

Health, social care and technological interventions to improve functional ability of older adults living at home: An evidence and gap map

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Abstract

Background: By 2030, the global population of people older than 60 years is expected to be higher than the number of children under 10 years, resulting in major health and social care system implications worldwide. Without a supportive environment, whether social or built, diminished functional ability may arise in older people. Functional ability comprises an individual's intrinsic capacity and people's interaction with their environment enabling them to be and do what they value.

Objectives: This evidence and gap map aims to identify primary studies and systematic reviews of health and social support services as well as assistive devices designed to support functional ability among older adults living at home or in other places of residence.

Search Methods: We systematically searched from inception to August 2018 in: MEDLINE, EMBASE, Cochrane Database of Systematic Reviews, CENTRAL, CINAHL, PsycINFO, AgeLine, Campbell Library, ASSIA, Social Science Citation Index and Social Policy & Practice. We conducted a focused search for grey literature and protocols of studies (e.g., ProQuest Theses and Dissertation Global, conference abstract databases, Help Age, PROSPERO, Cochrane and Campbell libraries and [ClinicalTrials.gov](https://www.clinicaltrials.gov)).

Selection Criteria: Screening and data extraction were performed independently in duplicate according to our intervention and outcome framework. We included completed and on-going systematic reviews and randomized controlled trials of

Abbreviations: EGM, evidence and gap map; ICF framework, International Classification of Function, Disability and Health framework; LGBTQ2+, lesbian, gay, bisexual, transgender, queer (or sometimes questioning), and two-spirited; LMIC, low- and middle-income countries; PICO, population, intervention, comparison, outcome; RCT, randomized control trials; SR, systematic review; WHO, World Health Organization.

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effectiveness on health and social support services provided at home, assistive products and technology for personal indoor and outdoor mobility and transportation as well as design, construction and building products and technology of buildings for private use such as wheelchairs, and ramps.

Data Collection and Analysis: We coded interventions and outcomes, and the number of studies that assessed health inequities across equity factors. We mapped outcomes based on the International Classification of Function, Disability and Health (ICF) adapted categories: intrinsic capacities (body function and structures) and functional abilities (activities). We assessed methodological quality of systematic reviews using the AMSTAR II checklist.

Main Results: After de-duplication, 10,783 records were screened. The map includes 548 studies (120 systematic reviews and 428 randomized controlled trials). Interventions and outcomes were classified using domains from the International Classification of Function, Disability and Health (ICF) framework. Most systematic reviews ($n = 71$, 59%) were rated low or critically low for methodological quality. The most common interventions were home-based rehabilitation for older adults ($n = 276$) and home-based health services for disease prevention ($n = 233$), mostly delivered by visiting healthcare professionals ($n = 474$). There was a relative paucity of studies on personal mobility, building adaptations, family support, personal support and befriending or friendly visits. The most measured intrinsic capacity domains were mental function ($n = 269$) and neuromusculoskeletal function ($n = 164$). The most measured outcomes for functional ability were basic needs ($n = 277$) and mobility ($n = 160$). There were few studies which evaluated outcome domains of social participation, financial security, ability to maintain relationships and communication. There was a lack of studies in low- and middle-income countries (LMICs) and a gap in the assessment of health equity issues.

Authors' Conclusions: There is substantial evidence for interventions to promote functional ability in older adults at home including mostly home-based rehabilitation for older adults and home-based health services for disease prevention. Remotely delivered home-based services are of greater importance to policy-makers and practitioners in the context of the COVID-19 pandemic. This map of studies published prior to the pandemic provides an initial resource to identify relevant home-based services which may be of interest for policy-makers and practitioners, such as home-based rehabilitation and social support, although these interventions would likely require further adaptation for online delivery during the COVID-19 pandemic. There is a need to strengthen assessment of social support and mobility interventions and outcomes related to making decisions, building relationships, financial security, and communication in future studies. More studies are needed to assess LMIC contexts and health equity issues.

1 | PLAIN LANGUAGE SUMMARY

[The evidence for health, social care and technological interventions to improve functional ability of older adults are unevenly distributed across intervention areas]

The evidence for health, social care and mobility interventions to improve functional ability of older adults includes mostly home-based rehabilitation and health services delivered by visiting healthcare professionals, and is of low or critically low quality.

1.1 | What is this evidence and gap map (EGM) about?

By 2030, the global population of people older than 60 years is expected to be higher than the number of children under 10 years, resulting in major health and social care system implications worldwide. Without a supportive environment, whether social or built, diminished functional ability may arise in older people.

Functional ability comprises an individual's intrinsic capacity and people's interaction with their environment, enabling them to be and do what they value. This map assesses the evidence on home-based health and social care as well as mobility interventions to improve functional ability of older adults living at home.

What is the aim of this evidence and gap map (EGM)?

The aim of this EGM is to identify primary studies and systematic reviews of health and social support services as well as assistive devices designed to support functional ability among older adults living at home or in other places of residence.

1.2 | What studies are included?

The EGM includes randomized controlled studies and systematic reviews that assess the effect of interventions to improve functional ability of older adults living at home or in other places of residence. The interventions were classified as home-based health, social care, and mobility interventions. Impact on body function and structures as well as activities were considered as outcomes.

There are 548 included studies (120 systematic reviews and 428 randomized controlled trials) in the map.

1.3 | What is the distribution of evidence?

The most common interventions were home-based rehabilitation for older adults ($n = 276$) and home-based health services for disease prevention ($n = 233$), mostly delivered by visiting healthcare professionals ($n = 474$).

There was a relative paucity of studies on personal mobility, building adaptations, family support, personal support and befriending or friendly visits.

The most measured intrinsic capacity domains were mental function ($n = 269$) and neuromusculoskeletal function ($n = 164$). The most measured outcomes for functional ability were basic needs ($n = 277$) and mobility ($n = 160$). There were few studies which evaluated outcome domains of social participation, financial security, ability to maintain relationships and communication.

There was a lack of studies in low- and middle-income countries (LMICs) and a gap in the assessment of health equity issues.

1.4 | What do the findings of the map mean?

There is substantial evidence for interventions to promote functional ability in older adults at home, including mostly home-based rehabilitation for older adults and home-based health services for disease prevention. Remotely delivered home-based services are of greater importance to policy-makers and practitioners in the context of the COVID-19 pandemic.

This map of studies published prior to the pandemic provides an initial resource to identify relevant home-based services which may be of interest for policymakers and practitioners, such as home-based rehabilitation and social support, although these interventions would likely require further adaptation for online delivery during the COVID-19 pandemic.

There is need to strengthen assessment of social support and mobility interventions and outcomes related to making decisions, building relationships, financial security and communication in future studies.

More studies are needed to assess LMIC contexts and health equity issues.

1.5 | How up-to-date is this EGM?

The authors searched for studies up to August 2018.

2 | BACKGROUND

2.1 | Introduction

2.1.1 | The problem, condition or issue

There is an increasing proportion of older adults in the global population, with UN population projections predicting that before 2020, people aged >65 years will outnumber children aged <10 years for the first time in history (UNDESA, 2017). LMICs such as China and India are expected to experience a rapid rise in population ageing, compared to Western Europe (UNDESA, 2017). Currently, over two-thirds of people over 65 years of age are living with multimorbidities (Banerjee, 2015). When combined with parallel increases in disparities to health care and broader determinants of health (Sadana et al., 2016), there are major implications for health and social care systems (Beard et al., 2016; Chatterji et al., 2015; Prince et al., 2015). While many nations are becoming wealthy with the influx of global socioeconomic developments, many countries, especially LMICs, have experienced increasing health and social disparities, especially among older adults (World Health Organization [WHO], 2015). Older adults with the greatest health needs are also often those with the fewest resources to support them (Beard et al., 2016). For example, older adults in LMICs have poor access to assistive technologies and medical devices, as a result of a confluence of factors that affect the availability and accessibility of these products in local markets, including affordability and appropriateness. These factors can influence their integration into health and social systems (Garçon et al., 2016; Marasinghe et al., 2015). Furthermore, the privatization of health and social services

becomes a barrier to quality of care if costs impact access to appropriate and timely care for older adults.

Functional ability is complex and comprises an individual's intrinsic capacity and people's interaction with their environment enabling them to be and do what they value (Cesari et al., 2018; WHO, 2015). The WHO considers intrinsic capacity to include the physical and mental capacities of a person. The environment defined by the WHO, includes all factors in the extrinsic world that form the context of an individual's life. For example, the home, community and society are included alongside the built environment, interpersonal relationships, attitudes, values, health and social policies, and the systems that support individuals and services (WHO, 2015). The Priority Assistive Products List of essential assistive devices includes wheelchairs, pill organizers, hearing aids, and other essential items for many older people and people with disabilities to be able to live a healthy and dignified life and mitigate declines in intrinsic capacity (WHO, 2016b).

The accumulation of exposures and environmental influences throughout life can influence the development of different risk factors that lead to chronic diseases, injuries, or other age-related issues that contribute to declines in intrinsic capacities. Without a supportive environment, whether social or built, this will result in diminished functional ability. The gradual decline in intrinsic capacities as some people age can require increased health and social care services from informal (i.e., family or friends) and formal caregivers (i.e., healthcare professionals). Increased care needs lead to increased burden on families, stress for older adults, and costs to society. For this reason, efforts to deliver cost efficient, effective interventions that optimize functional ability at any level of intrinsic capacity, is critical for older adults. Health and social care interventions (including assistive health technologies), and related systems, services and policies may include technological tools and devices and provision of health and social supports in the home.

While it is important to offer home-based supports that promote functional ability, we need to be mindful that existing health inequities may be worsened (Sadana et al., 2016). For example, if health and social services are provided privately and not covered by the health system or health insurance, all individuals will not have the same opportunities to achieve optimal health. Age-based bias is seen in research on conditions that affect older adults such as stroke and osteoarthritis, with the median age of participants in research over 10 years younger than the typical patient (Gaynor et al., 2014; Liberopoulos et al., 2009).

2.2 | Why it is important to develop the EGM

Over 85% of research investment is wasted (Chalmers & Glasziou, 2009), some of which could be avoided by prioritizing research directions and including rigorous evaluation of existing evidence using systematic reviews prior to funding or carrying out new research (Chalmers et al., 2014). An EGM is a decision-making and research-prioritization tool that highlights gaps in research to inform strategic health and social policy, program, and research priorities (Snilstveit et al., 2013). EGMs can be used to avoid needless duplication, and can also be used to identify where sufficient, high quality evidence from systematic reviews and randomized trials are available as a basis for

decisions or where sufficient studies are available for knowledge synthesis (Snilstveit et al., 2016).

This EGM is important to inform policy and research prioritization. It is aligned with the WHO Strategy and Action Plan on Ageing and Health 2016–2020. At the 69th World Health Assembly in May 2016, the WHO launched and received endorsement from all 193 member states for the WHO Strategy and Action Plan on Ageing and Health 2016–2020. This plan outlined five strategic objectives: (1) commitment to action on healthy ageing in every country, (2) developing age-friendly environments; (3) aligning health systems to the needs of older populations; (4) developing sustainable and equitable systems for providing long-term care; (5) improving measurement, monitoring, and research on healthy active ageing. The WHO aims to meet these by implementing evidence-based actions to maximize functional ability of every individual (WHO, 2016). In this way the process of “optimizing opportunities for health, participation and security will enhance the quality of life as people age” (WHO, 2015). This EGM is relevant to the first objective—a commitment to action on healthy ageing in every country. Furthermore, our objectives align with the United Nations Sustainable Development Goals and the objectives of the UN High Level meeting on preventing and controlling non-communicable diseases (United Nations, 2019; WHO, 2018).

We took a health systems perspective to extend the focus from health care to include social care and technological interventions. The evidence is presented in terms of functional ability. We also considered determinants of health inequity. This EGM considers the multifaceted and complex nature of functional ability and the various mechanisms (e.g., services, products and individuals) involved in supporting functional ability among ageing adults.

Currently, no EGMs exist that identify and assess the available evidence on health, social care and technological interventions to support functional ability among older adults living at home.

There are three primary audiences for this EGM. First, we expect researchers (e.g., universities, government, etc.) will use the results to inform further investigations on these topics, including new empirical research and evidence synthesis products. The second main anticipated audience is decision-makers for whom intrinsic capacity, functional ability and process outcomes are already or potentially of interest. This includes relevant ministries and programs within governments and/or donor agencies, as well as nongovernmental organizations and other advocacy and implementing organization staff. From a policy perspective, it is especially useful to know what kinds of interventions might most effectively affect intrinsic capacity, functional ability, and process outcomes. The third main anticipated audience is health and social care providers who can use the map to identify quality assessed synthesized evidence of health, social care, and technological interventions for their practice.

3 | OBJECTIVES

The objectives of this Campbell EGM are to:

- Identify and assess the available evidence on health, social care and technological interventions to improve functional ability among older adults living at home

- Identify available systematic reviews and randomized trials
- Identify areas where systematic reviews are needed
- Identify gaps in evidence where further primary research is needed
- Assess equity considerations in available systematic reviews and randomized trials
- Assess gaps and evidence related to health equity

4 | METHODS

4.1 | EGM: Definition and purpose

This EGM is based on a published protocol (Welch et al., 2019). We adapted evidence gap map methods from various key papers (Bragge et al., 2011; Lum et al., 2011; Snilstveit et al., 2013, 2016) and followed a five stage process:

- Define a framework
- Identify the available evidence
- Appraise the quality of the evidence
- Extract, code and summarize the data that relate to the objectives
- Visualize and present the findings in a user-friendly manner

This five stage process aligns with current Campbell Collaboration guidance (White et al., 2020). We used the Campbell Collaboration mapping tool developed by Digital Solution Foundary and EPPI-Centre (Digital Solution Foundary and EPPI-Centre, 2020) to display identified studies using the framework described below.

4.2 | Framework development and scope

The framework was developed following a meeting with methodologists, practitioners, decision makers and consumers at the Cochrane Colloquium during the 2017 Global Evidence Summit. The colloquium participants suggested using the International Classification of Functioning, Disability and Health (ICF) framework (Sadana & Posarac, 2018; WHO 2001) to define the interventions and outcomes for this EGM. We further defined the scope of the framework in consultation with our research team which includes input from the public (A. L.), practitioners (L. S., P. T., K. P., J. B., E. T., P. W. and M. C.), information scientist (M. R.), policy-makers (R. S. and H. S.) and researchers (V. W., S. M., J. T. C., T. H., M. C., E. K., B. S., A. S. and W. Z.). The ICF is a comprehensive framework used by the WHO to measure health and disability at both individual and population levels, as well as to operationalize the measurement of intrinsic capacities, functional ability and enabling environments (Sadana & Posarac, 2018).

As such, the EGM framework informed the inclusion and exclusion criteria. We followed the standard EGM framework as a matrix where the rows show intervention domains and the columns show outcome domains. Key dimensions of the framework and their sub-categories are detailed in the subsequent sections.

We further limited the scope to interventions that were provided in the home of older adults. Maintaining autonomy and independence, especially being able to make their own choices and decisions, are important for older adults in all settings (Hillcoat-Nalletamby, 2014; Plath, 2009; Welford et al., 2012). We defined the concept of home broadly, as the place of dwelling in which older adults seek to maintain their autonomy. This definition included any nonacute care places of residence such as housing units (detached and semi-detached houses or apartments), long-term care facilities (including hospices, and nursing homes), independent living or assisted living facilities.

4.3 | Stakeholder engagement

We created an Advisory Group comprised of methodologists, physicians (and other healthcare professionals), policy organizations, consumers and researchers with expertise in assistive health technology, healthy ageing, long-term care, rehabilitation, disability, memory and cognitive impairment. We held an exploratory meeting to invite feedback on the development of our EGM framework at the Global Evidence Summit in Cape Town, September 2017. The participants included family practitioners, geriatricians, social workers and methodologists. We also held a seminar at the Bruyère Research Institute Grand Rounds (26 October 2017) with family practitioner researchers, where participants provided feedback on the intervention-outcome framework. Our decision to focus on the selected intervention categories was also informed by engaging with our public representative (A. L.). Our central team (V. W., T. H., S. M., P. B. and C. M.) met at least once a month to discuss the direction and scope of the EGM. Preliminary findings were presented at the peer review meeting of WHO Consortium on Metrics and Evidence for Healthy Ageing, 10–11 October 2019. Feedback from the reviewers was included in the final document.

4.4 | Conceptual framework

Figure 1 below demonstrates the conceptual framework through which the inputs lead to the intended outcomes. A person's intrinsic capacity is dependent on their health characteristics (e.g., body functions, health related behaviors, disease or injuries), genetic inheritance, and personal characteristics (e.g., sex/gender or ethnicity). However, the extent to which an individual accomplishes activities that they value, functional ability, is also dependent on their interactions with the environment. Enabling environments may include services, systems and policies, and products and technology which, when implemented within a home context, can influence outcomes such as improved neuromusculoskeletal functioning, through the use of an external aid, assistance by another person or improvement in the built environment. Supportive environments can strongly influence functional ability. We also included health inequalities as an outcome of interest because we are aware that certain characteristics may stratify or impact health opportunities and outcome, such as socioeconomic status or place of residence.

4.5 | Dimensions

4.5.1 | Types of study design

We included completed and on-going systematic reviews and randomized controlled trials of effectiveness. We defined a systematic review according to the PRISMA definition (Moher et al., 2015), where the article explicitly states the methods used to identify studies (i.e., a search strategy), strategies for study selection (e.g., eligibility criteria and selection process) and explicitly detail methods of synthesis. We included studies published in grey literature such as reports, dissertations and conference abstracts.

We excluded systematic reviews of predictive factors, prognostic and diagnostic studies, and studies that primarily analyzed implementation, barriers and facilitators to effectiveness (Snilstveit et al., 2013). Literature reviews that did not describe methods used for search, data collection, and/or synthesis were excluded. We also excluded theoretical or modeling studies, editorials and commentaries. We did not include qualitative research.

4.5.2 | Types of intervention/problem

We contextualized interventions according to the International Classification of Functioning, Disability and Health (ICF) categorization of environmental factors. This was further divided into:

1. Health and social services, systems and policies: While we recognize that systems and policies can have an impact on the individual, we specifically focused on sections e5750 and e5800 from the ICF, which includes health and social support services provided at home such as homemaking, personal care, healthcare professional home visits, or long-term care.
2. Products and technology related to mobility: The ICF provides a very comprehensive list of eligible interventions. We used sections e1201 and e155 that focused on assistive products and technology for personal indoor and outdoor mobility and transportation as well as design, construction and building products and technology of buildings for private use. This includes products such as wheelchairs, walking devices, transfer devices and ramps.

We decided to limit the scope of the ICF framework due to feasibility. Specifically, we excluded studies of pharmacological interventions, therapies, telemedicine or telecare, educational programs and any hospital-based programs. We also excluded any studies that examine caregiver support services exclusively without evaluating outcomes related to older adults. A comprehensive list of interventions in each category may be found in Table 1.

4.5.3 | Types of population (as applicable)

This EGM focused on adults over the age of 60 years, using the United Nations cut off for older adults (United Nations, 2015).

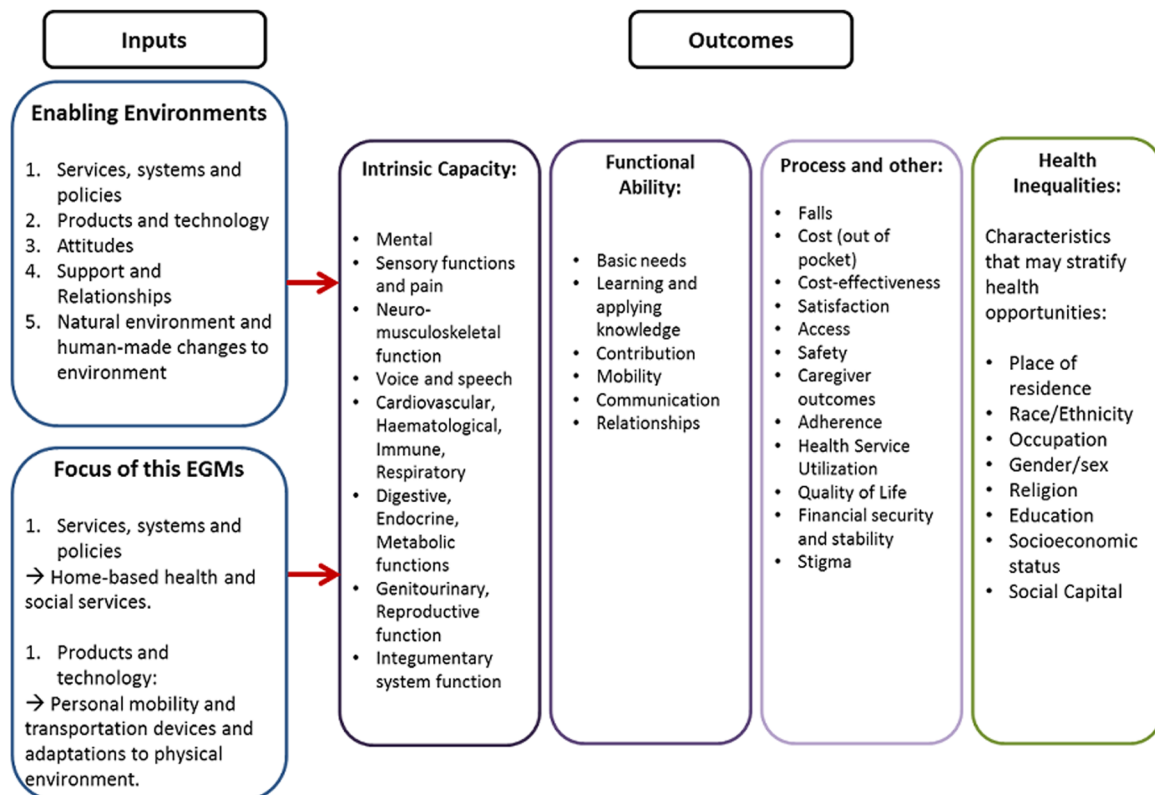


FIGURE 1 Conceptual framework adapted from the WHO International Classification of Functioning, Disability and Health (ICF)

TABLE 1 Interventions framework (based on the ICF)

Intervention category	Focus	Definition	Specific examples
Services, systems and policies	e575 General social support services, systems and policies	Services, systems and policies aimed at providing support to those requiring assistance in areas such as shopping, housework, transport, child care, self-care and care of others, in order to function more fully in society. Exclusions: social security services, systems and policies (e570); personal care providers and personal assistants (e340); health services, systems and policies (e580)	e5750 General social support services: Services and programs aimed at providing social support to people who, because of age, poverty, unemployment, health condition or disability, require public assistance in the areas of shopping, housework, transport, self-care and care of others, in order to function more fully in society
	e580 Health services, systems and policies	Services, systems and policies for preventing and treating health problems, providing medical rehabilitation and promoting a healthy lifestyle. Exclusions: general social support services, systems and policies	e5800 Health services: Services and programmes at a local, community, regional, state or national level, aimed at delivering interventions to individuals for their physical, psychological and social well-being, such as health promotion and disease prevention services, primary care services, acute care, rehabilitation and long-term care services; services that are publicly or privately funded, delivered on a short-term, long-term, periodic or one-time basis, in a variety of service settings such as community, home-based, school and work settings, general hospitals, specialty hospitals, clinics, and residential and nonresidential
Products and technology	e120 Products and technology for personal indoor and outdoor mobility and transportation	Equipment, products and technologies used by people in activities of moving inside and outside buildings, including those adapted or specially designed, located in, on or near the person using them. Inclusions: general and assistive products and technology for personal indoor and outdoor mobility and transportation	e1201 Assistive products and technology for personal indoor and outdoor mobility and transportation. Adapted or specially designed equipment, products and technologies that assist people to move inside and outside buildings, such as walking devices (such as canes or crutches), special cars and vans, adaptations to vehicles, wheelchairs, scooters and transfer devices
	e155 Design, construction and building products and	Products and technology that constitute an individual's indoor and outdoor human-made environment that is planned,	e1550 Design, construction and building products and technology for entering and exiting of buildings for private use.

