**Supplementary Materials**

Table 1S

Search terms used for systematic database searches

**Population:** Family OR families OR parent OR caregiverAND Child\* OR Youth\* OR Adolescent OR Young people AND

**Population:** LMIC (World Bank List) OR middle income countr\* OR low income countr\* OR developing world OR developing countr\* AND

**Population:** Mass conflict OR community conflict OR mass violence OR armed conflict OR humanitarian crises

**Intervention**: “Parenting intervention” OR “Parenting programme” OR “Family intervention” OR “family therapy” OR Psychotherapy OR psychoeducation OR counselling

**Outcome:** Mental health OR functioning OR externalizing symptoms OR internalizing symptoms OR child behaviour OR “conduct disorder” OR “conduct problems” OR depression OR anxiety OR stress OR trauma OR post-traumatic stress OR family interaction OR family/parent support OR quality of life OR well-being OR “emotion regulation” OR “social emotional”

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Population** | **Intervention** | **Comparison** | **Outcome** |
| **Inclusion Criteria** | Families with a child or youth (any person under the age of 24) living in a low or middle-income country. This will include, but is not limited to, families living in conflict-affected settings and humanitarian crises. | Any mental health- based intervention or program that involves the parent and/or the child/youth, and/or the entire family member/unit. | Treatment as usual, other active interventions, waitlist controls, no intervention controls, or within subjects (baseline data as comparison). | Relevant psychosocial outcomes for children/youth |
| **Exclusion Criteria** | Parents or family with members aged 25 years or older;  Families living in high-income countries;  Refugee families who have moved from a low-income country to a high-income country and the intervention is delivered in a high-income country; | Program that solely focuses on parent training skills for physical disability only;  Programs only looking at parent’s own psychological well-being;  Programs that work primarily with the child and involve parents in adjunctive sessions (i.e. school programs);  Program only working with the child (i.e. anger management, cognitive rehab, etc.) | Single case studies, studies without pre-and post-quantitative outcome data | Only child cognitive variables (i.e. attention, executive functioning, impulsivity);  Only physical outcomes |

Table 2S

*Inclusion and Exclusion Criteria*

Table 3S

Enumeration of Quality Ratings for the 32 Included Trials of Parenting or Family Interventions

|  |  |
| --- | --- |
| Quality Rating Criteria: *All Studies (N=32)* | *Number of studies meeting criteria* |
| 1. Was the study question or objective clearly stated? | **31** |
| 2. Were eligibility/selection criteria for the study population pre-specified and clearly described? | **30** |
| 3. Were the participants in the study representative of those who would be eligible for the test/service/intervention in the general or clinical population of interest? | **18** |
| 4. Were all eligible participants that met the pre-specified entry criteria enrolled? | **29** |
| 5. Was the sample size sufficiently large to provide confidence in the findings? | **17** |
| 6. Was the test/service/intervention clearly described and delivered consistently across the study population? | **32** |
| 6a. Cultural responsivity (at least 1): Were materials translated into local language, programme practices/materials consistent with—or adapted to fit with—local context, culture, r religion | **31** |
| 7. Were the outcome measures pre-specified, clearly defined, valid, reliable, and assessed consistently across all study participants? | **31** |
| 8. Were the people assessing the outcomes blinded to the participants' exposures/interventions? | **9** |
| 9. Was the loss to follow-up after baseline 20% or less? Were those lost to follow-up accounted for in the analysis? | **26** |
| 10. Did the statistical methods examine changes in outcome measures from before to after the intervention? Were statistical tests done that provided p values for the pre-to-post changes? | **32** |
| 11. Were outcome measures of interest taken multiple times before the intervention and multiple times after the intervention (i.e., did they use an interrupted time-series design)? | **2** |
| 12. If the intervention was conducted at a group level (e.g., a whole hospital, a community, etc.) did the statistical analysis take into account the use of individual-level data to determine effects at the group level? | **11** |

Table 4S

Enumeration of Additional Quality Ratings for RCTs: 16 Included Trials of Parenting or Family Interventions

|  |  |
| --- | --- |
| Additional Quality Rating Criteria, 8a-8c: *RCTs Only (N=16)* | *Number of studies meeting criteria* |
| 8a. Randomization (Maximum 2 points) |  |
| 1 point if randomization is mentioned | **16** |
| 1 additional point if the method of randomization is appropriate | **15** |
| Deduct 1 point if the method of randomization is inappropriate (minimum 0) |  |
| 8b. Blinding (max 2 points) |  |
| 1 point if blinding is mentioned | **9** |
| 1 additional point if the method of blinding is appropriate | **6** |
| Deduct 1 point if the method of blinding is inappropriate (minimum 0) |  |
| 8c. An account of all participants (max 1 point) |  |
| 1 point if report on account of all participants, ex. Detail of which participants have dropped out. | **13** |