth complications	Increases depression risk	194		
Biological	· · · · · ·			
3. Asthma	Increases internalising behaviours	172	Meta analysis	
4. 5-HTTLPR gene (in association with stress)	Increases depression risk	195	Meta analysis	
5. Parental overweight	Increases depression risk	196		
6. Motor skills	Poor skills increase	194		
	depression risk			
7. Exercise	Smll reduction in anxiety 7 deprssion	197	Cochrane	
Parenting/family				
8. Family history of depression	Increases depression risk	117, 177,192,196,198		
9. Family history of anxiety	Increases anxiety risk	117, 192		
10. Parental conflict	Increases internalising problems	181,182,199	181,182=Meta analyses	
11. Parenting changes	Increases depression risk	194		
12. Parental education	Higher education decreases depression risk	196		
13. Parenting	Modest effects on child anxiety	200	Meta analyses	
Psychosocial				
14. Bullying victimisation	Increases internalising problems	201,206		
15. Stressful life events	Increases internalising problems	142, 195, 202		
16. Temperament	Inhibited temperament increases depression risk	185		
17. Alcohol abuse	Increases depression risk	203,204		
18. Cannabis use	Increases depression risk	205		
19. Child sexual abuse	Increases depression risk	207	Systematic review	
20. Parent-child attachment	Insecure attachment increases internalising	208		
	problems			
Cultural/ethnic				
21. Ethnicity	209=Higher rates of depression and anxiety in ethnic minorities in the USA; 211=Higher rates in Hispanic girls only	209,211		
Socioeconomic/structural				
22. SES	210=Low SES associated with increased	27,210,211	Systematic review	

internalising problems; 27,211=No effect	

C. Attention problems (ADHD)				
<u>Risk factor</u>	Direction of effect	<u>References</u>	<u>Comments</u>	
Pre- and perinatal				
1. Prenatal drug	Increases attention	115		
exposure	problems			
2. Smoking in pregnancy	219,220=Increases	164,219,220		
	ADHD risk; 164=			
	Increases risk only in			
	those genetically related			
	to mother, so prob not			
	causal			
3. Alcohol in pregnancy	No consistent link	220		
4. Stress in pregnancy	Modest association with	220		
	increased ADHD risk			
Biological				
5. Genes	VNTR in Dopamine	221,224	Meta analysis	
	Transporter Gene is risk			
	factor			
	DRD4 gene is a risk	223,224	Meta analysis	
	factor, especially for			
	Caucasians			
	DRD5, 5HTT, HTR1B, and		Meta analysis	
	SNAP25 are risk factors			
Parental/family				
6. Family history of	Increases ADHD risk	176		
alcohol dependence				
7. Maternal mental halth	Increases ADHD risk	225		
problems				
8. Poor parenting skills	Increases ADHD risk	226		
Environmental exposures				
9. Lead exposure	Increases ADHD risk	227		

D. Suicide			
Risk factor	Direction of effect	<u>References</u>	<u>Comments</u>
Biological/Medical			
1. Antidepressant use	228=Short term increase in suicide risk;230= On balance, suicide risk does not outweight benefits of SSRIs	228,230	Meta analysis
2. Allergen exposure (in association with alcohol intake)	Increases suicide risk	229	
Parental/family			
3. Single parenting	Increases suicide risk	231,250	
4. Family adversity	Increases suicide risk	232	
5. Family history of suicide	Increases suicide risk	117,248,251	
6. Family alcohol and drug problems Psychosocial	Increases suicide risk	233	
7. Depression	Increases suicide risk	142.233.245.250	
8. Self esteem	Low self esteem increases suicide risk	231	
9. Mental health problems	Increases suicide risk	232,248,251	
10. Education	Low education increases suicide risk	232	
11. Bullying victimisation	Increases suicide risk	184,235,236	
12. Bullying perpetration	Increases suicide risk	236	
13. Cannabis use	Increases suicide risk	146,244	
14. ADHD	Increases suicide risk, especially for males	234	
15. Alcohol use	Increases suicide risk	231,237,240,242,244, 250	
16. Social modelling	Witnessing suicide in peers/family increases suicide risk	238	
17. Impusivity	Increases suicide risk	241	
18. Eating disorders	Increases suicide risk	243	
Cultural/ethnic			
19. Ethnicity	Alcohol prior to suicide more prevalent for Caucasians, parental conflict a strong risk factor for Asian Americans, depression a strong risk factor for African Americans	246	
Socioeconomic/structural			
20. SES	Low SES increases suicide risk	232,247,248	