(Continues)

TABLE 1 (Continued)

Intervention category	Focus	Definition	Specific examples
	technology of buildings for private use	designed and constructed for private use (e.g., home, dwelling), including those adapted or specially designed. Inclusions: entry and exits, facilities and routing	Products and technology of entry and exit from the human-made environment that is planned, designed and constructed for private use, such as entries and exits to private homes, portable and stationary ramps, power-assisted doors, lever door handles and level door thresholds

Studies and reviews were included if at least 50% of the sample population was greater than 60 years old.

4.5.4 | Types of outcome measures (as applicable)

We mapped the evidence on outcomes that fell into one of the following ICF (WHO, 2001) adapted categories: intrinsic capacities (body function and structures) and functional abilities (activities). We also included process and other outcomes that may impact a particular outcome. We considered health inequities by examining environmental and personal attributes that may stratify health opportunities and outcomes, using the PROGRESS framework (O'Neill et al., 2014). PROGRESS is an acronym which stands for: place of residence, race/ethnicity, occupation, gender, religion, education, socioeconomic status and social capital. Our outcomes framework is provided in Table 2.

The intrinsic capacity outcome category consisted of mental (e.g., depression, sleep, vitality); sensory functions and pain (e.g., vision,

TABLE 2 Outcomes framework

Outcome category	Measure/construct
Intrinsic capacity	• Mental • Sensory functions and pain • Neuromusculoskeletal function • Voice and speech • Cardiovascular, haematological, immune, respiratory • Digestive, endocrine, metabolic functions • Genitourinary, reproductive function • Integumentary system function
Functional ability	• Basic needs • Learning and applying knowledge • Contribution • Mobility • Communication • Relationships
Process and other	• Falls • Cost (out of pocket) • Cost-effectiveness • Satisfaction • Access • Safety • Caregiver outcomes • Adherence • Health service utilization • Quality of life • Financial security and stability • Stigma
Health inequalities	• Place of residence • Race/ethnicity • Occupation • Gender/sex • Religion • Education • Socioeconomic status • Social capital

TABLE 3 Search strategy for MEDLINE

Category	Terms
Population	1 exp Aged/pc, px, rh [Prevention & Control, Psychology, Rehabilitation] (8053) 2 "Aged, 80 and over"/(806254) 3 Frail Elderly/(9588) 4 elderly.ti.ab. (219354) 5 older people.ti.ab. (23442) 6 older adult*.ti.ab. (61366) 7 older men.ti.ab. (7857) 8 older women.ti.ab. (12791) 9 old* age*.ti.ab. (65408) 10 pensioners.ti.ab. (793) 11 retirement.ti.ab. (11779) 12 "end of life".ti.ab. (18653) 13 (Resident* and (old* or home* or retirement or nursing)).ti.ab. (38765) 14 geriatric*.ti.ab. (41516) 15 (veteran* and (old* or home* or retire*)).ti.ab. (5047) 16 or/1-15 (1121318)
Intervention	17 exp Self-Help Devices/(10537) 18 exp Orthopedic Equipment/(92047) 19 assistive devices.ti.ab. (1494) 20 assistive equipment.ti.ab. (39) 21 mobility equipment.ti.ab. (20) 22 mobility device*.ti.ab. (311) 23 mobility aid*.ti.ab. (276) 24 motility.ti.ab. (85101) 25 (walking adj2 (device* or aid* or equipment)).ti.ab. (1248) 26 cane*.ti.ab. (5734) 27 crutches.ti.ab. (1155) 28 walking stick*.ti.ab. (202) 29 (Adapt* adj3 (cars or transport or vehicles)).ti.ab. (506) 30 (Adapt* adj3 (home* or house*)).ti.ab. (1545) 31 Wheelchair*.ti.ab. (6462) 32 exp Bathroom Equipment/(10) 33 scooter*.ti.ab. (368) 34 transfer device*.ti.ab. (231) 35 (communication adj (aid* or device*)).ti.ab. (858) 36 exp Optical devices/(88276) 37 Hearing aids/(7984) 38 eyeglasses.ti.ab. (683) 39 glasses.ti.ab. (10746) 40 spectacles.ti.ab. (2316) 41 hearing device*.ti.ab. (512) 42 hearing aid*.ti.ab. (8346) 43 vision aid*.ti.ab. (364) 44 ((Adapt* or adjust*) adj3 (door* or entry or exit)).ti.ab. (239) 45 Stair lift*.ti.ab. (2) 46 stair climbing.ti.ab. (1444) 47 stairs.ti.ab. (2902) 48 stair rails.ti.ab. (2) 49 shallow steps.ti.ab. (0) 50 (ramp or ramps).ti.ab. (7094) 51 Home Care Services/(31353) 52 home care service*.ti.ab. (1605) 53 home support service*.ti.ab. (59) 54 home visit*.ti.ab. (7662)

(Continues)

TABLE 3 (Continued)

Category	Terms
	55 community services.ti.ab. (2375) 56 shopping.ti.ab. (3322) 57 house help.ti.ab. (1) 58 home help.ti.ab. (411) 59 (food adj (preparation or assistance or help or service or delivery)).ti.ab. (3932) 60 (meal* adj3 (provision or assistance or help or service* or preparation or delivery)).ti.ab. (1137) 61 homemaking.ti.ab. (109) 62 housekeeping.ti.ab. (8477) 63 ((household or kitchen or routine) adj (jobs or tasks or chores)).ti.ab. (888) 64 bathing.ti.ab. (9571) 65 grooming.ti.ab. (5015) 66 personal hygiene.ti.ab. (1847) 67 toileting.ti.ab. (857) 68 foot care.ti.ab. (1270) 69 (medication adj2 reminders).ti.ab. (147) 70 (kitchen or bathroom or bedroom).ti.ab. (5694) 71 or/17-70 (400411)
Outcomes	72 exp "Activities of Daily Living"/(63476) 73 Human Activities/(2170) 74 Automobile Driving/(17307) 75 Leisure Activities/(7897) 76 "activities of daily living".ti.ab. (22139) 77 "quality of life".ti.ab. (229433) 78 "Quality of Life"/(164112) 79 independence.ti.ab. (36023)80 wellbeing.ti.ab. (11362) 81 social life.ti.ab. (3877) 82 social participation.ti.ab. (2177) 83 happiness.ti.ab. (5642) 84 happier.ti.ab. (734) 85 mental health.ti.ab. (116393) 86 functional ability.ti.ab. (4311)87 depression.ti.ab. (289365) 88 cognitive.ti.ab. (296200) 89 sensory function*.ti.ab. (3884) 90 pain.ti.ab. (543562) 91 distress.ti.ab. (97018) 92 vitality.ti.ab. (10533) 93 energy.ti.ab. (544017) 94 fatigue.ti.ab. (80717) 95 tiredness.ti.ab. (3430) 96 self care.ti.ab. (14789) 97 self efficacy.ti.ab. (21966) 98 mobility.ti.ab. (123516)99 community life.ti.ab. (457) 100 security.ti.ab. (38430) 101 relationships.ti.ab. (322577) 102 satisfaction.ti.ab. (113208) 103 adherence.ti.ab. (98155) 104 reablement.ti.ab. (49) 105 institutionalization.ti.ab. (4370)106 or/72-105 (2682926)
Study design	107 systematic*.ti.ab. (374866) 108 (meta-analysis or metaanalysis).ti.ab. (112568) 109 (review* and (literature or studies or trials)).ab. (693115)

(Continues)

TABLE 3 (Continued)

Category	Terms
	110 review.ti. (393065)
	111 (evidence adj2 synthesi*).ti.ab. (5932)
	112 overview.ti.ab. (139107)
	113 pubmed.ab. (82182)
	114 medline.ab. (94705)
	115 or/107-114 (1336239)
	116 randomized controlled trial.pt. (464926)
	117 controlled clinical trial.pt. (92516)
	118 randomized.ti.ab. (448898)
	119 randomly.ab. (294026)
	120 trial.ti.ab. (509010)
	121 groups.ab. (1815046) 122 usual care.ab. (13020)
	123 or/116-122 (2634734)
	124 115 or 123 (3780045)
	125 16 and 71 and 106 and 124 (3987)

hearing); neuromusculoskeletal function (e.g., gait, balance); voice and speech (e.g., articulation); cardiovascular, haematological, immune, respiratory system function (e.g., blood pressure, respiration); digestive, endocrine, metabolic functions (e.g., thyroid, glucose); genitourinary and reproductive function (e.g., bladder control); and integumentary system function (e.g., skin, nails).

The functional ability outcome category consisted of the following constructs: basic needs (e.g., self-care, acquisition of goods and services); learning and applying knowledge; contribution (e.g., community life, employment); mobility (e.g., walking); relationships (e.g., interpersonal interactions); and communication (e.g., language).

Process and other outcomes included cost (out of pocket), cost-effectiveness, falls, satisfaction of older adult, safety, caregiver outcomes, adherence, health service utilization, quality of life, financial security, access and stigma. Access is a multifaceted concept and can be understood as the opportunity or ease with which consumers or communities are able to use appropriate services in proportion to their needs (Daniels, 1982; Whitehead, 1992). As such, the concept of access included: acceptability, approachability, availability and accommodation, affordability and appropriateness (Levesque et al., 2013).

4.5.5 | Other eligibility criteria

Types of settings

We included interventions which were provided in the home setting for older adults. We defined home as an individual's place of residence that can include housing units (houses/apartments), long-term care (including nursing homes, and hospices), independent living (e.g., retirement residences), and assisted living facilities. We did not include any acute or sub-acute care and convalescent care settings (e.g., geriatric rehabilitation in subacute care). Studies of mixed settings were included if the intervention took place in the home setting at least 50% of the time. We coded the settings so that the evidence can be filtered according to setting.

4.6 | Search methods and sources

We developed and piloted a search strategy (with a selection of studies that met our inclusion criteria) with the guidance of an information scientist (M. R.). This search comprised medical and health databases (MEDLINE (via OvidSp), EMBASE (via OvidSp), Cochrane Database of Systematic Reviews, CENTRAL, CINAHL (Via EBSCOhost), APA PsycINFO (via OvidSp), AgeLine (via EBSCOhost) and databases relevant to social care and social policy (Campbell Library, ASSIA (via ProQuest), Social Science Citation Index (via Web of Science) and Social Policy & Practice (via OvidSp). The database searches were run between 26 July 2018 and 1 August 2018. No limits for language or date were used. See Table 3 for full search strategy as used in MEDLINE, and adapted for the other databases (see Appendix 1–8).

We searched for relevant trials and systematic reviews in the grey literature via ProQuest Theses and Dissertation Global, and via Conference Proceedings Citation Index. We also searched for relevant unpublished studies via relevant international organizations (e.g., Help Age, WHO, and Institute for Research on Public Policy).

We searched for ongoing systematic reviews in PROSPERO and the Cochrane and Campbell libraries as well as on the open science framework (<https://osf.io/>). We searched for ongoing randomized trials in ClinicalTrials.gov and the WHO International Clinical Trials Registry Platform.

4.7 | Analysis and presentation

4.7.1 | Filters for presentation

Our EGM is presented as a matrix of interventions (rows) and outcomes (columns) and reports the evidence base that met our inclusion criteria.

Users of the interactive EGM can additionally filter studies by the following filters:

- Publication status: completed studies and on-going studies (i.e., study protocols).
- Age groups: 65 years and under, 65 years and above, over 75 years, and over 85 years.
- Health conditions/status: communicable disease (e.g., flu, HIV/AIDS), noncommunicable disease (e.g., dementias, diabetes, cancer, depression), injury (e.g., fractures, falls), discharged from hospital, end-of-life, physical frailty (e.g., at risk of functional decline), social frailty (e.g., social isolation), care dependent (e.g., when older adult is no longer able to undertake tasks necessary for daily life without the assistance of others (WHO, 2015), and dementia.
- WHO regions: South-east Asia, Western Pacific, Europe, Africa, the Americas, Eastern Mediterranean.
- World Bank Classifications: high-income economies, upper-middle income economies, lower-middle income economies, low-income economies.

- Proportion of women included in study: 0%–25%, 25%–50%, 50%–75% and 75%–100%.

4.7.2 | Dependency

We linked all publications of the same study to count as one study (this included protocols if published and any secondary analyses). It is important to note that systematic reviews are likely to include the RCTs included in the map and there may be more than one systematic review which includes the same RCT(s). All relevant randomized trials were included regardless of whether they were included in a systematic review. We elaborate further in the discussion on how the interactive map should be interpreted.

4.8 | Data collection and analysis

4.8.1 | Screening and study selection

Two reviewers independently screened the titles and abstracts of all retrieved articles. We screened titles and abstracts by intervention, study design, setting and population. We did not use outcomes as an inclusion criterion. Full-texts of potentially eligible studies were screened independently in duplicate and any conflicts were resolved through discussion or by a third reviewer (V. W.). We did not contact authors of studies or reviews for missing information. Studies published in languages other than English or French, were translated using Google Translate and/or a native speaker, recruited through professional networks. This was done at the full-text screening and coding stages.

4.8.2 | Data extraction and management

Once the eligible studies were identified, we tested and piloted the data extraction form on a sample of studies, generated a draft map, and met with our advisory board to make any modifications. We also invited feedback from our larger team. Two reviewers independently extracted data on published and ongoing systematic reviews and randomized trials related to the population, intervention, comparison, outcomes, setting and other categories we used as filters. We also coded studies to indicate whether the population was socially disadvantaged across PROGRESS (O'Neill et al., 2014) and identified whether any analyses were conducted across sex/gender or any other PROGRESS characteristics. Our complete list of coding categories for data extraction is found in Appendix 9. We coded systematic reviews using the research question or eligibility criteria. We did not go back to included primary studies within a review for more details. Differences in extraction were resolved by discussion.

4.8.3 | Tools for assessing risk of bias/study quality of included reviews

Since systematic reviews are often used for decision making, we appraised the methodological quality of systematic reviews using the AMSTAR-2 (Assessing the Methodological Quality of Systematic Reviews) checklist (Shea et al., 2017) in duplicate for 10% of eligible studies. κ statistics were also used to check agreement for each item. If agreement was over 80%, we proceeded with single data extraction with verification by a second reviewer for the remainder of studies.

The quality of randomized trials is not usually assessed in EGMs since the purpose is to identify the randomized trials available, and not to make decisions based on single trials. As such, we did not assess quality of randomized trials (Snijlsteit et al., 2017).

4.8.4 | Methods for mapping

We used the EPPI-Reviewer 4 software (Thomas et al., 2010) for screening and coding, and the EPPI-Mapper (Digital Solution Foundry and EPPI-Centre, 2020) for generating the map. EPPI-Reviewer and EPPI-Mapper are developed by the EPPI-Centre at the Social Science Research Unit of the UCL Institute of Education, University of London, UK (<http://eppi.ioe.ac.uk/cms/Default.aspx?alias=eppi.ioe.ac.uk/cms/er4>).

5 | RESULTS

5.1 | Description of studies

5.1.1 | Results of the search

Our search retrieved 16,083 records from database searching with 4 additional records identified through other sources. After deduplication, 10,783 articles were screened in duplicate by title and abstract. From this, full texts of 1194 articles were screened in duplicate for eligibility. When full texts were not available, we used an interlibrary loan service. We included 548 studies in this map, of which 120 were systematic reviews (22%) and 428 were randomized controlled trials (78%). There were 502 completed studies including 117 completed systematic reviews (23%) and 385 completed randomized controlled trials (77%). Among the 46 on-going studies, three were systematic reviews (7%) and 43 were randomized controlled trials (93%). See PRISMA flow chart in Figure 2.

5.1.2 | Excluded studies

The main reasons for exclusion at the full-text screening stage were due to inappropriate intervention ($n = 192$), target population ($n = 44$), study design ($n = 213$), and setting ($n = 141$). See

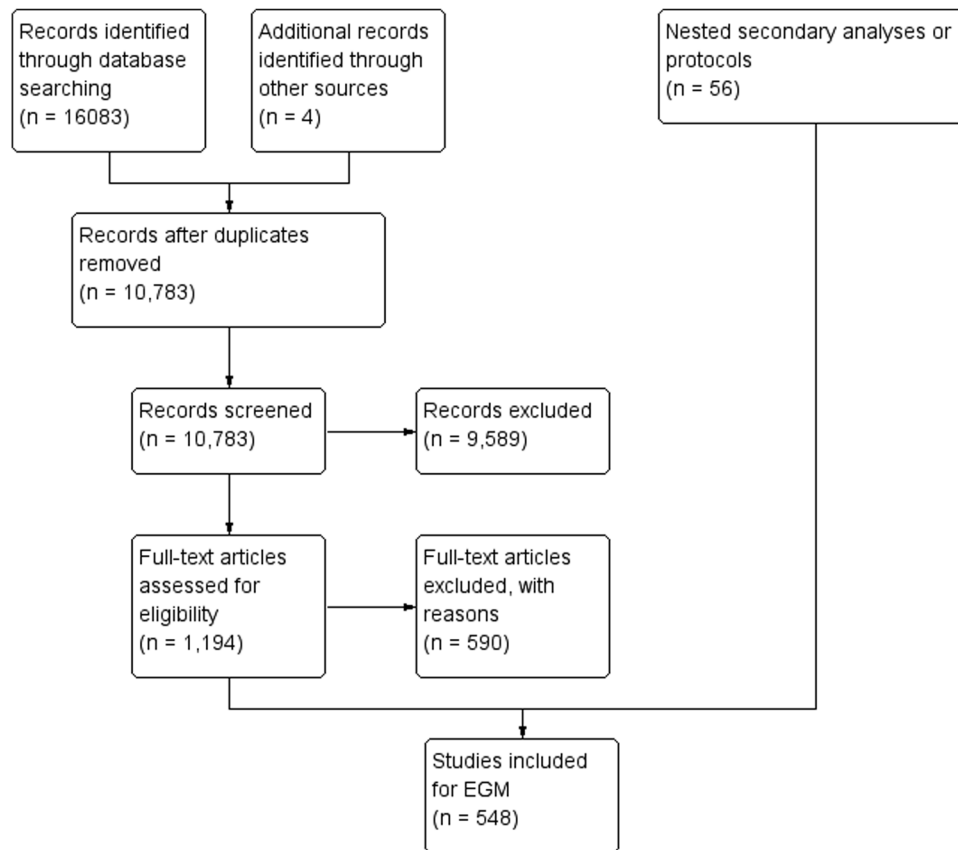


FIGURE 2 PRISMA flow chart

Supporting Information material for table of excluded studies and references.

5.2 | Synthesis of included studies

Since many of the studies included in this EGM have been coded under multiple output indicators (e.g., more than one intervention category), a single study may appear in multiple cells. See Supporting Information interactive EGM map https://globalageing.cochrane.org/sites/globalageing.cochrane.org/files/public/uploads/ageing_egm_interactive_map_may5_20.html.

5.2.1 | Interventions

As described earlier, we focused on four sections of the two broad domains of enabling environments within the ICF framework: health services, social support services, personal indoor and outdoor mobility and transportation, and design, construction and building products and technology. See Figure 3 for distribution of studies across our broad intervention categories.

Evidence, however, is not distributed evenly across the interventions and outcomes. Large clusters of randomized controlled trials and systematic reviews are present in some intervention areas

(e.g., health services—rehabilitation services) while other intervention areas have very few studies (e.g., general social support services, systems and policies—transportation).

For visiting healthcare professional interventions these clusters of randomized controlled trials and systematic reviews include mental functions ($n = 230$, 186 RCTs and 104 SRs), neuro-musculoskeletal ($n = 138$, 106 RCTs and 32 SRs), basic needs ($n = 241$, 190 RCTs and 51 SRs), mobility ($n = 128$, 115 RCTs and 13 SRs), quality of life ($n = 189$, 147 RCTs and 42 SRs), and health service utilization ($n = 191$, 147 RCTs and 44 SRs). For rehabilitation interventions these clusters include mental functions ($n = 132$, 105 RCTs and 27 SRs), neuro-musculoskeletal ($n = 134$, 106 RCTs and 28 SRs), basic needs ($n = 149$, 111 RCTs and 38 SRs), mobility ($n = 123$, 111 RCTs and 12 SRs), quality of life ($n = 115$, 91 RCTs and 24 SRs), and health service utilization ($n = 191$, 48 RCTs and 143 SRs). For general health services for disease prevention interventions these clusters include mental functions ($n = 118$, 97 RCTs and 21 SRs), basic needs ($n = 119$, 97 RCTs and 22 SRs) and quality of life ($n = 189$, 77 RCTs and 112 SRs), and health service utilization ($n = 129$, 104 RCTs and 25 SRs).

There are few randomized controlled trials and systematic reviews that assess the following interventions across any outcomes; transportation ($n = 2$ RCTs), befriending or friendly visits ($n = 3$ RCTs), home making ($n = 8$, 7 RCTs and 1 SR), visiting lay service providers ($n = 11$ RCTs), caregiver support ($n = 12$, 8 RCTs and 4 SRs), personal

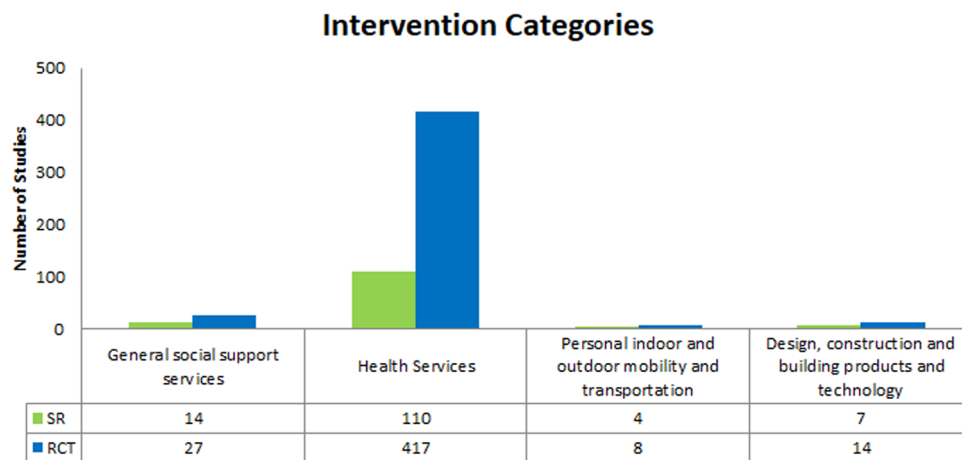


FIGURE 3 Intervention categories

mobility and transportation devices ($n = 12$, 8 RCTs and 4 SRs), adaptations to physical environments ($n = 21$, 14 RCTs and 7 SRs), personal care ($n = 23$, 14 RCTs and 9 SRs), long term care services ($n = 14$, 7 RCTs and 7 SRs), health promotion services ($n = 27$, 20 RCTs and 7 SRs).

It is important to recognize that these clusters are not suggestive of greater evidence for a (positive or negative) impact of an intervention on outcome indicators. Rather, they suggest that these relations have been investigated with greater frequency, irrespective of the actual impact documented.

5.2.2 | Outcomes

Our EGM framework maps thirteen interventions to 26 outcomes; 8 intrinsic capacity, 9 functional ability and 9 process and other. The most frequently measured are intrinsic capacity outcomes related to mental functions ($n = 269$, 216 RCTs and 53 SRs), neuromusculoskeletal ($n = 164$, 130 RCTs and 34 SRs), sensory and pain ($n = 73$, 58 RCTs and 15 SRs) (see Figure 4); functional ability outcomes related to basic needs ($n = 277$, 216 RCTs and 61 SRs), quality of life ($n = 222$, 172 RCTs and 50 SRs) and mobility ($n = 160$, 146 RCTs and 14 SRs) (see Figure 5); and process and other outcomes related to health service utilization ($n = 206$, 159 RCTs and 47 SRs), falls ($n = 106$, 81 RCTs and 25 SRs), cost-effectiveness ($n = 97$, 74 RCTs and 23 SRs), satisfaction of older adults ($n = 86$, 56 RCTs and 30 SRs), and caregiver outcomes ($n = 71$, 50 RCTs and 21 SRs) (see Figure 6).

For any intervention type there are no studies that assess voice and speech, and stigma. Furthermore, there are few studies that assess the following outcomes for any intervention type; financial security and stability ($n = 2$ RCTs), communication ($n = 3$ RCTs), integumentary system ($n = 4$, 3 RCTs and 1 SR), learning, grow and make decisions ($n = 6$ RCTs), access ($n = 7$, 4 RCTs and 2 SRs), genitourinary and reproductive functions ($n = 15$, 13 RCTs and 2 SRs), safety ($n = 20$, 17 RCTs and 3 SRs) (see Figures 4–6).

5.3 | Risk of bias in included reviews

We assessed the methodological quality of 10% (12) systematic reviews in duplicate and once agreement was reached, we proceeded with single assessment of the rest. In total, 120 systematic reviews were assessed, of which, only 13 (11%) were high quality reviews, while the remaining rated moderate (28%), low (13%) and critically low (46%). We did not assess the methodological quality of the three on-going systematic reviews (2%) (see Figure 7).

The main reasons for low quality are: (a) not reporting sources of funding for the studies included in the reviews, (b) not providing a list of excluded studies and justification for exclusion, (c) not accounting for risk of bias assessment in primary studies when interpreting or discussing the results, and (d) not using a satisfactory technique to assess risk of bias in individual studies included in the reviews.

5.4 | Additional dimensions (if applicable)

5.4.1 | Health equity

Gender Inequalities

We assessed gender inequalities by:

- Checking the proportion of women included in systematic reviews and randomized controlled trials (completed and on-going),
- We assessed whether the studies analyzed (O'Neill et al., 2014) effects of interventions by sex/gender or other PROGRESS factors.

In 323 randomized controlled trials and 20 systematic reviews, women comprised >50% of the study participants (Figure 8). There were no studies that reported on including individuals from the LGBTQ2+ (lesbian, gay, bisexual, transgender, queer (or sometimes questioning), and two-spirited) community.

Only 11 of the 548 included studies (2%) described the population as being socially disadvantaged across a PROGRESS

Outcomes: Intrinsic Capacity

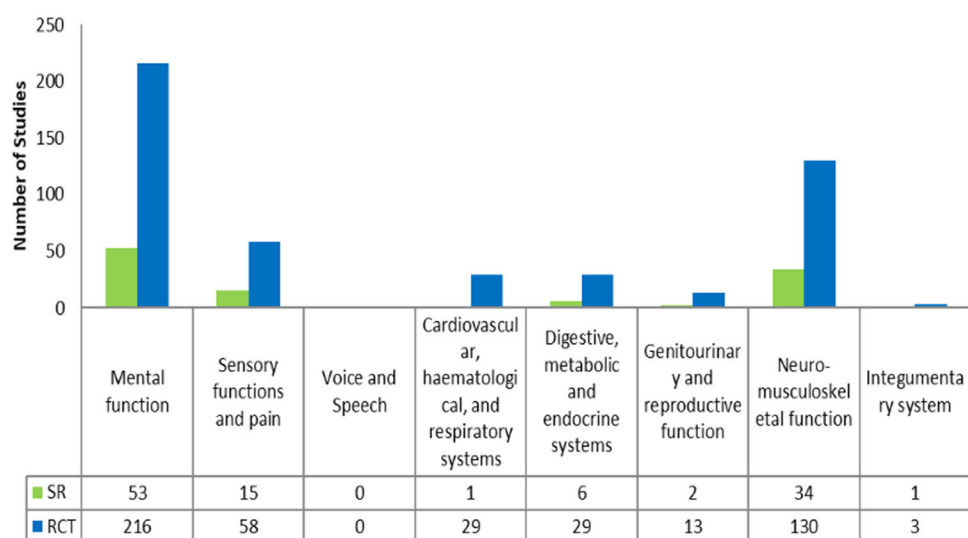


FIGURE 4 Intrinsic capacity outcomes

Outcomes: Functional Ability

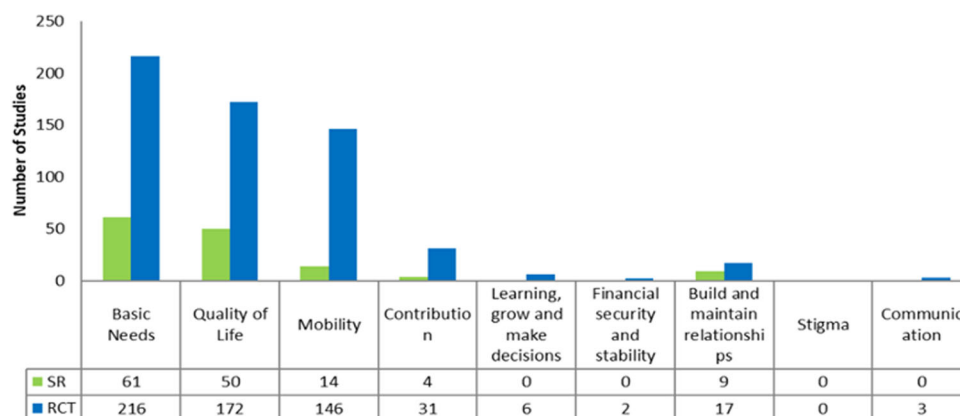


FIGURE 5 Functional ability outcomes

Outcomes: Process and Other

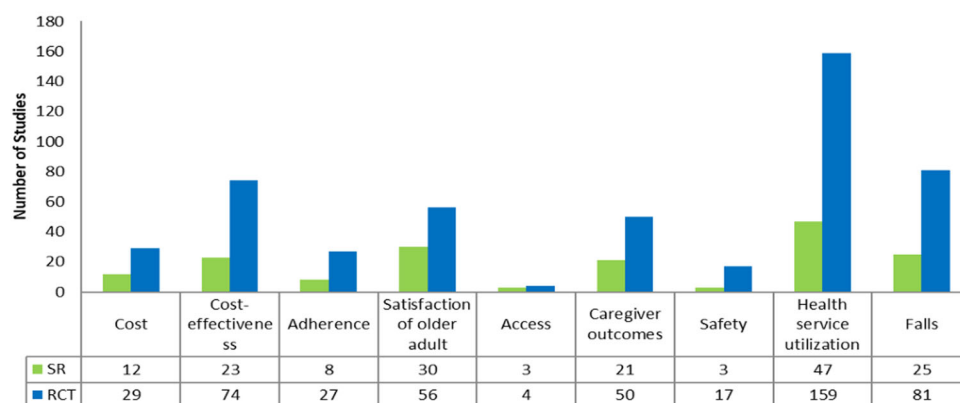


FIGURE 6 Process and other outcomes

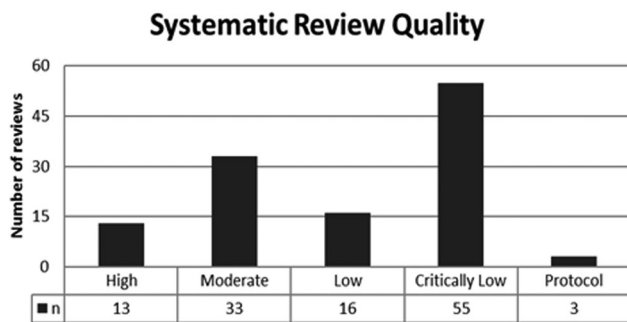


FIGURE 7 Methodological quality of systematic reviews

characteristic: race/ethnicity, culture, language ($n = 3$ RCTs), socioeconomic status ($n = 4$, 3 RCTs and 1 SR), and social capital ($n = 4$, 2 RCTs and 2 SRs).

Only one out of 548 included studies assessed effects of interventions across sex/gender and four studies assessed effects across another PROGRESS factor.

Region

Across WHO regions, most of the studies evaluated describe and assess interventions in Europe ($n = 272$ (192 RCTs and 80 SRs); 49%), followed by the Americas ($n = 158$ (137 RCTs and 21 SRs); 29%) and Western Pacific ($n = 112$ (3 RCTs and 19 SRs); 20%) and with 5 or less studies in South-East Asia, Africa and Eastern Mediterranean (see Figure 9). We also coded studies following the World Bank Classifications by economies. The majority of studies were from high-income economies ($n = 532$, 415 RCTs and 117 SRs), with no studies from low-income economies (see Figure 10). As stated earlier, please note that some studies were coded under more than one category. For example, a single study might have covered Europe and the Americas and will have been counted in both categories.

Setting

The majority of studies ($n = 475$, 370 RCTs and 105 SRs) took place in a housing unit (house or apartment) (see Figure 11). A single study may be coded in more than one setting.

Health condition/status

We coded studies by health conditions of populations. The majority of studies included people with noncommunicable diseases ($n = 248$, 189 RCTs and 59 SRs). Very few studies ($n = 7$, 3 RCTs and 4 SRs) assessed loneliness and social isolation in older adults. We used the author's description of the population to identify studies in this domain. Most studies included populations that were coded under multiple categories (see Figure 12).

6 | DISCUSSION

6.1 | Summary of main results

The distribution of evidence in this EGM of health, social care and technological interventions to improve functional ability of older adults living at home or in other places of residence is not uniform. Home-based health care has received more attention than social care or mobility support. Furthermore, the most common ICF outcome domains assessed were basic needs, quality of life and mobility, with relatively few studies reporting outcomes on societal contribution, learning, relationships, financial security. There were very few studies in LMICs (only 3%).

6.2 | Areas of evidence clusters

The main cluster of evidence in this EGM is where interventions involve visiting healthcare professionals ($n = 474$); this is compared to a paucity of evidence exploring interventions provided by visiting lay service providers ($n = 11$). This may be because most studies took place in high-income countries where there is greater use of home visits by healthcare professionals. However, many LMICs do not have access to home visiting healthcare professionals (Bashour et al., 2008; Ndiok & Ncama, 2019).

The evidence for rehabilitation services is clustered around neuromusculoskeletal function ($n = 134$) and mental health function ($n = 131$) outcomes. This may be explained in that over 20% of adults aged 60 and over suffer from a mental or neurological disorder (excluding headache

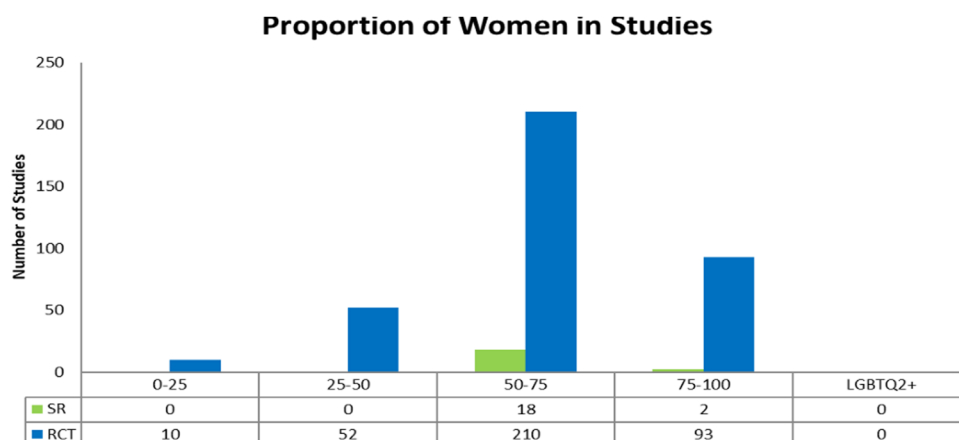


FIGURE 8 Proportion of women in studies

WHO Regions

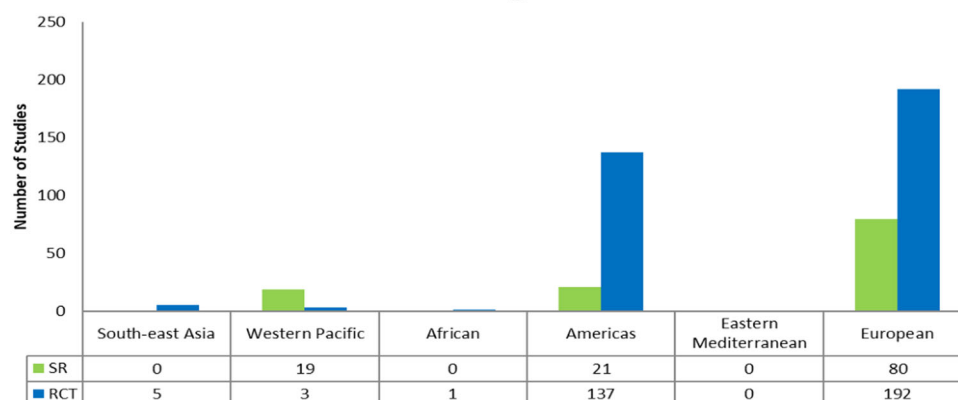


FIGURE 9 WHO regions

World Bank Classifications

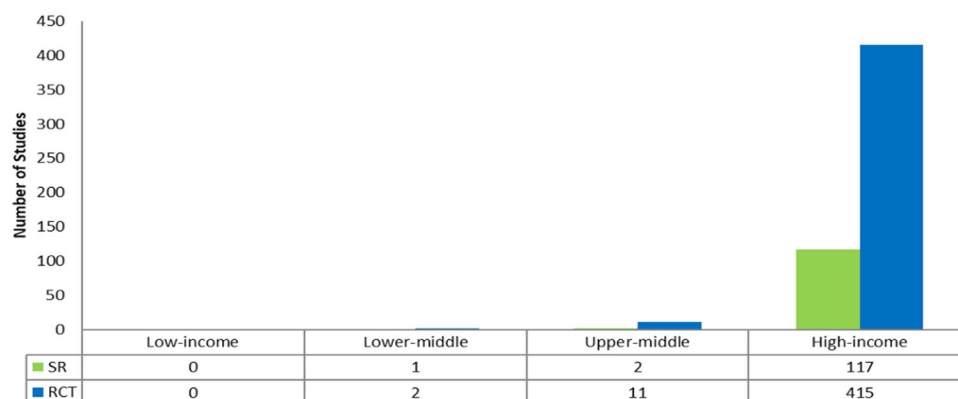


FIGURE 10 World Bank classifications

Setting

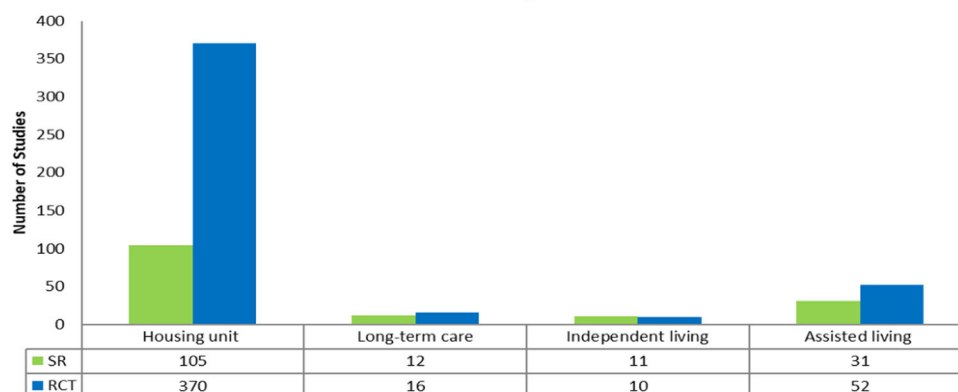


FIGURE 11 Setting

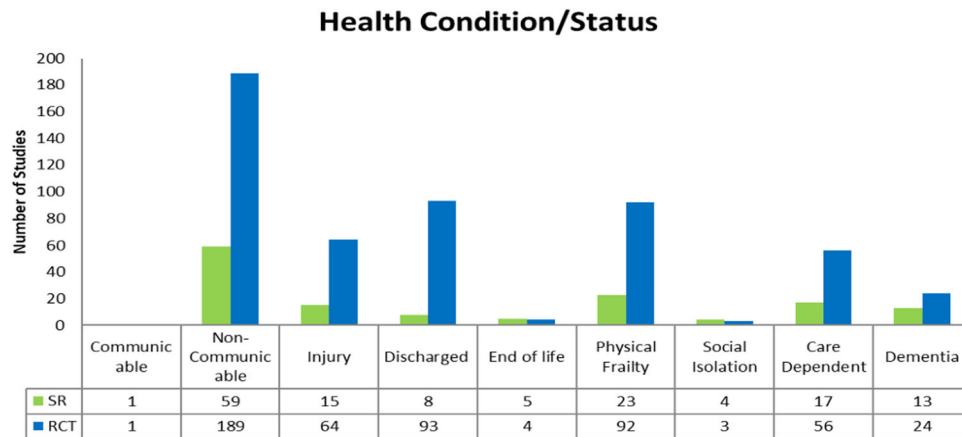


FIGURE 12 Health condition/status

disorders) and 6.6% of all disability adjusted life years (DALYs) among people over 60 years is attributed to mental and neurological disorders (WHO, 2017). Analysis of data from a WHO Study on global AGEing and adult health (SAGE) also points to the high prevalence of arthritis in low- and middle-income settings, particularly among those in a lower socio-economic position (WHO, 2001).

6.3 | Areas of major gaps in the evidence

Our study reveals that systematic review evidence on the effects of home-based health and social care and mobility support interventions is of limited methodological quality, with only 13 out of 120 reviews (11%) being rated as high methodological quality. Quality of systematic reviews in this area needs to be improved by adhering to methodological standards such as the Cochrane Handbook methods (Higgins et al., 2019) which include describing a clearly formulated question, describing eligibility criteria, search strategies, reasons for exclusion, publishing an a priori protocol and transparent reporting of methods (e.g., using the Preferred Reporting Items for Systematic Reviews and Meta-analyses (Moher et al., 2015)). Importantly, quality is based on the methods of the review, not on the strength or quality of evidence within the review.

Furthermore, our EGM illustrates that studies are unevenly distributed across our full intervention-outcome framework. Clusters emerge for some intervention–outcome combinations, in contrast with some noticeable evidence gaps. There is significant evidence (both randomized trials and systematic reviews) on health services, systems and policies ($n = 525$). Studies focusing on home-based rehabilitation ($n = 276$) and general health services ($n = 233$) make up the largest proportion of studies in this map. There is a lack of data available on general social support services and policies ($n = 41$), personal indoor and outdoor mobility and transportation ($n = 12$), and design, construction and building products and technology ($n = 21$).

It is known that caregiver burden is a significant risk factor for depressive symptoms in carers of older people and may precipitate clinical depression (del-Pino-Casado et al., 2019) however, only 71 studies in the EGM explored caregiver outcomes. There were very

few studies focused on loneliness and social isolation which is an important dimension for older adults ($n = 7$). Mobility limitations can contribute to social isolation and loneliness that may affect the mental and physical health of older adults (WHO, 2015).

Included studies mostly covered three WHO regions; Western Pacific, the Americas, and Europe. There were a small number of studies that covered South-East Asia ($n = 5$) and Africa ($n = 1$). No studies covered the Eastern Mediterranean region. A significant proportion of studies are from high-income economies (97%). The lack of evidence from low- and lower-middle income countries points to the need for more high-quality reviews and trials in these settings. This is particularly important since these regions, as previously mentioned, are experiencing a quicker growth in population ageing when compared to high-income countries (UNDESA, 2017).