E. Alcohol Abuse			
Risk factor	Direction of effect	<u>References</u>	<u>Comments</u>
Parental/family			
1. Family history of alcohol problems	Increases risk of alcohol abuse	117,192,252,253,254	
2. Parenting	Reduced drinking according to: limiting availability, monitoring, relationship quality, support, discipline, communication	255	Systematic review
3. Parenting programmes	Reduces alcohol use	256	Systematic review
Psychosocial			
4. Conduct disorder	Increases risk of alcohol abuse	252	
5.Maltreatment	Increases risk of alcohol abuse	257	
6. Peer alcohol use	Increases risk of alcohol abuse	258	
7. Age of alcohol initation	Early age increases risk of alcohol abuse	259	
8. Cannabis use	Increases risk of alcohol abuse	146	
9. ADHD	Increases risk of alcohol abuse	260	Meta analysis
10. Stressful life events	Increases risk of alcohol abuse	261	
11. Impulsivity	Increases risk of alcohol abuse	272	
Socioeconomic/structural			
12. Price of alcohol	Increasing price reduces prevalence of abuse	262	
13. SES	263=Low SES increases risk of alcohol abuse; 264=No effect	263,264	263=Meta analysis, 264=Systematic review
14. Media exposure to alcohol	Moderately increases alcohol abuse	265,267,268	Systematic reviews

F. Drug Abuse			
<u>Risk factor</u>	Direction of effect	<u>References</u>	<u>Comments</u>
Parental/family			
1. Parenting	Reduces drug use	256	Systematic review
programmes			
2. Family history of drug	Increases risk of drug	117,192,275	275=Systematic review
abuse	abuse		
3. Family history of	Increases risk of	275	Systematic review
criminality	methamphetamine		
	abuse		
4. Parental relationship	I roubled relationship	276	Systematic review
	Increases risk of		
Dauchasasial			
	Increases rick of drug	260	Moto analysis
5. AUNU	abuse	200	wieta analysis
6. Stressful life events	Increases risk of drug	261	
	abuse		
7. Alcohol abuse	Increases risk of drug	269,270,275,276	275,276= Systematic
	abuse		review
8. Maltreatment	Increases risk of drug	146	
	abuse		
9. Education	Low education increases	270	
	risk of drug abuse		
10. Smoking	Increases risk of drug	270,275,276	275,276= Systematic
	abuse		review
11. Conduct problems	Increases risk of drug	270	
12 Ass of initiation of	abuse	271	
12. Age of initiation of	Early age of Initiation	2/1	
urug use	increases risk of drug		
13 Impulsivity	Increases risk of drug	272	
15. Impulsivity	ahuse		
14. Temperament	High 'approach' and low	273	Systematic review
	'avoidance' associated		
	with cannabis abuse		
15. Risky sexual	Increases risk of	275	Systematic review
behaviour	methamphetamine		
	abuse		
16. Mental health	Increases risk of	275	Systematic review
problems	methamphetamine		
	abuse		
17. Drug use by peers	Increases risk of	276	Systematic review
	cannabis abuse		
Cultural/ethnic			
18. Māori	Rates higher among	270	
	Māori		
Socioeconomic/structural			
19. SES	LOW SES Increases risk of	146,263,274	263=Meta analysis; 274=
20 Madia avraguna ta		265	Systematic review
20. Weula exposure to	drug abuse	205	Systematic review
uiugs	uiug anuse		

G. Smoking			
Risk factor	Direction of effect	References	<u>Comments</u>
Parental/family			
1. Parenting	Reduces smoking	256	Systematic review
programmes			
2. Family history of	Increases risk of smoking	117,277	
smoking			
3. Home smoking	Smoke-free homes	278	
restrictions	reduce risk of smoking		
Psychosocial			
4. ADHD	Increases risk of smoking	260,280	260=Meta analysis
Cultural/ethnic			
5. Asian Americans	Acculturation reduces	281,282	Systematic review
	increases smoking in		
	women: education		
	reduces smoking:		
	smoking initation is later		
	than non-Asians		
6 Pacific islanders	Higher rates than for	282	
	other American	202	
	ethnicities		
Socioeconomic/structural			
7. Media exposure to	265=Substantially	265.279	265=Systematic review.
smoking	increases risk of		279=Meta analysis
5	smoking. 279=Increases		,
	risk of smoking and		
	engenders a more		
	positive attitude to		
	smoking		
8. SES	Low SES increases risk of	27	
	smoking		
9. Enforcing law of	Interventions to improve	283	
tobacco sales to minors	compliance to this law		
	reduces risk of smoking		
10. School based	Programs targetting	284	
interventions	specific		
	sociodemographic		
	groups were found to		
	work best at reducing		
	smoking		

H. Risky Sex			
Risk factor	Direction of effect	<u>References</u>	<u>Comments</u>
Parental/family			
1. Father absence	Increases risk of risky sex	266	
Psychosocial			
2. Childhood sexual	Increases risk of early	285	
abuse	pregnancy		
3. Conduct disorder	Increases risk of risky sex	216,288	
4. Alcohol use	Increases risk of risky sex	286,287,289	
5. Drug use	Increases risk of risky sex	286	
6. Anxiety problems	Reduces risk of risky sex	288	
Cultural/ethnic			
7. Asian Americans	Lower incidence of risky	290	
	sexual behaviour;		
	acculturation increases		
	risk		

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