Diversity of characteristics and settings of older adults across age, sex/gender, ethnicity, medical conditions, settings, environments and culture may influence the impact of interventions. Over 90% of studies did not assess possible differences in effects across PROGRESS characteristics. The lack of health equity considerations within studies raise the need for future studies to consider health inequities, particularly since home-based health, social and technology supports may not be accessible to all or require out of pocket costs, acceptability may differ across culture, country contexts and sex/gender, and programs may thus worsen or exacerbate existing health inequities.

6.4 | Potential biases in the mapping process

We followed a systematic process with the help of an information scientist to develop our search strategy. As health and social care interventions and outcomes have different names in different contexts and languages, it is possible that we missed studies with our search strategy, even though the terms we used were developed in consultation with a search specialist and our advisory team, which included several experts in this field. In addition, we may have missed studies that were not indexed as home-based. To mitigate this risk, we also reviewed the lists of included studies in eligible systematic reviews.

6.5 | Limitations of the EGM

We focused on randomized trials for reasons of feasibility, thus our EGM may over-represent interventions that lend themselves better to randomization. We mitigated the risk of over-representing “randomizable” interventions by including systematic reviews of non-randomized studies of interventions. However, users need to keep in mind that this EGM represents mostly randomized study evidence.

As with other EGMs, trials in our map may also be included in systematic reviews in this map and studies with multiple interventions or multiple outcomes will appear in multiple quadrants of the map. This is important to consider when interpreting the map.

Systematic reviews were assessed for eligibility and coded on the basis of their PICO question. That could mean that reviews with a broad focus could be excluded if home setting was not part of the PICO.

7 | AUTHORS' CONCLUSIONS

This EGM is a starting point for identifying priority areas for systematic reviews and primary studies of home-based health and social care and technological supports to support older adults at home.

7.1 | Implications for research, practice and/or policy

There is a need for rigorous evaluation studies of home-based social care and mobility support to promote functional ability for older adults. Despite substantial evidence on home-based health services interventions, only 10% of included systematic reviews were high quality, thus limiting their usefulness for decision-making.

There is a need to consider assessing outcomes of importance to older adults such as financial security, societal contribution and participation, stigma, loneliness and social isolation, caregiver outcomes, cost, and safety which were assessed in <20% of included evidence sources.

There is a need to consider analyses to assess effects of interventions across equity factors. Without evaluation of gender and health inequities, we risk promoting interventions that could exacerbate or worsen existing gender and health inequities.

At the time of publication of this map, there is a huge need to understand how to best promote functional capacity of older adults who are unable to leave their homes due to social distancing restrictions levied in the interests of slowing the spread of SARS-Cov-2 in the population. This map provides an initial resource to identify relevant home-based services which may be of interest to policy-makers and healthcare professionals such as home-based rehabilitation and social support. Some interventions may require further adaptation for online delivery during the COVID-19 pandemic.

ACKNOWLEDGEMENTS

We would like to acknowledge Fariha Alam, Hovhannes Gasparyan, William McLeod, Khalid Miganeh, Jennifer Ogborogu, Agatha Park, Sabrina Price, Astha Saxena, Jashanpreet Sidhu and Ziyue Wang for their time

in screening and selecting articles and retrieving full texts; and Victoria Barbeau for helping with the figures and supplementary material. We also acknowledge Jeff Brunton, Zak Ghouze and Sergio Graziosi for their technical support with EPPI-Reviewer/EPPI-Mapper.

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- Content: Tracey E. Howe, Vivian Welch, Heidi Sveistrup, Sue Marcus, provide content expertise in rehabilitation, assistive devices and memory and cognitive impairment. Christine M. Mathew, Lisa Sheehy, and MC also have expertise in ageing and rehabilitation. Elizabeth Kristjansson has expertise in built environments and in healthy aging. Lisa Sheehy, Johan Borg, Wei Zhang, Joanna Thompson-Coon, Anne Lyddiatt, Jason W. Nickerson, Peter Tanuseputro, Peter Walker, and Beverly Shea provided content expertise on classifying outcomes and interventions, and will provide critical comments on final manuscript.
- EGM methods: Vivian Welch, Ashrita Saran, Sue Marcus, Tracey E. Howe, Kevin Pottie, Elizabeth T. Ghogomu and Elizabeth Kristjansson are experts in systematic review methods.
- Information retrieval: Morwenna Rogers is an information specialist with experience in designing searches for systematic reviews.

DECLARATIONS OF INTEREST

VW is Editor in Chief of the Campbell Collaboration.

Johan Borg is employed as research manager at a commercial assistive technology company that may have an interest in the results or conclusions of this review.

JTC and MR were supported by the National Institute for Health Research Applied Research Collaboration South West Peninsula (PenARC) and this article therefore presents independent research supported by the National Institute for Health Research Applied Research Collaboration South West Peninsula (PenARC). The views expressed in this publication are those of the author(s) and not necessarily those of the National Health Service, the NIHR or the Department of Health and Social Care. The funders had no role in study design, data collection and analysis, decision to publish, or preparation of the manuscript.

The rest of the authors have no conflicts of interest with respect to the content of the EGM.

PRELIMINARY TIMEFRAME

Approximate date for submission of the EGM: October 2019.

Please note this should be no longer than 1 year after protocol approval.

PLANS FOR UPDATING THE EGM

Vivian Welch, Tracey Howe and Sue Marcus, as directors of Cochrane Global Ageing, have an interest in continuing to update this EGM. Frequency of updating will depend on availability of resources to do so.

REFERENCES TO STUDIES INCLUDED STUDIES

Study	Publication status	Study design	Population-age group	Population-sex/gender	Health status/condition	WHO region	World Bank classification by income	Intervention: general social support services, systems and policies	Intervention: for personal indoor and outdoor mobility and transportation	Intervention: health services, systems and policies
Acton (2016)	Complete	RCT	Includes <65	50%-75% female included	Noncommunicable disease	European	High-income economies	Personal care		General health services for disease prevention Rehabilitation services Visiting health professionals
			Includes 65+							
Aimonino (2008)	Complete	RCT	Includes 75+	25%-50% female included	Noncommunicable disease	European	High-income economies			General health services for disease prevention Visiting health professionals
Alexander (2001)	Complete	RCT	Includes 65+	75%-100% female included	Care dependent	The Americas	High-income economies			Rehabilitation services Visiting lay service providers
Alexopoulos (2016)	Complete	RCT	Includes <65		Noncommunicable disease	The Americas	High-income economies			General health services for disease prevention Visiting health professionals
			Includes 65+		Physical frailty					
Amjad (2018)	Complete	RCT	Includes 65+	50%-75% female included	Dementia	The Americas	High-income economies			General health services for disease prevention Visiting health professionals
					Noncommunicable disease					
Andersen (2000)	Complete	RCT	Includes <65	50%-75% female included	Noncommunicable disease	European	High-income economies			Visiting health professionals
			Includes 65+							
Anonymous (2004)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies			General health services for disease prevention Visiting health professionals
Araujo (2015)	On-going	RCT	Includes 65+		Care dependent	European	High-income economies	Transportation		
					Discharged from hospital			Personal care		Family and caregiver support

Arean (2015)	Complete	RCT	Includes 65+	Care dependent Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Arrieta (2018)	On-going	RCT	Includes 65+	50%-75% female included Care dependent Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Ashburn (2007)	Complete	RCT	Includes 65+	25%-50% female included Injury Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Avlund (2002)	Complete	RCT	Includes <65 Includes 65+	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Baker (2007)	Complete	RCT	Includes 65+	Physical frailty	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Banerjee (1996)	Complete	RCT	Includes 65+	25%-50% female included Noncommunicable disease Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Barnes (2017)	On-going	RCT	Includes <65 Includes 65+	75%-100% female included Dementia Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Barreto (2018)	Complete	RCT	Includes 65+	50%-75% female included Noncommunicable disease	European	High-income economies	Health promotion services Rehabilitation services Visiting health professionals
Batchelor-Murphy (2017)	Complete	RCT	Includes 65+	75%-100% female included Care dependent Dementia Noncommunicable disease	The Americas	High-income economies	Visiting health professionals
					Personal care		

Beck (2013)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital	European	High-income economies	Family and caregiver support	General health services for disease prevention Visiting health professionals
Beck (2016)	Complete	RCT	Includes 75+	50%-75% female included	Care dependent Noncommunicable disease	European	High-income economies		General health services for disease prevention Rehabilitation services Visiting health professionals
Behm (2014)	Complete	RCT	Includes 75+	50%-75% female included		European	High-income economies		General health services for disease prevention Health promotion services Visiting health professionals
Behm (2016)	Complete	RCT	Includes 75+	50%-75% female included	Physical frailty	European	High-income economies		General health services for disease prevention Health promotion services Visiting health professionals
Beland (2006)	Complete	RCT	Includes 65+	50%-75% female included	Care dependent Noncommunicable disease	The Americas	High-income economies	Homemaking Personal care	General health services for disease prevention Visiting health professionals
Bennell (2018)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Injury	Western Pacific	High-income economies		Rehabilitation services Visiting health professionals
Bernabei (1998)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease Physical frailty	European	High-income economies	Personal care	General health services for disease prevention Visiting health professionals
Bjerk (2017)	On-going	RCT	Includes 65+		Care dependent Injury	European	High-income economies		Rehabilitation services Visiting health professionals
Blanchard (1999)	Complete	RCT	Includes 75+	75%-100% female included	Noncommunicable disease	European	High-income economies		General health services for disease prevention Visiting health professionals

Bleijenberg (2016)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Bonnefoy (2012)	Complete	RCT	Includes 75+	75%-100% female included	Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Boongird (2017)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease	South-East Asia	Upper-middle-income economies	Rehabilitation services Visiting health professionals
Bouman (2008)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Boxall (2005)	Complete	RCT	Includes 65+	25%-50% female included	Noncommunicable disease	Western Pacific	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Brannstrom (2014)	Complete	RCT	Includes 65+	25%-50% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Long term care services Visiting health professionals
Brettschneider (2014)	Complete	RCT	Includes 75+	50%-75% female included	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Brovold (2012)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital	European	High-income economies	Rehabilitation services Visiting health professionals
Bruce (2015)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Bruce (2016)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals

Brumley (2007)	Complete	RCT	Includes 65+	25%-50% female included	End-of-life	The Americas	High-income economies	Long term care services Visiting health professionals
Burton (2013)	Complete	RCT	Includes 65+	75%-100% female included	Physical frailty	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Buurman (2016)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Buys (2017) Complete	RCT	Includes 65+	75%-100% female included	Discharged from hospital	The Americas	High-income economies	Homemaking	
Byles (2004)	Complete	RCT	Includes 75+	50%-75% female included		Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Byrnes (2015)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included	Discharged from hospital Noncommunicable disease	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Callahan (2012)	On-going	RCT	Includes <65 Includes 65+		Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Campbell (1997)	Complete	RCT	Includes 75+	75%-100% female included	Injury Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Campbell (2005)	Complete	RCT	Includes 75+		Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals

Canning (2015)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Caplan (1999)	Complete	RCT	Includes 65+	75%-100% female included	Communicable disease Noncommunicable disease	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Caplan (2004)	Complete	RCT	Includes 75+	50%-75% female included	Discharged from hospital	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Caplan (2006)	Complete	RCT	Includes 75+	50%-75% female included	Discharged from hospital Noncommunicable disease Physical frailty	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Carroll (2007)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Chaiyawat (2012)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Noncommunicable disease	South-East Asia	Upper-middle- income economies	Rehabilitation services Visiting health professionals
Chan et al. (2016)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Discharged from hospital	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Chandler (1998)	Complete	RCT	Includes 65+	25%-50% female included	Physical frailty	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Chang (2015)	Complete	RCT	Includes 65+	50%-75% female included	Injury	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Chee (2013)	Complete	RCT	Includes 75+	75%-100% female included	Physical frailty	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals

Chen (2015)	Complete	RCT	Includes 65+	25%-50% female included	Care dependent	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Chen (2015)	Complete	RCT	Includes 65+	25%-50% female included	Physical frailty	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Chen (2016)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Cho (1998)	Complete	RCT	Includes 75+	50%-75% female included	Injury Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Chow (2014)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital Noncommunicable disease	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Chu (2017)	Complete	RCT	Includes 65+	50%-75% female included	Injury	Western Pacific	High-income economies	Personal mobility and transportation devices General health services for disease prevention Visiting health professionals
Cichocki (2015)	Complete	RCT	Includes 75+	75%-100% female included	Care dependent	European	High-income economies	Rehabilitation services Visiting health professionals
Ciechanowski (2004)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Claffey (1976)	Complete	RCT	Includes <65 Includes 65+		Care dependent	The Americas	High-income economies	General health services for disease prevention Visiting health professionals

Clegg (2014)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Clemson (2016)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital	European	High-income economies	Rehabilitation services Visiting health professionals
Comans (2010)	Complete	RCT	Includes 65+	50%-75% female included	Injury Physical frailty	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Conradsson (2010)	Complete	RCT	Includes 65+	50%-75% female included	Care dependent	European	High-income economies	Rehabilitation services Visiting health professionals
Cornu (2003)	On-going	RCT	Includes 75+		Care dependent	European	High-income economies	Rehabilitation services
Corr (1995)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Discharged from hospital	European	High-income economies	Rehabilitation services Visiting health professionals
Counsell (2007)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Courtney (2009)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital	Western Pacific	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Courtney (2011)	On-going	RCT	Includes 65+		Discharged from hospital Physical frailty	South-East Asia	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Courtney (2012)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital	The Americas	High-income economies	Rehabilitation services Visiting health professionals

Crotty (2002)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital Physical frailty	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Crotty (2003)	Complete	RCT	Includes 65+	50%-75% female included	Injury	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Crotty (2008)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Cumming (2000)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital Physical frailty	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Cummings (1990)	Complete	RCT	Includes 65+		End-of-life Physical frailty	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Cunliffe (2004)	Complete	RCT	Includes 75+	50%-75% female included	Discharged from hospital	European	High-income economies	Rehabilitation services Visiting health professionals
Cutchin (2009)	On-going	RCT	Includes 75+	50%-75% female included	Physical frailty	The Americas	High-income economies	Health promotion services Visiting health professionals
Dalby (2000)	Complete	RCT	Includes 65+	50%-75% female included Physical frailty	Discharged from hospital Injury	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Daly (2015)	On-going	RCT	Includes 65+		Injury	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Danilovich et al. (2017)	On-going	RCT	Includes <65 Includes 65+		Noncommunicable disease Physical frailty	The Americas	High-income economies	Rehabilitation services Visiting health professionals

Dano (2016)	Complete	RCT	Includes <65 Includes 65+	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Dechamps (2010)	Complete	RCT	Includes 65+	75%-100% female included Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
DI Monaco (2008)	Complete	RCT	Includes 65+	75%-100% female included Injury	European	High-income economies	Rehabilitation services Visiting health professionals
DI Pollina (2017)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Dias (2008)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included Dementia Noncommunicable disease	South-East Asia	Lower-middle-income economies	General health services for disease prevention Visiting health professionals
Donald (1995)	Complete	RCT	Includes 65+	50%-75% female included Discharged from hospital	European	High-income economies	Rehabilitation services Visiting health professionals
Donat (2007)	Complete	RCT	Includes 65+	50%-75% female included Injury	European	High-income economies	Rehabilitation services Visiting health professionals
Dorner (2013)	On-going	RCT	Includes 65+	Physical frailty	European	High-income economies	Health promotion services Rehabilitation services Visiting lay service providers
Dorresteijn (2016)	Complete	RCT	Includes 65+	50%-75% female included Injury Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Dow (2013)	On-going	RCT	Includes <65 Includes 65+	Physical frailty	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
						Family and caregiver support	

Draper (2008)	Complete	RCT	Includes 65+	50%-75% female included	Dementia Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Draper (2016)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Duffy (2010)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Edgren (2015)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Injury	European	High-income economies	Rehabilitation services Visiting health professionals
Eloniemi-Sulkava (2001)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	European	High-income economies Family and caregiver support	General health services for disease prevention Visiting health professionals
Eloniemi-Sulkava (2009)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included	Dementia Noncommunicable disease	European	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Engberg (2016)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Enguidanos (2012)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Discharged from hospital	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Eriksen (2016)	On-going	RCT	Includes <65 Includes 65+	50%-75% female included		European	High-income economies	Rehabilitation services Visiting health professionals

Fabacher (1994)	Complete	RCT	Includes 65+	0%-25% female included	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals Visiting lay service providers
Faber (2006)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included	Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Fahlström (2018)	Complete	RCT	Includes 65+	50%-75% female included	Injury	European	High-income economies	Rehabilitation services Visiting health professionals
Fairhall (2012)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Fairhall (2014)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	Western Pacific	High-income economies	Personal mobility and transportation devices General health services for disease prevention Rehabilitation services Visiting health professionals
Fairhall et al. (2015)	On-going	RCT	Includes 65+	50%-75% female included	Physical frailty	Western Pacific	High-income economies	Personal mobility and transportation devices General health services for disease prevention Rehabilitation services Visiting health professionals
Fairhall (2017)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	Western Pacific	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Farag (2015)	Complete	RCT	Includes 75+	50%-75% female included	Discharged from hospital	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Farag (2016)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included	Discharged from hospital	Western Pacific	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals

Fasce (2018)	On-going	RCT	Includes <65 Includes 65+	Discharged from hospital Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Favela (2013)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included Physical frailty	The Americas	Upper-middle-income economies	General health services for disease prevention Visiting health professionals
Feldman (2004)	Complete	RCT	Includes 65+	50%-75% female included Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Ferrer (2014)	Complete	RCT	Includes 85+	50%-75% female included Injury Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Ferrer-García (2011)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Fiatarone (1994)	Complete	RCT	Includes 65+	50%-75% female included Physical frailty	The Americas	High-income economies	Rehabilitation services
Finnema (2005)	Complete	RCT	Includes 65+	75%-100% female included Dementia Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Fleming (2004)	Complete	RCT	Includes 75+	50%-75% female included Discharged from hospital	European	High-income economies	Rehabilitation services Visiting health professionals
Flood (2005)	Complete	RCT		Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals

Fontan (2010)	Complete	RCT	Includes 65+	European	High-income economies	General health services for disease prevention Visiting health professionals
Forsberg (2011)	Complete	RCT	Includes 65+	European	High-income economies	Rehabilitation services
Forster (1996)	Complete	RCT	Includes <65 Includes 65+	Noncommunicable disease	High-income economies	Visiting health professionals
Frese (2012)	Complete	RCT	Includes 65+	Noncommunicable disease	High-income economies	General health services for disease prevention Visiting health professionals
Friedman (2014)	Complete	RCT	Includes 65+	Noncommunicable disease Physical frailty	High-income economies	General health services for disease prevention Visiting health professionals
Gagnon (1999)	Complete	RCT	Includes 65+	Physical frailty	High-income economies	General health services for disease prevention Visiting health professionals
García-Pena (2001)	Complete	RCT	Includes <65 Includes 65+	Noncommunicable disease	Upper-middle-income economies	General health services for disease prevention Visiting health professionals
García-Pena (2002)	Complete	RCT	Includes <65 Includes 65+	Noncommunicable disease	Upper-middle-income economies	General health services for disease prevention Visiting health professionals
Gawler (2016)	Complete	RCT	Includes 65+	Injury	High-income economies	Rehabilitation services Visiting health professionals
Giangregorio (2018)	Complete	RCT	Includes 65+	Injury	High-income economies	Rehabilitation services Visiting health professionals

Gill (2002)	Complete	RCT	Includes 75+	75%-100% female included	Physical frailty	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Gill (2004)	Complete	RCT	Includes 75+	75%-100% female included	Physical frailty	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Gitlin (2001)	Complete	RCT	Includes 75+	50%-75% female included	Dementia Noncommunicable disease	The Americas	High-income economies	Visiting health professionals
Gitlin (2006)	Complete	RCT	Includes 65+	75%-100% female included	Physical frailty	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Gitlin (2008)	Complete	RCT	Includes 75+	25%-50% female included	Dementia Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Gitlin (2009)	Complete	RCT	Includes 75+	75%-100% female included	Physical frailty	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Gitlin (2010)	Complete	RCT	Includes <65 Includes 65+		Dementia Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Gitlin (2014)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Gitlin (2018)	Complete	RCT	Includes 65+	0%-25% female included Physical frailty	Dementia Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals

Gladman (1993)	Complete	RCT	Includes 65+	25%-50% female included	Noncommunicable disease	High-income economies	Rehabilitation services Visiting health professionals
Godwin (2016)	Complete	RCT	Includes 75+	50%-75% female included	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Gozalo (2014)	Complete	RCT	Includes 75+	75%-100% female included	The Americas Dementia Noncommunicable disease	High-income economies Personal care	
Graff (2008)	Complete	RCT	Includes 65+	50%-75% female included	European Noncommunicable disease	High-income economies	Rehabilitation services Visiting health professionals
Granbom (2017)	Complete	RCT	Includes 65+	50%-75% female included	European	High-income economies	General health services for disease prevention Visiting health professionals
Graves (2009)	Complete	RCT	Includes 75+	50%-75% female included	Western Pacific Discharged from hospital	High-income economies	General health services for disease prevention Visiting health professionals
Grimmer (2013)	On-going	RCT	Includes 65+		Discharged from hospital	High-income economies	Health promotion services Visiting health professionals
Gronstedt (2013)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	European	High-income economies	Rehabilitation services Visiting health professionals
Gustafsson (2012)	Complete	RCT	Includes 75+ Includes 85+	50%-75% female included	European	High-income economies	General health services for disease prevention Visiting health professionals
Haastregt (2000)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	European Injury	High-income economies	Visiting health professionals

Haider (2017)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	75%-100% female included	Physical frailty	European	High-income economies	Rehabilitation services Visiting lay service providers
Haider (2017)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	75%-100% female included	Physical frailty	European	High-income economies	Rehabilitation services Visiting lay service providers
Hall (1992)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	75%-100% female included	Physical frailty	The Americas	High-income economies	Health promotion services Visiting health professionals
Hammar (2009)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Hansen (1992)	Complete	RCT	Includes 75+	25%-50% female included	Discharged from hospital	European	High-income economies	Health promotion services Visiting health professionals
Hansen (1995)	Complete	RCT	Includes <65 Includes 65+ Includes 75+ Includes 85+	50%-75% female included	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Harris (2005)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included	Discharged from hospital	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Harvey (2014)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	50%-75% female included	Discharged from hospital	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Hauer (2017)	Complete	RCT	Includes 65+	75%-100% female included	Discharged from hospital	European	High-income economies	Rehabilitation services Visiting health professionals

Helbostad (2004)	Complete	RCT	Includes 75+	75%-100% female included	Injury	European	High-income economies	
					Noncommunicable disease			
Hendriks (2008)	Complete	RCT	Includes 65+	50%-75% female included	Injury	European	High-income economies	General health services for disease prevention Visiting health professionals
Herford (2014)	Complete	RCT	Includes 75+ Includes 85+	50%-75% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Hewitt (2018)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	50%-75% female included	Care dependent	Western Pacific	High-income economies	Rehabilitation services
Hinrichs (2015)	Complete	RCT	Includes 75+ Includes 85+	50%-75% female included	Noncommunicable disease	European	High-income economies	Rehabilitation services
Hinrichs (2016)	Complete	RCT	Includes 65+	50%-75% female included	Care dependent	European	High-income economies	General health services for disease prevention Rehabilitation services
					Noncommunicable disease			Visiting health professionals
Hoenig (2015)	Complete	RCT	Includes 65+ Includes 75+	0%-25% female included		The Americas	High-income economies	Personal mobility and transportation devices
Holland (2005)	Complete	RCT	Includes 85+		Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Holland (2017)	Complete	RCT	Includes 65+ Includes 75+	25%-50% female included	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services

Houles (2010)	Complete	RCT	Includes 75+ Includes 85+	50%-75% female included	Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Hsu (2016)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Hsu (2016)	Complete	RCT	Includes 65+	50%-75% female included	Care dependent	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Huang (1998)	Complete	RCT	Includes 65+ Includes 75+	25%-50% female included		Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Huang (2013)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	50%-75% female included	Dementia Noncommunicable disease	Western Pacific	High-income economies	General health services for disease prevention
Hughes (1992)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included	Physical frailty	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Hughes (2000)	Complete	RCT	Includes <65 Includes 65+	0%-25% female included	Discharged from hospital Noncommunicable disease Physical frailty	The Americas	High-income economies	Health promotion services Visiting health professionals
Hunger (2015)	Complete	RCT	Includes 65+	25%-50% female included	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Wang et al. (2016)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included	Injury	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals

Iliffe (2014)	Complete	RCT	Includes 65+	50%-75% female included	Injury	European	High-income economies	Rehabilitation services Visiting health professionals
Imhof (2012)	Complete	RCT	Includes 75+	50%-75% female included	Care dependent Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Inglis (2006)	Complete	RCT	Includes 65+ Includes 75+	0%-25% female included	Noncommunicable disease	Western Pacific	High-income economies	Visiting health professionals
Isrctn (2018)	On-going	RCT	Includes <65 Includes 65+		Dementia Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Jakobsen (2007) Complete	RCT	Includes 75+	50%-75% female included	Discharged from hospital	European	High-income economies	Visiting health professionals	
Jensen (2002)	Complete	RCT	Includes 75+	50%-75% female included	Injury	European	High-income economies	Personal mobility and transportation devices Rehabilitation services
Jingna (2012)	Complete	RCT	Includes 75+	75%-100% female included	Physical frailty	Western Pacific	Upper-middle-income economies	General health services for disease prevention Visiting health professionals
Joaquim (2017)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	Upper-middle-income economies	General health services for disease prevention Visiting health professionals
Johansson (2001)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Johansson (2003)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals

Jolly (2009)	Complete	RCT	Includes <65 Includes 65+	0%-25% female included	Discharged from hospital Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Kalra (2000)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Kane (1984) Complete	RCT	Includes <65	0%-25% female included	End-of-life	The Americas	High-income economies	Long term care services	
Kanemaru (2010)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Kapan (2017)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	25%-50% female included	Physical frailty	European	High-income economies	Rehabilitation services Visiting lay service providers
Kapan (2017)	Complete	RCT	Includes 65+	75%-100% female included	Physical frailty	European	High-income economies	General health services for disease prevention Rehabilitation services Visiting lay service providers
Karinkanta (2007)	Complete	RCT	Includes 65+ Includes 75+	75%-100% female included		European	High-income economies	Rehabilitation services
Karlsson (2016)	Complete	RCT	Includes 65+	50%-75% female included	Injury	European	High-income economies	Rehabilitation services Visiting health professionals
Kerr (2018)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	50%-75% female included		The Americas	High-income economies	Rehabilitation services
Kerse (2010)	Complete	RCT	Includes 75+	50%-75% female included	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals

Kim (2011)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	South-East Asia	High-income economies	Rehabilitation services Visiting health professionals
King et al. (2012)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
King et al. (2012)	Complete	RCT	Includes 75+	50%-75% female included	Care dependent	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Kjerstad (2016)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Klug (2011)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Kocic (2018)	Complete	RCT	Includes 65+	50%-75% female included		European	Upper-middle-income economies	Rehabilitation services Visiting health professionals
Kohei (2016)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Kono (2004)	Complete	RCT	Includes 65+	75%-100% female included	Care dependent	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Kono (2012)	Complete	RCT	Includes 65+	50%-75% female included	Care dependent	Western Pacific	High-income economies	Health promotion services Visiting health professionals
Kono (2013)	Complete	RCT	Includes 75+	50%-75% female included	Care dependent	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals

Kono (2014)	On-going	RCT	Includes 65+	Physical frailty	Western Pacific	High-income economies	Visiting health professionals
Kono (2016)	Complete	RCT	Includes 65+	50%-75% female included	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Kronborg (2006)	Complete	RCT	Includes 75+	50%-75% female included	European	High-income economies	General health services for disease prevention Visiting health professionals
Kukkonen-Harjula (2018)	On-going	RCT	Includes 75+	75%-100% female included	European	High-income economies	Rehabilitation services Visiting health professionals
Kwok (2004)	Complete	RCT	Includes 75+	25%-50% female included	Western Pacific	High-income economies	Visiting health professionals
Kwok (2016)	Complete	RCT	Includes <65 Includes 65+	Discharged from hospital Noncommunicable disease	Western Pacific	High-income economies	Health promotion services
Kyrdalen (2014)	Complete	RCT	Includes 75+	25%-50% female included	European	High-income economies	Rehabilitation services Visiting health professionals
Lam (2018)	Complete	RCT	Includes 75+	50%-75% female included	Western Pacific	High-income economies	Rehabilitation services
Lannin (2007)	Complete	RCT	Includes 65+	75%-100% female included	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Latham (2014)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	The Americas	High-income economies	Rehabilitation services

Latour (2007)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Lattanzio (2001)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Leavitt (2018)	Complete	RCT	Includes 65+	25%-50% female included	Discharged from hospital Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Lee (2006)	Complete	RCT	Includes 65+	25%-50% female included	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Lenaghan (2007)	Complete	RCT	Includes 75+	50%-75% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Levine (2012)	Complete	RCT	Includes 75+	50%-75% female included	Noncommunicable disease Physical frailty	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Lewin (2013) Complete	RCT	Includes 65+ Includes 65+ 50%-75% female included	Includes 65+ Includes 65+ 50%-75% female included	Includes 65+ Includes 65+ 50%-75% female included	Includes 65+ Includes 65+ 50%-75% female included	Includes 65+ Includes 65+ 50%-75% female included	Includes 65+ Includes 65+ 50%-75% female included	Includes 65+ Includes 65+ 50%-75% female included
Lewin (2014)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	Western Pacific	High-income economies	Rehabilitation services
Li (2013)	Complete	RCT	Includes 65+	50%-75% female included	Care dependent	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Li (2015)	Complete	RCT	Includes 75+	0%-25% female included	Discharged from hospital Noncommunicable disease	Western Pacific	Upper-middle- income economies	Rehabilitation services Visiting health professionals

Liang (1984)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Liang (1986)	Complete	RCT	Includes 75+	75%-100% female included	Care dependent	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Liddle (1996)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	50%-75% female included		Western Pacific	High-income economies	Visiting health professionals
Limatta (2017)	Complete	RCT	Includes 75+	50%-75% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Lin (2007)	Complete	RCT	Includes 65+		Injury Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Lin (2010)	Complete	RCT	Includes 75+ Includes 85+	25%-50% female included 50%-75% female included	Dementia Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services
Lindegaard (2017)	Complete	RCT	Includes 75+	75%-100% female included	Care dependent Discharged from hospital Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Lindegaard-Pedersen (2015)	On-going	RCT	Includes 75+		Discharged from hospital Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals

Liu and Lai (2014)	Complete	RCT	Includes 75+	50%-75% female included	Discharged from hospital	Western Pacific	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Dementia Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Visiting health professionals
Locher (2013)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services
	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Lok (2017)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	Noncommunicable disease	European	High-income economies	Rehabilitation services
	Complete	RCT	Includes 65+ Includes 75+	25%-50% female included	Noncommunicable disease	European	Upper-middle-income economies	Rehabilitation services Visiting health professionals
Luck (2013)	Complete	RCT	Includes 85+		Physical frailty	European	High-income economies	Visiting health professionals
	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Lyons (2016)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
	Complete	RCT	Includes 75+	50%-75% female included	Care dependent Social isolation	The Americas	High-income economies	Friendly visits
Machntyre (1999)	Complete	RCT	Includes 75+	50%-75% female included	Care dependent Social isolation	The Americas	High-income economies	Friendly visits
	Complete	RCT	Includes 75+ Includes 85+	75%-100% female included	Injury	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Mahoney (2007)	Complete	RCT	Includes 65+ Includes 75+	25%-50% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services
	Complete	RCT	Includes 65+ Includes 75+	25%-50% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals

Mangione (2005)	Complete	RCT	Includes 65+	75%-100% female included	Discharged from hospital injury	The Americas	High-income economies	Rehabilitation services Visiting health professionals
	Complete	RCT	Includes 75+ Includes 85+	75%-100% female included	Injury	The Americas	High-income economies	Rehabilitation services
Mann (1999)	Complete	RCT	Includes 75+	75%-100% female included	Physical frailty	The Americas	High-income economies	Personal mobility and transportation devices Visiting health professionals
Marek (2014)	Complete	RCT	Includes 75+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	Visiting health professionals
Markle-Reid (2003)	Complete	RCT	Includes 75+	75%-100% female included	Physical frailty	The Americas	High-income economies Visiting health professionals	General health services for disease prevention Health promotion services
Markle-Reid (2006)	Complete	RCT	Includes 75+ Includes 85+	75%-100% female included	Physical frailty	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Markle-Reid (2010)	Complete	RCT	Includes 75+	50%-75% female included	Injury	The Americas	High-income economies	General health services for disease prevention
Markle-Reid et al. (2017)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Health promotion services Visiting health professionals
Martin (1994)	Complete	RCT	Includes 75+	75%-100% female included	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals

Maru (2015)	Complete	RCT	Includes 65+	Discharged from hospital Noncommunicable disease	Western Pacific High-income economies	General health services for disease prevention Visiting health professionals
Matzen (2007)	Complete	RCT	Includes 65+	50%-75% female included Noncommunicable disease	High-income economies	General health services for disease prevention Visiting health professionals
Mayo (2008)	Complete	RCT	Includes 65+	25%-50% female included Noncommunicable disease	The Americas High-income economies	General health services for disease prevention Visiting health professionals
McCorkle (1989)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included Noncommunicable disease	High-income economies	General health services for disease prevention Visiting health professionals
McCorkle (2000)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included Noncommunicable disease	High-income economies	General health services for disease prevention Visiting health professionals
McMurdo (1995)	Complete	RCT	Includes 75+ Includes 85+	75%-100% female included Physical frailty	European High-income economies	Rehabilitation services Visiting health professionals
McWilliam (1999)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included Noncommunicable disease	The Americas High-income economies	Health promotion services Visiting health professionals
McWilliam (1999)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included Noncommunicable disease	The Americas High-income economies	Health promotion services Visiting health professionals
Meisinger (2013)	Complete	RCT	Includes 65+ Includes 75+	25%-50% female included Noncommunicable disease	High-income economies	General health services for disease prevention Visiting health professionals

Melin (1992)	Complete	RCT	Includes <65 Includes 65+ Includes 75+ Includes 85+	50%-75% female included	Discharged from hospital	European	High-income economies	Rehabilitation services Visiting health professionals
Melin (1993)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Melin (1993)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	50%-75% female included	Discharged from hospital	European	High-income economies	Rehabilitation services Visiting health professionals
Melin (1995)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	Discharged from hospital	European	High-income economies	Visiting health professionals
Melis (2008)	Complete	RCT	Includes 65+		Care dependent	European	High-income economies	General health services for disease prevention Visiting health professionals
Melis (2008)	Complete	RCT	Includes 75+	75%-100% female included	Care dependent Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Mihalko (1996)	Complete	RCT	Includes 65+	75%-100% female included	Physical frailty	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Miller (2005)	Complete	RCT	Includes 75+	50%-75% female included	Discharged from hospital Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Milte (2016)	Complete	RCT	Includes 75+ Includes 85+	50%-75% female included 75%-100% female included	Injury	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals

Mitchell (2005)	Complete	RCT	Includes 65+	50%-75% female included	Injury	Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Mohide (1990)	Complete	RCT	Includes 75+	25%-50% female included	Dementia	Noncommunicable disease	The Americas	High-income economies	Visiting health professionals
Molassiotis (2009)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Noncommunicable disease		European	High-income economies	General health services for disease prevention Visiting health professionals
Moller (2014)	Complete	RCT	Includes 65+	50%-75% female included	Injury	Physical frailty	European	High-income economies	Health promotion services Visiting health professionals
Montgomery (2003)	Complete	RCT	Includes 75+ Includes 85+	50%-75% female included	Physical frailty		The Americas	High-income economies	General health services for disease prevention
Morris (2017)	Complete	RCT	Includes <65 Includes 65+ Includes 75+	25%-50% female included	Noncommunicable disease		Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Mortensen (2016)	Complete	RCT	Includes <65 Includes 65+		Noncommunicable disease		European	High-income economies	Rehabilitation services Visiting health professionals
Mulrow (1994)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty		The Americas	High-income economies	Rehabilitation services Visiting health professionals
Murphy (2005)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included	Discharged from hospital		European	High-income economies	Rehabilitation services Visiting health professionals
Naunton (2003)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital		Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals

Naylor (1999)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	Discharged from hospital	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Naylor (2004)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	Visiting health professionals
Naylor (2004)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Nazareth (2001)	Complete	RCT	Includes 75+		Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Nct (2005)	Complete	RCT	Includes 75+	50%-75% female included		European	High-income economies	General health services for disease prevention Visiting health professionals
Nct (2006)	Complete	RCT	Includes 85+	50%-75% female included		European	High-income economies	Rehabilitation services Visiting health professionals
Nct (2011)	On-going	RCT	Includes <65 Includes 65+		Discharged from hospital Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Nct (2011)	On-going	RCT	Includes 65+ Includes 75+		Noncommunicable disease	The Americas	High-income economies	Rehabilitation services
Nct (2012)	On-going	RCT	Includes 65+		Injury Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals

Nct (2013)	Complete	RCT	Includes 65+	Social isolation	European	High-income economies	Homemaking Friendly visits	
Nct (2014)	On-going	RCT	Includes 65+	Care dependent	Western Pacific	High-income economies		Rehabilitation services Visiting health professionals
Nct (2014)	On-going	RCT	Includes 65+	Noncommunicable disease	The Americas	High-income economies		General health services for disease prevention Visiting health professionals
Nct (2014)	On-going	RCT	Includes 65+	Discharged from hospital	The Americas	High-income economies		Visiting health professionals
Nct (2015)	On-going	RCT	Includes 75+	Care dependent	The Americas	High-income economies	Personal mobility and transportation devices	Rehabilitation services
				Injury				Visiting health professionals
Nct (2017)	On-going	RCT	Includes 65+		Western Pacific	High-income economies		General health services for disease prevention Health promotion services Visiting health professionals
Nct (2017)	On-going	RCT	Includes 65+	Physical frailty	The Americas	High-income economies		Rehabilitation services
Nct (2017)	On-going	RCT	Includes 65+ Includes 75+	Injury	The Americas	High-income economies		General health services for disease prevention Health promotion services
Nct (2017)	On-going	RCT	Includes <65 Includes 65+	End-of-life	Western Pacific	High-income economies		Long term care services

Nct (2018)	On-going	RCT	Includes 65+	Noncommunicable disease Physical frailty	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Nct (2018)	On-going	RCT	Includes 65+	Injury	European	High-income economies	Rehabilitation services Visiting health professionals
Neumann (2017)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	European	High-income economies	General health services for disease prevention Health promotion services Visiting health professionals
Nicolaides-Bouman (2004)	On-going	RCT	Includes 65+	50%-75% female included	European	High-income economies	General health services for disease prevention Visiting health professionals
Nielsen (1972)	Complete	RCT	Includes 65+	Discharged from hospital Injury Noncommunicable disease	The Americas	High-income economies	Homemaking Personal care
Nikolaus (1999)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	European	High-income economies	General health services for disease prevention Visiting health professionals
Nikolaus (2003)	Complete	RCT	Includes 75+	50%-75% female included	European	High-income economies	General health services for disease prevention Visiting health professionals
Nobili (2004)	Complete	RCT	Includes 65+	50%-75% female included Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
				Dementia		Family and caregiver support	

Nowalk (2001)	Complete	RCT	Includes 65+ Includes 75+ Includes 85+	75%-100% female included	The Americas	High-income economies	Rehabilitation services
Oerkild (2011)	Complete	RCT	Includes 65+	25%-50% female included	Noncommunicable disease	High-income economies	Rehabilitation services Visiting health professionals
Oerkild (2012)	Complete	RCT	Includes 65+ Includes 75+	75%-100% female included	Noncommunicable disease	High-income economies	Rehabilitation services
Olaleye (2014)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Noncommunicable disease	Lower-middle- income economies	Rehabilitation services
Olesen (2014)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	Noncommunicable disease	High-income economies	Visiting health professionals
Olson (2011)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Oosting (2012)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included 75%-100% female included	Physical frailty European	High-income economies	Rehabilitation services
Orrell (2017)	Complete	RCT	Includes 75+ Includes 85+	75%-100% female included	Dementia Noncommunicable disease	High-income economies	Rehabilitation services
Ouslander (2005)	Complete	RCT	Includes <65 Includes 65+	0%-25% female included	Care dependent The Americas	High-income economies	Rehabilitation services Visiting health professionals
Özdemir (2001)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included	Noncommunicable disease	Upper-middle- income economies	Rehabilitation services

Padala (2017)	Complete	RCT	Includes 65+ Includes 75+	25%-50% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services
Padula (2009)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Papaioannou (2003)	Complete	RCT	Includes 65+ Includes 75+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services
Pardessus (2002)	Complete	RCT	Includes 75+	75%-100% female included	Discharged from hospital Injury	European	High-income economies	General health services for disease prevention Visiting health professionals
Parker (2009)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included	Care dependent	European	High-income economies	Rehabilitation services Visiting health professionals
Parker (2011)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included	Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Parsons et al. (2013)	Complete	RCT	Includes 65+	50%-75% female included	Care dependent	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Parsons (2017)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	European	High-income economies Visiting health professionals	General health services for disease prevention Rehabilitation services
Patterson (2009)	Complete	RCT	Includes 65+	75%-100% female included		Western Pacific	High-income economies	General health services for disease prevention Visiting lay service providers
Pedersen (2016)	Complete	RCT	Includes 75+	75%-100% female included	Discharged from hospital Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Peeters (2007)	On-going	RCT	Includes 65+		Injury	European	High-income economies	General health services for disease prevention Visiting health professionals

Pizzi (2014)	Complete	RCT	Includes <65 Includes 65+ Includes 75+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Portegijs (2013)	Complete	RCT	Includes 65+			European	High-income economies	Rehabilitation services Visiting health professionals
Prick (2015)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included	Dementia Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Profener (2016)	Complete	RCT	Includes 65+	75%-100% female included	Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Radwany (2014)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Noncommunicable disease	The Americas	High-income economies Visiting health professionals	General health services for disease prevention Long term care services
Rasmussen (2016)	Complete	RCT	Includes 65+			European	High-income economies	Rehabilitation services Visiting health professionals>
Ray (1997)	Complete	RCT	Includes 65+	25%-50% female included	Injury	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Reckrey (2018)	On-going	RCT	Includes 65+		Care dependent	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Reeves (2004)	Complete	RCT	Includes 75+	50%-75% female included	Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals

Regan (2017)	Complete	RCT	Includes 65+ Includes 75+	25%-50% female included 50%-75% female included	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services
Resnick (2009)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Richards (1998)	Complete	RCT	Includes 65+ Includes 75+	50%-75% female included	Injury Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Robertson et al. (2001)	Complete	RCT	Includes 75+	50%-75% female included Noncommunicable disease	Care dependent Injury Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Roderick (2001)	Complete	RCT	Includes 65+		Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Rosendahl (2006)	Complete	RCT	Includes 65+		Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Rosstad (2017)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Rossum (1993)	Complete	RCT	Includes 75+	50%-75% female included	Care dependent	European	High-income economies	General health services for disease prevention Visiting health professionals
Rubenstein (1994)	Complete	RCT	Includes 75+	50%-75% female included	Care dependent Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals

Runciman (1996)	Complete	RCT	Includes 75+	Discharged from hospital	European	High-income economies	Visiting health professionals
Ryan (2006)	Complete	RCT	Includes 65+	50%-75% female included	European	High-income economies	Rehabilitation services Visiting health professionals
Rytter (2010)	Complete	RCT	Includes 75+	50%-75% female included	European	High-income economies	General health services for disease prevention Visiting health professionals
Sackley (2007)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included Care dependent Physical frailty Social isolation	European	High-income economies	Rehabilitation services Visiting health professionals
Sackley (2009)	Complete	RCT	Includes 75+	75%-100% female included Care dependent Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Sackley (2015)	Complete	RCT	Includes 75+	50%-75% female included Noncommunicable disease	European	High-income economies	Personal mobility and transportation devices Rehabilitation services Visiting health professionals
Sahlen (2016)	Complete	RCT		Noncommunicable disease	European	High-income economies	Long term care services
Salminen (2009)	Complete	RCT	Includes 65+	75%-100% female included	European	High-income economies	General health services for disease prevention Visiting health professionals
Salpakoski (2014)	Complete	RCT	Includes 75+	75%-100% female included	European	High-income economies	Rehabilitation services Visiting health professionals
Samus (2014)	Complete	RCT	Includes 75+	50%-75% female included Care dependent Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals

Sandberg (2015)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Sandberg (2015)	Complete	RCT	Includes 65+	50%-75% female included	Care dependent Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Sanford (2006)	Complete	RCT	Includes <65 Includes 65+		Care dependent	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Schnelle (1996)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease Physical frailty	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Schnelle (2010)	Complete	RCT	Includes 75+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Seidl (2015)	Complete	RCT	Includes 65+ Includes 75+	25%-50% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Senior (2014)	Complete	RCT	Includes 65+	50%-75% female included	Physical frailty	Western Pacific	High-income economies Visiting health professionals	General health services for disease prevention Rehabilitation services
Serra-Rexach (2011)	Complete	RCT	Includes 85+	75%-100% female included	Care dependent Noncommunicable disease Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Sheffield (2013)	Complete	RCT	Includes 65+	75%-100% female included	Physical frailty	The Americas	High-income economies	Rehabilitation services Visiting health professionals

Shepperd and Iliffe (1998)	Complete	RCT	Includes <65 Includes 65+	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Shepperd and Iliffe (1998)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Shepperd (2017)	On-going	RCT	Includes 65+	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Sherman (2016)	Complete	RCT	Includes 75+	50%-75% female included	European	High-income economies	General health services for disease prevention Visiting health professionals
Sherrington (2015)	Complete	RCT	Includes <65 Includes 65+	Discharged from hospital	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Sherrington (2016)	On-going	RCT	Includes <65 Includes 65+	Injury	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Shyu (2008)	Complete	RCT	Includes 65+	Discharged from hospital	Western Pacific	High-income economies Family and caregiver support	General health services for disease prevention Visiting health professionals
Shyu (2016)	Complete	RCT	Includes <65 Includes 65+ Includes 75+	50%-75% female included	Western Pacific	High-income economies	General health services for disease prevention Rehabilitation services
Siggeirsdottir (2005)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	European	High-income economies	Rehabilitation services Visiting health professionals

Simmons (2002)	Complete	RCT	Includes 75+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Simmons (2005)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies	Personal care
Sloane (2004)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included Noncommunicable disease	Care dependent Dementia	The Americas	High-income economies	Personal care
Steele (2008)	Complete	RCT	Includes <65 Includes 65+		Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Steinberg (2009)	Complete	RCT	Includes 65+	50%-75% female included	Dementia Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Stelmack et al. (2007)	Complete	RCT	Includes 65+	0%-25% female included	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Stevens (2001)	Complete	RCT	Includes 75+	50%-75% female included		Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Stevens-Lapsley (2016)	Complete	RCT	Includes 65+	50%-75% female included	Discharged from hospital	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Stewart et al. (2005)	Complete	RCT	Includes 65+		Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Stewart (2012)	Complete	RCT	Includes <65 Includes 65+	25%-50% female included	Noncommunicable disease	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals

Stuck et al. (1995)	Complete	RCT	Includes 75+	50%-75% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Stuck et al. (1995)	Complete	RCT	Includes 75+	50%-75% female included		The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Stuck (2000)	Complete	RCT	Includes 75+	75%-100% female included	Care dependent	European	High-income economies	General health services for disease prevention Visiting health professionals
Suominen (2015)	Complete	RCT	Includes 65+	25%-50% female included	Care dependent Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Suttanon (2013)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Szanton (2014)	On-going	RCT	Includes 65+		Physical frailty	The Americas	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Talley (2017)	Complete	RCT	Includes 75+	75%-100% female included	Noncommunicable disease	The Americas	High-income economies Visiting health professionals	General health services for disease prevention Rehabilitation services
Taube (2017)	Complete	RCT	Includes 65+	25%-50% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Thomas (2016)	Complete	RCT	Includes 65+		Care dependent	The Americas	High-income economies	Homemaking
Thomas (2018)	Complete	RCT	Includes 65+		Physical frailty	The Americas	High-income economies	Homemaking

Thygesen (2015)	Complete	RCT	Includes 65+	25%-50% female included	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Tibaldi (2004)	Complete	RCT	Includes 75+	50%-75% female included	Noncommunicable disease Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Tibaldi (2009)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Tinetti (1999)	Complete	RCT	Includes 65+	75%-100% female included	Discharged from hospital Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Toots (2017)	Complete	RCT	Includes 65+	75%-100% female included	Dementia Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Townsend (1988)	Complete	RCT	Includes 75+	50%-75% female included	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals
Tsaih (2011)	Complete	RCT	Includes 65+	25%-50% female included	Injury	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Tseng (2016)	Complete	RCT	Includes 65+	50%-75% female included	Injury	Western Pacific	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Tsuchihashi-Makaya (2013)	Complete	RCT	Includes 65+	25%-50% female included	Noncommunicable disease	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Turunen (2017)	On-going	RCT	Includes 65+		Discharged from hospital	European	High-income economies	Rehabilitation services Visiting health professionals

Underwood (2013)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Valdes (2015)	Complete	RCT	Includes <65 Includes 65+	75%-100% female included	Injury	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Van Der Pols-Viljbrief (2016)	Complete	RCT	Includes 65+	50%-75% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
van Haastregt (2000)	Complete	RCT	Includes 65+	50%-75% female included	Injury	European	High-income economies	General health services for disease prevention Visiting health professionals
van Hout (2010)	Complete	RCT	Includes 75+	50%-75% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
van Houten (2007)	Complete	RCT	Includes 65+	75%-100% female included	Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Vass (2007)	Complete	RCT	Includes 75+	50%-75% female included		European	High-income economies	General health services for disease prevention Visiting health professionals
Verweij (2018)	On-going	RCT	Includes 65+		Discharged from hospital Noncommunicable disease	European	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Vogler (2009)	Complete	RCT	Includes 75+	50%-75% female included 75%-100% female included	Discharged from hospital	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Weir (1998)	Complete	RCT	Includes <65 Includes 65+	50%-75% female included	Discharged from hospital	The Americas	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals

Whitehead (2014)	On-going	RCT	Includes <65 Includes 65+	European	High-income economies	Rehabilitation services Visiting health professionals
Wilhelmson (2013)	Complete	RCT	Includes 75+ 50%-75% female included	European	High-income economies	Health promotion services Visiting health professionals
Wilson (2009)	Complete	RCT	Includes <65 Includes 65+ 75%-100% female included	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Wishart (2000)	Complete	RCT	Includes 75+ 75%-100% female included	The Americas	High-income economies	Rehabilitation services Visiting lay service providers
Wisniewska-Szurlej (2017)	On-going	RCT	Includes 65+	Care dependent European	High-income economies	Rehabilitation services
Wong (2015)	Complete	RCT	Includes <65 Includes 65+ 50%-75% female included	Discharged from hospital Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Wong (2016)	Complete	RCT	Includes 75+ 50%-75% female included	Discharged from hospital Noncommunicable disease Western Pacific	High-income economies	Long term care services Visiting health professionals Visiting lay service providers
Wylie (2017)	Complete	RCT	Includes 65+ 75%-100% female included	European	High-income economies	Rehabilitation services Personal care
Young (1992)	Complete	RCT	Includes <65 Includes 65+ 25%-50% female included	Discharged from hospital Noncommunicable disease The Americas	High-income economies	Rehabilitation services Visiting health professionals
Ziden (2008)	Complete	RCT	Includes 75+ 50%-75% female included	Care dependent Injury European	High-income economies	Rehabilitation services Visiting health professionals

Ziden (2010)	Complete	RCT	Includes 65+	75%-100% female included	Injury	European	High-income economies	Rehabilitation services Visiting health professionals
Ziden (2014)	Complete	RCT	Includes 85+	50%-75% female included	Injury	European	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Zimmer (1985)	Complete	RCT	Includes 65+	50%-75% female included	Care dependent Noncommunicable disease Physical frailty	The Americas	High-income economies	General health services for disease prevention Visiting health professionals Visiting lay service providers
Abdulla (2013)	Complete	Systematic review	Includes 65+		Noncommunicable disease Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Allen et al. (2014)	Complete	Systematic review	Includes <65 Includes 65+		Discharged from hospital	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Andy (2016)	Complete	Systematic review	Includes 65+	50%-75% female included	Care dependent	European	High-income economies	Rehabilitation services Visiting health professionals
Apostolo (2018)	Complete	Systematic review	Includes 65+		Physical frailty	European	High-income economies Visiting health professionals	General health services for disease prevention Rehabilitation services
Baldwin (2011)	Complete	Systematic review	Includes <65 Includes 65+		Physical frailty	European	High-income economies	Health promotion services Visiting health professionals
Baxter (2016)	Complete	Systematic review	Includes <65 Includes 65+			European	High-income economies	Rehabilitation services Visiting health professionals

Berger (2013)	Complete	Systematic review		Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Beswick (2010)	Complete	Systematic review	Includes 65+ Physical frailty	Discharged from hospital Injury	European	High-income economies	General health services for disease prevention Visiting health professionals
Blythe (2009)	Complete	Systematic review	Includes <65 Includes 65+	Care dependent Dementia Noncommunicable disease	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Bryant-Lukosius (2015)	Complete	Systematic review	Includes <65 Includes 65+	Communicable disease Discharged from hospital	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Bula (2011)	Complete	Systematic review	Includes <65 Includes 65+	Injury	European	High-income economies	Rehabilitation services Visiting health professionals
Bunn (2016)	Complete	Systematic review	Includes <65 Includes 65+	Dementia Noncommunicable disease	European	High-income economies Homemaking	
Burns (2001)	Complete	Systematic review	Includes <65 Includes 65+	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Burton (2015)	Complete	Systematic review	Includes 65+	Dementia Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Burton (2015)	Complete	Systematic review	Includes 65+ 75%-100% female included	Physical frailty	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals

Cadore (2013)	Complete	Systematic review	Includes 65+	Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Candy (2011)	Complete	Systematic review		End-of-life	European	High-income economies	Long term care services Visiting health professionals
Cattan (2005)	Complete	Systematic review	Includes <65 Includes 65+	Social isolation	European	High-income economies Family and caregiver support	Health promotion services Visiting health professionals
Chiung-Ju (2013)	Complete	Systematic review	Includes 65+	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Chou (2012)	Complete	Systematic review	Includes 75+ 50%-75% female included	Care dependent	Western Pacific	Upper-middle-income economies	Rehabilitation services Visiting health professionals
Clarkson (2018)	Complete	Systematic review	Includes <65 Includes 65+	Dementia Noncommunicable disease	European	High-income economies Family and caregiver support	General health services for disease prevention Visiting health professionals
Clegg (2012)	Complete	Systematic review	Includes 65+ Includes 75+	Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Cobban (2012)	Complete	Systematic review	Includes 65+	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Cochrane (2014)	Complete	Systematic review	Includes 65+ 50%-75% female included	Care dependent	European	High-income economies	Rehabilitation services Visiting health professionals

Corrieri (2011)	Complete	Systematic review	Includes 65+		European	High-income economies	General health services for disease prevention Health promotion services Visiting health professionals
Crocker (2013)	Complete	Systematic review	Includes <65 Includes 65+	Care dependent Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Daniels (2008)	Complete	Systematic review	Includes 75+	Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Davis (2015)	Complete	Systematic review	Includes <65 Includes 65+	End-of-life	The Americas	High-income economies	Long term care services Visiting health professionals
De Coninck (2017)	Complete	Systematic review	Includes <65 Includes 65+	Injury Noncommunicable disease	European	High-income economies	Rehabilitation services Long term care services
de Vries (2012)	Complete	Systematic review	Includes 65+	Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Desheng (2018)	Complete	Systematic review	Includes 65+	Injury	Western Pacific	Upper-middle-income economies	Rehabilitation services Visiting health professionals
Dickens (2011)	Complete	Systematic review	Includes <65 Includes 65+	Social isolation	European	High-income economies	General health services for disease prevention Visiting health professionals
Eklund (2009)	Complete	Systematic review	Includes 65+	Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals

Elkan (2001)	Complete	Systematic review	Includes 65+	Physical frailty	European	High-income economies	Family and caregiver support	General health services for disease prevention Health promotion services Visiting health professionals
Evans (2003)	Complete	Systematic review	Includes 65+	Noncommunicable disease	European	High-income economies		Rehabilitation services Visiting health professionals
Fletcher-Smith (2013)	Complete	Systematic review	Includes <65 Includes 65+	Noncommunicable disease	European	High-income economies		Rehabilitation services Visiting health professionals
Forniatti (2013)	Complete	Systematic review	Includes 65+	Noncommunicable disease	Western Pacific	High-income economies	Personal mobility and transportation devices	
Forbes (2015)	Complete	Systematic review	Includes 65+	Dementia Noncommunicable disease	The Americas	High-income economies		Rehabilitation services Visiting health professionals
Franck (2016)	Complete	Systematic review	Includes <65 Includes 65+	Social isolation	Western Pacific	High-income economies		General health services for disease prevention Rehabilitation services Visiting health professionals
Gillespie (2012)	Complete	Systematic review	Includes <65 Includes 65+	Injury 50%-75% female included	European	High-income economies	Personal mobility and transportation devices	Rehabilitation services Visiting health professionals
Gine-Garriga (2014)	Complete	Systematic review	Includes <65 Includes 65+	Physical frailty	European	High-income economies		Rehabilitation services Visiting health professionals

Golding-Day (2017)	Complete	Systematic review	Includes <65 Includes 65+	Physical frailty	European	High-income economies	Personal care	Visiting health professionals
	Complete	Systematic review	Includes <65 Includes 65+	End-of-life	European	High-income economies	Long term care services	Visiting health professionals
Grant (2014)	Complete	Systematic review	Includes 65+	50%-75% female included	Noncommunicable disease	High-income economies	General health services for disease prevention	Visiting health professionals
Graybill (2014)	Complete	Systematic review	Includes 65+	Noncommunicable disease	Physical frailty	High-income economies		
Hall (2011)	Complete	Systematic review	Includes 75+	75%-100% female included	End-of-life	High-income economies	Long term care services	Visiting health professionals
Handoll (2009)	Complete	Systematic review	Includes 65+	Injury	European	High-income economies	Rehabilitation services	Visiting health professionals
Handoll (2015)	Complete	Systematic review	Includes <65 Includes 65+	Injury	European	High-income economies	Rehabilitation services	Visiting health professionals
Hill (2015)	Complete	Systematic review	Includes <65 Includes 65+	Injury	Western Pacific	High-income economies	Rehabilitation services	Visiting health professionals
Hobbs (2013)	Complete	Systematic review	Includes <65 Includes 65+	Noncommunicable disease	European	High-income economies	Rehabilitation services	Visiting health professionals
Howe (2011)	Complete	Systematic review	Includes <65 Includes 65+	Physical frailty	European	High-income economies	Rehabilitation services	Visiting health professionals

Hunter (2018)	Complete	Systematic review	Includes 65+	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Huss (2008)	Complete	Systematic review	Includes 65+		European	High-income economies	General health services for disease prevention Visiting health professionals
Jane (2017)	Complete	Systematic review	Includes 65+	Care dependent Noncommunicable disease	European	High-income economies	
Kang-Yi (2010)	Complete	Systematic review	Includes 65+	Care dependent Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Konno (2011)	On-going	Systematic review	Includes <65 Includes 65+	Dementia Noncommunicable disease	Western Pacific	High-income economies	Personal care Visiting health professionals
Konno (2013)	Complete	Systematic review		Dementia Noncommunicable disease	Western Pacific	High-income economies	Visiting health professionals
Konno (2014)	Complete	Systematic review	Includes <65 Includes 65+ Noncommunicable disease	Care dependent Dementia	Western Pacific	High-income economies	Personal care
Kurz (2011)	Complete	Systematic review	Includes <65 Includes 65+	Noncommunicable disease	European	High-income economies	General health services for disease prevention Rehabilitation services Visiting health professionals
Lacroix (2017)	Complete	Systematic review	Includes 65+		European	High-income economies	Rehabilitation services Visiting health professionals

Legg (2004)	Complete	Systematic review	Includes 65+	Noncommunicable disease	European	High-income economies	Rehabilitation services
Legg (2017)	Complete	Systematic review	Includes <65 Includes 65+	Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Lewis (2017)	Complete	Systematic review	Includes 65+	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Litimatta (2016)	Complete	Systematic review	Includes 65+	Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Liu (2015)	Complete	Systematic review	Includes 65+	Dementia Noncommunicable disease	The Americas	High-income economies	Personal care
Liu (2018)	Complete	Systematic review	Includes 65+	Care dependent Discharged from hospital	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Low (2011)	Complete	Systematic review	Includes 65+	Noncommunicable disease	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
Martin (2011)	Complete	Systematic review	Includes 65+	Noncommunicable disease	European Visiting health professionals	High-income economies	General health services for disease prevention Rehabilitation services
Mayo-Wilson (2014)	Complete	Systematic review	Includes 65+		European	High-income economies	General health services for disease prevention Visiting health professionals

McClure (2005)	Complete	Systematic review	Includes 65+	Injury	Western Pacific	High-income economies	General health services for disease prevention Visiting health professionals
McWilliam (2000)	Complete	Systematic review	Includes 65+		The Americas	High-income economies	Personal mobility and transportation devices General health services for disease prevention Health promotion services Rehabilitation services Visiting health professionals
Meinck (2004)	Complete	Systematic review	Includes <65 Includes 65+		European	High-income economies	General health services for disease prevention Visiting health professionals
Montgomery (2008)	Complete	Systematic review	Includes 65+	Care dependent	European	High-income economies	Personal care
Munk (2016)	Complete	Systematic review	Includes <65 Includes 65+	Physical frailty	European	High-income economies	General health services for disease prevention Visiting health professionals
Oliver (2007)	Complete	Systematic review		Injury Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Outpatient (2003)	Complete	Systematic review	Includes <65 Includes 65+	50%-75% female included Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Ozdemir (2017)	Complete	Systematic review	Includes <65 Includes 65+	Discharged from hospital	European	Lower-middle-income economies	Rehabilitation services Visiting health professionals
Patterson (1999)	Complete	Systematic review	Includes 65+	Discharged from hospital	European	High-income economies	General health services for disease prevention Visiting health professionals

Pitkala (2013)	Complete	Systematic review	Includes 75+	50%-75% female included	Dementia	European	High-income economies	Rehabilitation services Visiting health professionals
Poscia (2018)	Complete	Systematic review	Includes 65+	50%-75% female included	Social isolation	European	High-income economies	General health services for disease prevention Visiting health professionals
Potter (2011)	Complete	Systematic review	Includes <65 Includes 65+		Dementia Noncommunicable disease	European	High-income economies	Rehabilitation services
Reilly (2015)	Complete	Systematic review	Includes <65 Includes 65+		Dementia Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals
Renz (2017)	Complete	Systematic review	Includes <65 Includes 65+			European	High-income economies	General health services for disease prevention Visiting health professionals
Resnick (2016)	Complete	Systematic review	Includes 65+		Injury Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Roe (2015)	Complete	Systematic review	Includes <65 Includes 65+		Noncommunicable disease	European	High-income economies	Health promotion services Visiting health professionals
Roets-Merken (2015)	Complete	Systematic review	Includes <65 Includes 65+		Care dependent Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Santomassino (2012)	Complete	Systematic review	Includes <65 Includes 65+		Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Sean (2014)	Complete	Systematic review	Includes 65+	50%-75% female included	Noncommunicable disease	European	High-income economies	General health services for disease prevention Visiting health professionals

Shaw (2009)	Complete	Systematic review	Includes 65+	50%-75% female included	Physical frailty	European	High-income economies	Family and caregiver support	
Shepperd (2005)	Complete	Systematic review	Includes 65+		Discharged from hospital	European	High-income economies		General health services for disease prevention Visiting health professionals
Shepperd (2011)	Complete	Systematic review	Includes <65 Includes 65+		End-of-life	European	High-income economies		Long term care services Visiting health professionals
Shepperd (2016)	Complete	Systematic review	Includes <65 Includes 65+			European	High-income economies		General health services for disease prevention Visiting health professionals
Shvedko (2018)	Complete	Systematic review	Includes <65 Includes 65+	50%-75% female included	Noncommunicable disease	European	High-income economies		Rehabilitation services Visiting health professionals
Simek (2012)	Complete	Systematic review	Includes <65 Includes 65+		Injury	Western Pacific	High-income economies		Rehabilitation services Visiting health professionals
Sims-Gould (2017)	Complete	Systematic review	Includes 65+	50%-75% female included	Care dependent Noncommunicable disease Physical frailty	The Americas	High-income economies		Rehabilitation services Visiting health professionals
Skelton (2013)	Complete	Systematic review	Includes <65 Includes 65+		Noncommunicable disease	European	High-income economies		
Smeeth (2006)	Complete	Systematic review	Includes 65+			European	High-income economies		General health services for disease prevention Visiting health professionals
Smith (2016)	Complete	Systematic review Includes 65+	Includes <65		Noncommunicable disease	European	High-income economies		General health services for disease prevention

Stall (2014)	Complete	Systematic review	Includes 65+	Care dependent	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Steultjens (2004)	Complete	Systematic review	Includes 65+	Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Steultjens (2004)	Complete	Systematic review	Includes <65 Includes 65+		European	High-income economies	Rehabilitation services Visiting health professionals
Stolee (2012)	Complete	Systematic review	Includes <65 Includes 65+	Noncommunicable disease	The Americas	High-income economies	Rehabilitation services Visiting health professionals
Stuck (2002)	Complete	Systematic review	Includes 65+		European	High-income economies	General health services for disease prevention Visiting health professionals
Talley (2011)	Complete	Systematic review	Includes 65+	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Tappenden (2012)	Complete	Systematic review	Includes 75+	Physical frailty	European	High-income economies	Health promotion services Visiting health professionals
Therapy-based rehabilitation (2003)	Complete	Systematic review	Includes 65+	Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Thiebaud (2014)	Complete	Systematic review	Includes 75+ 50%-75% female included		The Americas	High-income economies	Rehabilitation services Visiting health professionals
Toles (2016)	Complete	Systematic review	Includes 75+ 50%-75% female included	Discharged from hospital	The Americas	High-income economies	General health services for disease prevention Visiting health professionals

Tseng (2011)	Complete	Systematic review	Includes 65+	Noncommunicable disease	Western Pacific	High-income economies	Rehabilitation services Visiting health professionals
Vaapio (2009)	Complete	Systematic review	Includes <65 Includes 65+	Injury	European	High-income economies	Rehabilitation services Visiting health professionals
van Abbema (2015)	Complete	Systematic review	Includes 65+	Physical frailty	European	High-income economies	Rehabilitation services Visiting health professionals
Van Citters (2004)	Complete	Systematic review	Includes 65+	Noncommunicable disease	The Americas	High-income economies	General health services for disease prevention Visiting health professionals
Ward (2003)	Complete	Systematic review	Includes <65 Includes 65+	Care dependent Noncommunicable disease	European	High-income economies	Rehabilitation services Visiting health professionals
Watanabe (2015)	On-going	Systematic review	Includes <65 Includes 65+	Noncommunicable disease	Western Pacific	High-income economies	Personal mobility and transportation devices
Weber (2018)	Complete	Systematic review	Includes <65 Includes 65+	50%-75% female included Care dependent Injury	European	High-income economies	Rehabilitation services Visiting health professionals
Winkel (2008)	Complete	Systematic review	Includes <65 Includes 65+	Noncommunicable disease	European	High-income economies	General health services for disease prevention Rehabilitation services
Yi (2015)	On-going	Systematic review	Includes <65 Includes 65+	Dementia Noncommunicable disease	Western Pacific	High-income economies	Personal care General health services for disease prevention Visiting health professionals

Young (2017)

Complete	Systematic review	Includes 65+	Care dependent	European	High-income economies	Long term care services
			Noncommunicable disease			Visiting health professionals
Zhu (2013)	Complete	Systematic review	Includes <65	The Americas	High-income economies	Personal care
			Includes 65+	Noncommunicable disease		
Zubala (2017)	Complete	Systematic review	Includes <65	European	High-income economies	Rehabilitation services
			Includes 65+			Visiting health professionals

Intervention: design, construction and building products and technology of buildings for private use

Acton (2016)

Study	Outcomes: intrinsic capacity	Outcomes: functional ability	Outcomes: process and other outcomes	Setting	Comparison	PROGRESS factors	Gender inequalities	Other health inequalities	Study quality
	Mental functions	Basic needs		Residential home/apartment	Usual care		No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Sensory functions and pain

Aimonino (2008)

	Mental functions	Basic needs	Cost (e.g.out of pocket)	Residential home/apartment	Usual care		No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the digestive, metabolic and endocrine systems	Quality of life	Satisfaction of older adult						
		Mobility	Caregiver outcomes						
			Health service utilization						

Alexander (2001)

Mobility	Assisted living	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Alexopoulos (2016)

Mental functions	Learning, grow and make decisions	Residential home/ apartment	Other	Socioeconomic status	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Amjad (2018)

Quality of life	Cost (e.g., out of pocket)	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Health service utilization	Independent living				

Andersen (2000)

Mental functions	Basic needs	Health service utilization	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoskeletal function

Anonymous (2004)

Mental functions	Quality of life	Residential home/ apartment	Usual care	Social capital	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Araujo (2015)	Basic needs	Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life Mobility	Health service utilization					
Arean (2015)	Mental functions	Basic needs	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Yes - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility						
Arrieta (2018)	Mental functions	Basic needs	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function Mobility Contribution Financial security and stability						
Ashburn (2007)	Basic needs	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility						

Avlund (2002)	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility					
Baker (2007)	Neuromusculoskeletal function	Independent living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mental functions	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Barnes (2017)	Basic needs	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life					
Barreto (2018)	Neuromusculoskeletal function	Adherence	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility	Residential home/apartment				

Batchelor-
Murphy
(2017)

Functions of the digestive, metabolic and endocrine systems	Basic needs	Assisted living	Other	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
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Beck (2013)

Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
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Neuromusculoskeletal function
Mobility
Contribution

Beck (2016)

Functions of the digestive, metabolic and endocrine systems	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
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Neuromusculoskeletal function
Quality of life
Mobility

Behm (2014)

Mental functions	Quality of life	Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
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Sensory functions and pain
Neuromusculoskeletal function

Behm (2016)

Mental functions	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Sensory functions and pain
Neuromusculoskeletal function

Beland (2006)

Mental functions	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility	Satisfaction of older adult Cost-effectiveness Health service utilization					

Bennell (2018)

Mental functions	Basic needs		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Sensory functions and pain

Bernabei (1998)

	Basic needs	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility	Health service utilization					

Bjerk (2017)

Neuromusculoskeletal function	Adherence	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Mobility	Falls					

Blanchard (1999)

Mental functions		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Bleijenbergh (2016)

Basic needs	Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Quality of life	Caregiver outcomes Health service utilization					

Bonnefoy (2012)

Functions of the digestive, metabolic and endocrine systems	Adherence	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Neuromusculoskeletal function	Safety					

Boongird (2017)

Mental functions	Adherence	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Quality of life						
Neuromusculoskeletal function	Falls					

Bouman (2008)	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life						
	Mental functions	Quality of life	Health service utilization	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Boxall (2005)	Functions of the cardiovascular, haematological, immunological and respiratory systems	Mobility					
	Neuromusculoskeletal function						
Brannstrom (2014)	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Sensory functions and pain	Quality of life					
	Functions of the cardiovascular, haematological, immunological and respiratory systems	Mobility					

Brettschneider
(2014)

Mental functions	Basic needs	Cost-effectiveness	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Quality of life	Health service utilization					

Brovold (2012)

Mental functions	Quality of life		Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Mobility						
Neuromusculoskeletal function	Build and maintain relationships						

Bruce (2015)

Mental functions	Mobility		Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Bruce (2016)

		Health service utilization	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Brumley (2007)

		Cost (e.g., out of pocket)	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Satisfaction of older
adult

Burton (2013)	Mental functions	Basic needs	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Neuromusculoskeletal function						
Buurman (2016)		Quality of life	Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
		Mobility	Health service utilization	Assisted living			
Buys (2017)	Functions of the digestive, metabolic and endocrine systems	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Access Health service utilization						
Byles (2004)	Mental functions	Quality of life	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Sensory functions and pain Neuromusculoskeletal function	Contribution					

Bymes (2015)	Quality of life	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
						Cost-effectiveness Health service utilization	
Callahan (2012)	Neuromusculoskeletal function		Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility						
Campbell (1997)	Neuromusculoskeletal function	Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Campbell (2005)	Adaptations to physical environment	Cost-effectiveness	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Falls					
Canning (2015)	Neuromusculoskeletal function	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Caplan (1999)

Mental functions	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Caregiver outcomes

Functions of the digestive, metabolic and endocrine systems

Genitourinary and reproductive functions

Integumentary system

Safety

Health service utilization

Falls

Caplan (2004)

Mental functions	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Caplan (2006)

Mental functions	Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Cost-effectiveness

Health service utilization

Carroll (2007)

	Adherence	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Health service utilization

Chaiyawat (2012)

Mental functions	Basic needs	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life

Chan et al. (2016)

Learning, grow and make decisions	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Chandler (1998)

Mental functions	Mobility	Falls	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoskeletal function

Chang (2015)

Basic needs	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Mobility

Chee (2013)

Adaptations to physical environment	Mental functions	Basic needs	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Chen (2015)	Mental functions	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Chen (2015)	Neuromusculoskeletal function	Residential home/apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Chen (2016)	Functions of the cardiovascular, haematological, immunological and respiratory systems	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Cho (1998)	Neuromusculoskeletal function	Residential home/apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Chow (2014)	Mental functions	Health service utilization	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Sensory functions and pain					

Chu (2017)

Adaptations to physical environment	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Falls

Cichocki (2015)

Mental functions	Quality of life	Satisfaction of older adult	Assisted living	Usual care		No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Sensory functions and pain
Neuromusculoskeletal function

Ciechanowski (2004)

Mental functions	Quality of life	Cost (e.g., out of pocket)	Residential home/apartment	Usual care		No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Health service utilization

Claffey (1976)

	Cost-effectiveness	Residential home/apartment	Usual care			No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Clegg (2014)

Mental functions	Basic needs	Usual care	Residential home/apartment			No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life
Mobility

Clemson (2016)	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mental functions	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Comans (2010)	Sensory functions and pain	Quality of life					
	Functions of the digestive, metabolic and endocrine systems	Contribution					
Conradsson (2010)	Genitourinary and reproductive functions						
	Neuromusculoskeletal function						
Cornu (2003)	Mental functions		Assisted living	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Basic needs	Adherence	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Health service utilization					

Corr (1995)	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Counsell (2007)	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	Race, ethnicity, culture, language	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Sensory functions and pain					Socioeconomic status		
Courtney (2009)	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Quality of life						
Courtney (2011)	Mental functions	Basic needs	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Health service utilization					
Courtney (2012)		Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Mobility Contribution						

Crotty (2002)	Mental functions	Quality of life	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Caregiver outcomes Health service utilization Falls					
Crotty (2003)	Mental functions	Basic needs	Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Quality of life Mobility						
Crotty (2008)	Mental functions	Basic needs		Assisted living	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Quality of life						
Cumming (2000)	Mental functions		Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Cummings (1990)	Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Caregiver outcomes Health service utilization		Cost-effectiveness					

Cunliffe (2004)	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the cardiovascular, haematological, immunological and respiratory systems			Communication			
	Functions of the digestive, metabolic and endocrine systems						
Cutchin (2009)	Neuromusculoskeletal function						
	Mental functions	Contribution	Satisfaction of older adult	Other home/apartment	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Neuromusculoskeletal function Health service utilization	Cost-effectiveness			
Dalby (2000)			Health service utilization	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Daly (2015)

Mental functions	Basic needs	Adherence	Independent living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Functions of the

digestive,
metabolic and
endocrine
systems

Quality of life

Cost-effectiveness

Neuromusculoskeletal function

Safety

Falls

Danilovich

et al. (2017)

Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Caregiver outcomes

Quality of life
Contribution

Dano (2016)

Mental functions	Quality of life		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoskeletal function

Dechamps (2010)

Mental functions	Basic needs	Caregiver outcomes	Long-term care	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Assisted living

Di Monaco (2008)	Basic needs	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Di Pollina (2017)		Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Falls					
Dias (2008)	Mental functions	Caregiver outcomes	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Basic needs						
Donald (1995)	Mental functions		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Basic needs						
	Genitourinary and reproductive functions						
	Neuromusculoskeletal function						
Donat (2007)	Mental functions	Mobility	Independent living	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Sensory functions and pain						
	Neuromusculoskeletal function						

Dorner (2013)	Mental functions	Quality of life	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function							
Dorresteijn (2016)		Basic needs	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mental functions		Cost-effectiveness	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Dow (2013)								
	Neuromusculoskeletal function		Caregiver outcomes					
Draper (2008)			Health service utilization					
	Mental functions	Basic needs	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Draper (2016)								
	Sensory functions and pain	Mobility		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Duffy (2010)

Quality of life	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Satisfaction of older adult					
	Health service utilization					

Edgren (2015)

Neuromusculoskeletal function	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Quality of life Mobility						

Eloniemi-Sulkava (2001)

Mental functions	Caregiver outcomes	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Health service utilization					

Eloniemi-Sulkava (2009)

Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Cost-effectiveness					
	Caregiver outcomes					
	Health service utilization					

Engberg (2016)

Genitourinary and reproductive functions	Adherence	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Enguidanos (2012)

Basic needs	Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Health service utilization						

Eriksen (2016)

Mental functions	Quality of life	Adherence	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Functions of the digestive, metabolic and endocrine systems	Mobility						
Neuromusculoskeletal function							

Fabacher (1994)	Sensory functions and pain	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the cardiovascular, haematological, immunological and respiratory systems					
	Functions of the digestive, metabolic and endocrine systems					
	Neuromusculoskeletal function					
Faber (2006)	Neuromusculoskeletal function	Falls	Residential home/ apartment	Usual care	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Fahlström (2018)	Neuromusculoskeletal function	Health service utilization	Residential home/ apartment	Other	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Fairhall (2012)	Mental functions	Quality of life	Residential home/ apartment	Usual care	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function	Falls				

Fairhall (2014)	Adaptations to physical environment	Sensory functions and pain	Mobility	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Neuromusculoskeletal function							
Fairhall et al. (2015)	Adaptations to physical environment	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Neuromusculoskeletal function	Quality of life	Falls					
			Mobility						
Fairhall (2017)		Functions of the cardiovascular, haematological, immunological and respiratory systems	Mobility		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Neuromusculoskeletal function							
Farag (2015)		Neuromusculoskeletal function	Quality of life	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Mobility	Falls					
Farag (2016)				Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
				Health service utilization					

Fasce (2018)

Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Favela (2013)

Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life
Mobility

Feldman (2004)

Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life

Ferrer (2014)

Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Ferrer-

Garcia (2011)

Functions of the cardiovascular, haematological, immunological and respiratory systems	Adherence	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Fiatarone (1994)	Functions of the digestive, metabolic and endocrine systems Mobility Neuromusculoskeletal function	Long-term care	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Finnema (2005)	Mental functions	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Fleming (2004)	Mental functions	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	RCT
Flood (2005)	Adaptations to physical environment	Quality of life	Cost-effectiveness	Residential home/apartment	No - assessment of effects by sex/gender NOT present	RCT
Fontan (2010)	Mental functions	Basic needs	Health service utilization	Residential home/apartment	No - assessment of effects by sex/gender NOT present	RCT
	Quality of life Build and maintain relationships				No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Forsberg (2011)

Sensory functions and pain	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoskeletal function

Falls

Forster (1996)

Mental functions	Basic needs	Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Sensory functions and pain
Genitourinary and reproductive functions

Frese (2012)

		Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Friedman (2014)

	Basic needs		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Gagnon (1999)

	Basic needs	Caregiver outcomes	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life

Health service utilization

García-Pena (2001)	Functions of the cardiovascular, haematological, immunological and respiratory systems	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Cost (e.g., out of pocket)	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
García-Pena (2002)		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Cost-effectiveness				
Gawler (2016)	Neuromusculoskeletal function	Falls	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Giangregorio (2018)	Neuromusculoskeletal function	Adherence	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Falls				
Gill (2002)	Adaptations to physical environment	Mental functions	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Gill (2004)

Basic needs	Residential home/ apartment	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Mobility

Gitlin (2001)

Mental functions	Basic needs	Caregiver outcomes	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Gitlin (2006)

Adaptations to physical environment	Mental functions	Basic needs	Falls	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Functions of the
cardiovascular,
haematological,
immunological
and respiratory
systems

Functions of the
digestive,
metabolic and
endocrine
systems

Gitlin (2008)

Mental functions	Quality of life	Caregiver outcomes	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Genitourinary and
reproductive
functions

Gitlin (2009)

Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	Yes - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Gitlin (2010)

Functions of the cardiovascular, haematological, immunological and respiratory systems	Quality of life	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Genitourinary and reproductive functions						

Gitlin (2014)

Mental functions	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Gitlin (2018)

Mental functions	Basic needs	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Caregiver outcomes					

Gladman (1993)

Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Mobility					
	Contribution					
	Health service utilization					

Godwin (2016)

Mental functions	Quality of life	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Sensory functions and pain

Access

Functions of the

Health service utilization

cardiovascular, haematological, immunological and respiratory systems

Functions of the

digestive, metabolic and endocrine systems

Genitourinary and reproductive functions

Neuromusculoskeletal function

Gozalo (2014)

Mental functions	Assisted living	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Graff (2008)

Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Granbom (2017)

Contribution	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Build and maintain relationships

Graves (2009)		Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Grimmer (2013)		Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Quality of life Mobility	Falls					
Gronstedt (2013)	Neuromusculoskeletal function		Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Gustafsson (2012)	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function						
Haastregt (2000)	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Mobility Contribution					

Haider (2017)

Functions of the digestive, metabolic and endocrine systems	Mobility	Adherence	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Neuromusculoskeletal function		Safety					

Haider (2017)

Functions of the cardiovascular, haematological, immunological and respiratory systems	Mobility	Adherence	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Functions of the digestive, metabolic and endocrine systems							
Neuromusculoskeletal function							

Hall (1992)

Mental functions		Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Hammar (2009)

		Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Hansen (1992)

		Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Hansen (1995)	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Harris (2005)	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Cost-effectiveness					
Harvey (2014)	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Health service utilization					
Hauer (2017)	Falls	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function					
Helbostad (2004)	Adherence	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function					
	Falls					

Hendriks (2008)

Mental functions	Basic needs	Adherence	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life Contribution	Falls					

Herford (2014)

Sensory functions and pain	Basic needs	Cost-effectiveness	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life	Health service utilization					

Hewitt (2018)

Mental functions	Quality of life	Falls	Long-term care	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life						

Neuromusculoskeletal function

Hinrichs (2015)

Functions of the digestive, metabolic and endocrine systems	Mobility	Safety	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Hinrichs (2016)

Neuromusculoskeletal function	Mobility	Adherence	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Safety					

Hoenig (2015)	Mental functions	Mobility	Safety	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Sensory functions and pain							
Holland (2005)		Quality of life	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Houles (2010)	Functions of the cardiovascular, haematological, immunological and respiratory systems	Quality of life						
		Mobility						
Hsu (2016)	Mental functions	Basic needs		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Quality of life						
Hsu (2016)	Mental functions	Mobility		Long-term care	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Hsu (2016)

Mental functions	Quality of life	Long-term care	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Huang (1998)

Mental functions	Safety	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Falls					

Huang (2013)

Mental functions	Caregiver outcomes	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Hughes (1992)

Basic needs	Cost (e.g., out of pocket)	Long-term care	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Cost-effectiveness	Independent living				
	Caregiver outcomes					
	Health service utilization					

Hughes (2000)

Mental functions	Quality of life	Satisfaction of older adult	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Caregiver outcomes	Cost-effectiveness						

Hunger (2015)

Mental functions	Basic needs	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Functions of the
cardiovascular,
haematological,
immunological
and respiratory
systems

Wang
et al. (2016)

Mental functions	Falls	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoske-
letal function

Iliffe (2014)

Neuromusculoske- letal function	Quality of life	Cost (e.g., out of pocket)	Residential home/ apartment	Other	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Imhof (2012)

Quality of life	Health service utilization	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Falls

[illegible]

Joaquim (2017)

Basic needs	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Johansson (2001)

Mental functions	Health service utilization	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Johansson (2003)

Cost-effectiveness	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Health service utilization					

Jolly (2009)

Mental functions	Cost-effectiveness	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Functions of the cardiovascular, haematological, immunological and respiratory systems	Health service utilization					

Kalra (2000)

Basic needs	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Kane (1984)	Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Sensory functions and pain	Learning, grow and make decisions	Caregiver outcomes	Long-term care				
Kanemaru (2010)	Neuromusculoskeletal function	Quality of life		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Kapan (2017)	Mental functions	Basic needs	Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function	Mobility						
Kapan (2017)		Quality of life		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Karinkanta (2007)	Neuromusculoskeletal function	Mobility		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Karlsson (2016)

Mobility	Assisted living	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Kerr (2018)

Mental functions	Quality of life	Independent living	Other	No - assessment of effects by sex/ gender NOT present	RCT
Sensory functions and pain	Mobility				
Functions of the cardiovascular, haematological, immunological and respiratory systems					

Kerse (2010)

Mental functions	Quality of life	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	RCT
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Kim (2011)

Neuromusculoskeletal function	Quality of life	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	RCT

King et al. (2012)

Mental functions	Quality of life	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Mobility

King et al. (2012)

Mental functions	Basic needs	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life

Kjerstad (2016)

Cost-effectiveness	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Klug (2011)

Mental functions	Quality of life	Health service utilization	Residential home/ apartment	Usual care	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Kocic (2018)

Neuromusculoskeletal function	Basic needs	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Kohei (2016)	Neuromusculoskeletal function	Quality of life	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Mobility							
Kono (2004)	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Kono (2012)	Mental functions		Health service utilization	Residential home/apartment	Usual care	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Kono (2013)			Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Health service utilization				
Kono (2014)	Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	RCT
	Quality of life		Health service utilization			No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Kwok (2016)

Mental functions	Basic needs	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Sensory functions
and pain

Quality of life
Mobility

Kyrдалen (2014)

Mental functions	Quality of life	Falls	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoskeletal
function

Lam (2018)

Neuromusculoskeletal function	Mobility	Falls	Assisted living	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Lannin (2007)

Basic needs	Health service utilization	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life
Mobility

Latham (2014)

Neuromusculoskeletal function	Adherence	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Falls

Mobility

Safety

Latour (2007)	Mental functions	Quality of life	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
			Health service utilization				
Lattanzio (2001)	Mental functions	Basic needs		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Functions of the cardiovascular, haematological, immunological and respiratory systems	Quality of life					
Leavitt (2018)		Quality of life	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
		Learning, grow and make decisions	Health service utilization				
Lee (2006)	Functions of the cardiovascular, haematological, immunological and respiratory systems	Mobility		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Lenaghan (2007)

Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
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Levine (2012)

Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
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Cost-effectiveness
Health service utilization

Lewin (2013)

Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
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Quality of life

Lewin (2014)

Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
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Health service utilization

Li (2013)

Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
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Li (2015)

Functions of the cardiovascular, haematological, immunological and respiratory systems

Neuromusculoskeletal function

Quality of life

Residential home/apartment

Usual care

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

RCT

Liang (1984)

Basic needs

Health service utilization

Residential home/apartment

Usual care

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

RCT

Quality of life

Mobility

Falls

Liang (1986)

Basic needs

Satisfaction of older adult

Residential home/apartment

Usual care

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

RCT

Quality of life

Health service utilization

Falls

Liddle (1996)

Adaptations to physical environment

Mental functions

Basic needs

Satisfaction of older adult

Residential home/apartment

Usual care

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

RCT

Quality of life

Mobility

Llimatta (2017)

Satisfaction of older adult

Residential home/apartment

Usual care

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

RCT

Lin (2007)	Mental functions	Basic needs	Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function	Quality of life						
		Mobility						
Lin (2010)	Mental functions	Basic needs		Long-term careUsual care		No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the digestive, metabolic and endocrine systems							
Lindegaard-Pedersen (2017)			Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function	Quality of life						
Liu and Lai (2014)	Neuromusculoskeletal function	Basic needs		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Liu (2015)	Mental functions	Basic needs		Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function							
Locher (2013)	Functions of the digestive, metabolic and endocrine systems	Basic needs		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Logan (2004)	Mental functions	Basic needs	Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Lok (2017)	Mental functions	Quality of life		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Sensory functions and pain							
Luck (2013)			Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Falls					

Lyons (2016)	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility Learning, grow and make decisions Build and maintain relationships					
MacIntyre (1999)	Mental functions	Quality of life	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present
	Sensory functions and pain	Build and maintain relationships				No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
Mahoney (2007)			Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present
			Falls			No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
Maiers (2014)	Mental functions		Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present
	Sensory functions and pain Neuromusculoskeletal function					No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Mangione (2005)	Mental functions	Mobility	Adherence	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function							
Mangione et al. (2010)	Neuromusculoskeletal function	Basic needs		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility							
Mann (1999)	Adaptations to physical environment	Mental functions	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	RCT
	Sensory functions and pain	Mobility					No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	
	Contribution Build and maintain relationships							
Marek (2014)	Mental functions	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function							
		Quality of life	Cost-effectiveness					

Markle-Reid (2003)	Mental functions	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Sensory functions and pain	Quality of life Contribution Build and maintain relationships	Cost-effectiveness Caregiver outcomes Health service utilization					
	Mental functions	Basic needs	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Sensory functions and pain	Quality of life Contribution						
Markle-Reid (2010)	Mental functions	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function	Quality of life	Cost-effectiveness Falls					
	Mental functions	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the digestive, metabolic and endocrine systems	Quality of life	Cost-effectiveness Caregiver outcomes					
Markle-Reid et al. (2017)	Mental functions	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the digestive, metabolic and endocrine systems	Quality of life	Cost-effectiveness Caregiver outcomes					

[illegible]

McCorkle (2000)	Mental functions	Basic needs	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Contribution					
McMurdo (1995)	Neuromusculoskeletal function	Basic needs	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Quality of life Mobility					
McWilliam (1999)	Mental functions	Quality of life	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
McWilliam (1999)	Mental functions	Quality of life	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Meisinger (2013)	Mental functions	Basic needs	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the cardiovascular, haematological, immunological and respiratory systems	Quality of life		Health service utilization			

Melin (1992)	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Mobility Contribution Build and maintain relationships						
Melin (1993)		Basic needs		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Mobility Contribution						
Melin (1993)	Mental functions	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Mobility Contribution Build and maintain relationships	Cost-effectiveness Safety Health service utilization					
Melin (1995)		Basic needs	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Mobility	Health service utilization					

Melis (2008)

Mental functions	Basic needs	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Assisted living

Melis (2008)

Mental functions	Basic needs	Usual care	Residential home/apartment	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life
Mobility

Mihalko (1996)

Mental functions	Basic needs	Satisfaction of older adult	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoskeletal function

Miller (2005)

Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Milte (2016)

Quality of life	Cost-effectiveness	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Campbell Collaboration

Morris (2017)

Neuromusculoske- letal function	Quality of life	Cost (e.g., out of pocket)	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Cost-effectiveness							
Falls							

Mortensen
(2016)

Mental functions	Basic needs		Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Neuromusculoske- Contribution letal function							

Mulrow (1994)

Mental functions	Basic needs	Falls	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoske-
letal function

Murphy (2005)

Functions of the cardiovascular, haematological, immunological and respiratory systems	Quality of life		Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Neuromusculoske- Mobility letal function							

Naunton (2003)

Satisfaction of older adult			Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Naylor (1999)	Mental functions	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Naylor (2004)		Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Quality of life	Satisfaction of older adult					
		Health service utilization						
Naylor (2004)		Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Quality of life	Health service utilization					
Nazareth (2001)		Quality of life	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Adherence					
			Health service utilization					

Nct (2005)	Quality of life	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Nct (2006)	Basic needs		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Nct (2011)	Quality of life		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Nct (2011)	Functions of the cardiovascular, haematological, immunological and respiratory systems	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function	Falls					
Nct (2012)	Mental functions	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Nct (2013)

Mental functions	Basic needs	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Functions of the
digestive,
metabolic and
endocrine
systems

Quality of life

Neuromusculoske-
letal function

Build and maintain
relationships

Nct (2014)

Sensory functions and pain	Basic needs	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoske-
letal function

Quality of life

Nct (2014)

Mental functions	Quality of life	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Cost (e.g., out of
pocket)

Neuromusculoske-
letal function

Caregiver outcomes

Health service
utilization

Nct (2014)

Health service utilization	Usual care	Residential home/ apartment	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Nct (2015)

Basic needs	Falls	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Mobility

Nct (2017)

Mental functions	Basic needs	Health service utilization	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Functions of the cardiovascular, haematological, immunological and respiratory systems	Quality of life						
Functions of the digestive, metabolic and endocrine systems	Mobility						
	Learning, grow and make decisions Build and maintain relationships						

Nct (2017)

Mental functions	Basic needs	Falls	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Mobility						
Neuromusculoske- letal function							

Nct (2017)	Mental functions	Mobility	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
							RCT
Nct (2017)	Mental functions	Quality of life	Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
		Contribution Build and maintain relationships		Long-term care			RCT
Nct (2018)	Mental functions	Quality of life	Safety	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Neuromusculoskeletal function						
Nct (2018)	Neuromusculoskeletal function	Mobility	Adherence	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
			Cost-effectiveness Health service utilization Falls				RCT
Neumann (2017)		Basic needs		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Nicolaides-Bouman (2004)	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life							
Nielsen (1972)	Quality of life							
			Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Nikolaus (1999)	Basic needs	Cost (e.g., out of pocket)		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life	Satisfaction of older adult	Health service utilization	Long-term care				
Nikolaus (2003)								
		Falls		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Nobili (2004)	Mental functions	Caregiver outcomes		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Nowalk (2001)	Mental functions	Mobility	Falls	Long-term care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function						
Oerikild (2011)	Mental functions	Quality of life		Residential home/ apartment	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the cardiovascular, haematological, immunological and respiratory systems	Mobility		Usual care			
Oerikild (2012)	Mental functions	Basic needs		Residential home/ apartment	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the cardiovascular, haematological, immunological and respiratory systems	Quality of life					
Olaleye (2014)	Functions of the digestive, metabolic and endocrine systems	Mobility					
	Neuromusculoskeletal function	Basic needs		Residential home/ apartment	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Mobility		Other			

Olesen (2014)	Adherence		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Health service utilization						
Olson (2011)	Neuromusculoskeletal function	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Oosting (2012)	Sensory functions and pain	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function Mobility	Adherence					
Orrell (2017)	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life Communication	Cost-effectiveness Caregiver outcomes					

Ouslander (2005)	Mental functions	Basic needs	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Genitourinary and Mobility reproductive functions						
	Neuromusculoskeletal function						
Özdemir (2001)	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function						
Padala (2017)	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function						
Padula (2009)	Mental functions	Basic needs	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the cardiovascular, haematological, immunological and respiratory systems	Quality of life					
	Neuromusculoskeletal function						

Papaoannou (2003)	Mental functions	Quality of life	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function	Mobility					
Pardessus (2002)		Basic needs	Health service utilization	Residential home/apartment	Other	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Falls				
Parker (2009)	Mental functions	Basic needs	Assisted living	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Mobility					
Parker (2011)	Mental functions	Basic needs	Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Health service utilization				
Parsons et al. (2013)	Neuromusculoskeletal function	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Parsons (2017)

Mental functions	Basic needs	Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Quality of life	Health service utilization					

Patterson (2009)

Mental functions	Quality of life		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Pedersen (2016)

Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life						

Peeters (2007)

Basic needs	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Quality of life						

Pizzi (2014)

Cost-effectiveness	Race, ethnicity, culture, language	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Portegijs (2013)	Sensory functions and pain	Mobility	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Prick (2015)	Mental functions		Adherence	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Caregiver outcomes				
			Other				
Pröfener (2016)	Mental functions		Access	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Residential home/apartment				
Radwany (2014)	Mental functions	Quality of life	Health service utilization	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Residential home/apartment				
Rasmussen (2016)	Mental functions	Basic needs	Cost-effectiveness	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
			Residential home/apartment				
	Functions of the digestive, metabolic and endocrine systems	Quality of life					
	Neuromusculoskeletal function	Mobility					

Ray (1997)

Falls	Assisted living	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Reckrey (2018)

Mental functions	Quality of life	Satisfaction of older adult	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain		Health service utilization					
Functions of the cardiovascular, haematological, immunological and respiratory systems							

Reeves (2004)

Mental functions	Basic needs	Health service utilization	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Quality of life						

Regan (2017)

Mental functions	Quality of life	Satisfaction of older adult	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Caregiver outcomes					

Resnick (2009)

Neuromusculoskeletal function	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life
Mobility

Richards (1998)

Neuromusculoskeletal function	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life
Contribution

Robertson et al. (2001)

Cost-effectiveness	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Falls

Roderick (2001)

Mental functions	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Cost-effectiveness

Quality of life
Mobility
Contribution

Rosendahl (2006)

Mental functions	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoskeletal function

Rosstad (2017)	Quality of life					
	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
Rossum (1993)	Mental functions	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
		Health service utilization				
Rubenstein (1994)	Mental functions	Health service utilization	Residential home/apartment	Independent living	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Basic needs					
Runciman (1996)	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
		Health service utilization				
Ryan (2006)	Mental functions		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Basic needs					
	Quality of life Build and maintain relationships					

Ryter (2010)

Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Satisfaction of older adult
Cost-effectiveness
Health service utilization

Sackley (2007)

Mobility	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Sackley (2009)

Mental functions	Basic needs	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Mobility

Sackley (2015)

Adaptations to physical environment	Mental functions	Basic needs	Cost-effectiveness	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Quality of life
Mobility

Safety
Falls

Sahlen (2016)

Quality of life	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Salminen (2009)	Basic needs	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life	Falls	Assisted living				
	Mobility						
Salpakoski (2014)	Sensory functions and pain		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function						
Samus (2014)	Mental functions	Quality of life	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sandberg (2015)	Neuromusculoskeletal function	Basic needs	Cost (e.g., out of pocket)	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life	Satisfaction of older adult	Assisted living				
	Cost-effectiveness						
Sandberg (2015)		Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT

Sanford (2006)

Basic needs	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Schnelle (1996)

Neuromusculoskeletal function	Safety	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Schnelle (2010)

Mental functions	Mobility	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Functions of the
digestive,
metabolic and
endocrine
systems

Genitourinary and
reproductive
functions

Neuromusculoskeletal function

Seidl (2015)

Sensory functions and pain	Quality of life	Cost-effectiveness	Residential home/ apartment	Usual care	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Senior (2014)

Mental functions	Basic needs	Caregiver outcomes	Residential home/ apartment	Usual care	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Quality of life	Health service utilization	Independent living			

Serra-Rexach (2011)	Neuromusculoskeletal function	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sheffield (2013)	Adaptations to physical environment	Mental functions	Basic needs	Cost-effectiveness	Residential home/apartment	Usual care
		Quality of life	Falls			
Shepperd and Iliffe (1998)		Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
		Health service utilization				
Shepperd and Iliffe (1998)	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Quality of life	Health service utilization				
Shepperd (2017)	Mental functions	Satisfaction of older adult	Independent living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
		Health service utilization	Assisted living			

Sherman (2016)

Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Mobility						
Functions of the cardiovascular, haematological, immunological and respiratory systems	Communication						
Functions of the digestive, metabolic and endocrine systems							
Integumentary system							

Sherrington (2015)

Neuromusculoskeletal function	Basic needs	Adherence	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life	Safety					
	Mobility	Health service utilization					
	Contribution	Falls					

Sherrington (2016)

Mental functions	Basic needs	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Quality of life	Safety					
Neuromusculoskeletal function	Mobility	Health service utilization					
Falls							

Shyu (2008)	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
Caregiver outcomes					
Shyu (2016)	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
Siggeirsdottir (2005)	Sensory functions and pain	Quality of life	Residential home/apartment	Usual care	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
Neuromusculoskeletal function					
Simmons (2002)	Sensory functions and pain	Mobility	Assisted living	Other	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
Simmons (2005)	Genitourinary and reproductive functions	Quality of life	Satisfaction of older adult	Long-term care	Usual care
Mobility					
No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status					

Sloane (2004)

Mental functions	Basic needs	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Integumentary system

Steele (2008)

Basic needs	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Mobility

Steinberg (2009)

Mental functions	Basic needs	Caregiver outcomes	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoskeletal function

Mobility

Steinmacker et al. (2007)

Mental functions	Quality of life	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Sensory functions and pain

Stevens (2001)

Adaptations to physical environment	Falls	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Stevens-Lapsley (2016)	Neuromusculoskeletal function	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Stewart et al. (2005)	Mental functions	Caregiver outcomes	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Stewart (2012)	Quality of life	Cost (e.g., out of pocket)	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Stuck et al. (1995)		Cost-effectiveness Health service utilization					
Stuck et al. (1995)	Basic needs	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Health service utilization					

Stuck (2000)

Mental functions	Basic needs	Cost-effectiveness	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Neuromusculoske- letal function		Health service utilization					

Suominen (2015)

Functions of the digestive, metabolic and endocrine systems	Quality of life	Falls	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Suttanon (2013)

Neuromusculoske- letal function	Quality of life	Adherence	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility	Caregiver outcomes					
		Falls					

Szanton (2014)

Neuromusculoske- letal function	Basic needs	Cost-effectiveness	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility	Health service utilization					

Talley (2017)

Genitourinary and reproductive functions	Basic needs		Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Neuromusculoske- letal function	Mobility						

Taube (2017)	Mental functions	Quality of life	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
Thomas (2016)	Mental functions			Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
					Social capital		
Thomas (2018)			Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
Thygesen (2015)			Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
Tibaldi (2004)	Mental functions		Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status
Tibaldi (2009)	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of RCT effects across any other PROGRESS characteristics? For example, socioeconomic status

Tinetti (1999)	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Contribution Build and maintain relationships					
Toots (2017)	Mental functions	Assisted living	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Townsend (1988)	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
		Cost-effectiveness				
Tsaih (2011)	Neuromusculoskeletal function	Long-term care	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility	Assisted living				

Tseng (2016)

Mental functions	Quality of life	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Sensory functions
and pain
Functions of the
digestive,
metabolic and
endocrine
systems

Tsuchihashi-
Makaya
(2013)

Mental functions	Quality of life	Health service utilization	Residential home/ apartment	Usual care	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Turunen (2017)

Sensory functions and pain	Mobility	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoske-
letal function

Underwood
(2013)

Mental functions	Quality of life	Assisted living	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Sensory functions
and pain

Contribution

Valdes (2015)	Sensory functions and pain	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT		
	Neuromusculoskeletal function							
Van Der Pols-Vijlbrief (2016)	Mental functions	Basic needs	Cost-effectiveness	Assisted living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Functions of the digestive, metabolic and endocrine systems	Quality of life	Health service utilization					
	Neuromusculoskeletal function	Mobility						
van Haastregt (2000)	Mental functions	Basic needs	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Neuromusculoskeletal function	Mobility						
		Contribution						
van Hout (2010)	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT	

van Houten (2007)	Genitourinary and Basic needs reproductive functions	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Vass (2007)		Health service utilization	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
Verweij (2018)	Mental functions	Adherence	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Quality of life					
	Health service utilization	Caregiver outcomes				
Vogler (2009)	Mental functions	Safety	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
	Neuromusculoskeletal function	Falls	Independent living			
	Mobility					
Weir (1998)	Basic needs	Satisfaction of older adult	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
		Cost-effectiveness				
		Caregiver outcomes				

Whitehead
(2014)

Basic needs	Cost-effectiveness	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Quality of life	Health service utilization					

Wilhelmson
(2013)

Mental functions	Basic needs	Satisfaction of older adult	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Financial security and stability Build and maintain relationships						

Wilson (2009)

Basic needs		Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Wishart (2000)

Basic needs	Satisfaction of older adult	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Quality of life	Cost-effectiveness Caregiver outcomes Health service utilization					

Wisniewska-
Szurlej (2017)

Mental functions	Quality of life	Assisted living	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
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Neuromusculoskeletal function

Wong (2015)

Mental functions	Basic needs	Satisfaction of older adult	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life	Health service utilization					

Wong (2016)

Mental functions	Basic needs	Satisfaction of older adult	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Quality of life	Health service utilization					

Wylie (2017)

Neuromusculoskeletal function	Basic needs	Adherence	Assisted living	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Quality of life	Falls					
	Mobility						

Young (1992)

Mental functions	Basic needs	Caregiver outcomes	Residential home/ apartment	Other	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
Sensory functions and pain	Mobility						
Neuromusculoskeletal function	Contribution						

Ziden (2008)	Basic needs	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Mobility Contribution						

Ziden (2010)	Mental functions	Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Basic needs						
	Neuromusculoskeletal function						

Ziden (2014)	Mental functions	Falls	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Basic needs						
	Neuromusculoskeletal function						

Zimmer (1985)	Cost (e.g., out of pocket)		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	RCT
	Health service utilization						

Abdulla (2013)	Adaptations to physical environment	Mental functions	Basic needs	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Sensory functions and pain	Quality of life						
	Neuromusculoskeletal function							
Allen et al. (2014)				Cost (e.g., out of pocket)	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
				Satisfaction of older adult				
				Caregiver outcomes				
				Safety				
				Health service utilization				
Andy (2016)			Basic needs	Satisfaction of older adult	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	High quality SR
			Quality of life	Cost-effectiveness				
				Health service utilization				
Apostolo (2018)			Basic needs	Cost (e.g., out of pocket)	Assisted living	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
			Mental functions					
			Neuromusculoskeletal function	Cost-effectiveness				
			Caregiver outcomes					

Baldwin (2011)	Functions of the cardiovascular, haematological, immunological and respiratory systems Functions of the digestive, metabolic and endocrine systems	Quality of life	Cost-effectiveness	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Planned but not reported	High quality SR
Baxter (2016)	Neuromusculoskeletal function	Basic needs		Independent living	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Berger (2013)	Adaptations to physical environment	Contribution		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Beswick (2010)		Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Blythe (2009)	Mental functions		Falls	Assisted living	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR

Bryant-Lukosius (2015)	Quality of life	Cost (e.g., out of pocket)	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
		Satisfaction of older adult Cost-effectiveness Caregiver outcomes Health service utilization					
Bula (2011)	Neuromusculoskeletal function	Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Functions of the digestive, metabolic and endocrine systems	Assisted living	Other		No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Burns (2001)		Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	High quality SR
	Mental functions	Adherence	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Burton (2015)	Neuromusculoskeletal function	Falls					

Burton (2015)	Neuromusculoskeletal function	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Mobility						
Cadore (2013)	Neuromusculoskeletal function	Falls	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Other						
Candy (2011)	Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderately low quality SR
		Long-term care Assisted living				
Cattan (2005)	Mental functions	Build and maintain relationships	Residential home/apartment	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Independent living						
Chiung-Ju (2013)	Basic needs	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR

Chou (2012)

Neuromusculoskeletal function	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Clarkson (2018)

Mental functions	Quality of life		Health service utilization	Residential home/apartment	Usual care
	Basic needs	Assisted living			

Neuromusculoskeletal function

Clegg (2012)

Neuromusculoskeletal function	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Quality of life
Mobility

Falls

Cobban (2012)

Functions of the digestive, metabolic and endocrine systems	Long-term care	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
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Assisted living

Cochrane (2014)

Basic needs	Satisfaction of older adult	Residential home/apartment	No - assessment of effects by sex/gender NOT present	Planned but not reported	High quality SR
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Quality of life

Cost-effectiveness
Health service utilization

Corrieri (2011)	Cost-effectiveness	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Falls					
Crocker (2013)	Mental functions	Basic needs	Long-term care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Neuromusculoskeletal function					
Daniels (2008)	Neuromusculoskeletal function	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	Low/critically low quality SR
Davis (2015)	Mental functions	Quality of life	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present
	Caregiver outcomes					Low/critically low quality SR
	Health service utilization					
	Cost-effectiveness					No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status
De Coninck (2017)	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	Moderate quality SR
						No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

de Vries (2012)

Neuromusculoskeletal function

Residential home/apartment

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Low/critically low quality SR

Mobility

Desheng (2018)

Sensory functions and pain

Health service utilization

Residential home/apartment

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Low/critically low quality SR

Dickens (2011)

Mental functions

Residential home/apartment

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Moderate quality SR

Independent living

Assisted living

Eklund (2009)

Caregiver outcomes

Residential home/apartment

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Low/critically low quality SR

Health service utilization

Elkan (2001)

Mental functions

Health service utilization

Residential home/apartment

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Low/critically low quality SR

Evans (2003)	Neuromusculoskeletal function	Independent living	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
			Assisted living			
Fletcher-Smith (2013)	Mental functions	Satisfaction of older adult	Long-term care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
	Basic needs	Cost-effectiveness	Usual care			
	Mobility	Health service utilization	Assisted living			
Fomiatti (2013)	Basic needs	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Contribution					
Forbes (2015)	Mental functions	Caregiver outcomes	Residential home/apartment	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
	Basic needs	Health service utilization	Long-term care			
			Other			
			Assisted living			
Franck (2016)	Mental functions	Assisted living		No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR

Gillespie (2012)	Adaptations to physical environment	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
		Safety	Independent living				
		Falls					
Gine-Garriga (2014)	Neuromusculoskeletal function		Residential home/apartment		No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Mobility						
Golding-Day (2017)	Adaptations to physical environment	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
		Quality of life Caregiver outcomes Health service utilization Falls					
		Cost-effectiveness					
Gomes (2013)	Sensory functions and pain	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
		Satisfaction of older adult Cost-effectiveness Caregiver outcomes					

Grant (2014)

Mental functions	Basic needs	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	High quality SR
					No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	

Quality of life

Falls

Graybill (2014)

Adaptations to physical environment	Sensory functions and pain	Basic needs	Cost-effectiveness	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Low/critically low quality SR
						No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	

Quality of life

Hall (2011)

Sensory functions and pain	Quality of life	Satisfaction of older adult	Long-term care	Usual care	No - assessment of effects by sex/gender NOT present	Moderate quality SR
					No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	

Independent living
Assisted living

Handoll (2009)

Mental functions	Basic needs	Adherence	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Moderate quality SR
					No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	
	Quality of life	Cost-effectiveness Caregiver outcomes Health service utilization	Assisted living			

Handoll (2015)

Sensory functions and pain	Basic needs	Cost (e.g., out of pocket)	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	High quality SR
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Neuromusculoskeletal function
Adherence

Satisfaction of older adult

Hill (2015)

Mental functions	Basic needs	Adherence	Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
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Neuromusculoskeletal function

Falls

Other

Hobbs (2013)

Neuromusculoskeletal function			Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
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Other

Howe (2011)

Neuromusculoskeletal function	Mobility	Adherence	Residential home/ apartment	Other	Planned but not reported	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	High quality SR
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Independent living

Assisted living

Hunter (2018)

Basic needs			Residential home/ apartment	Usual care	No - assessment of effects by sex/ gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
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Huss (2008)	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR		
Jane (2017)	Adaptations to physical environment	Mental functions	Basic needs	Cost-effectiveness	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Kang-Yi (2010)	Mental functions	Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR		
Konno (2011)	Mental functions	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR		
Konno (2013)	Mental functions	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR		
		Caregiver outcomes	Assisted living						

Konno (2014)

Mental functions	Assisted living	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Kurz (2011)

Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Quality of life	Caregiver outcomes	Assisted living				

Lacroix (2017)

Neuromusculoskeletal function			Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Legg (2004)

Mental functions	Basic needs	Caregiver outcomes	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Quality of life	Health service utilization					

Legg (2017)

Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	High/critically low quality SR
	Quality of life	Caregiver outcomes	Health service utilization				

Lewis (2017)	Neuromusculoskeletal function	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
Falls							

Liimatta (2016)	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Quality of life	Cost-effectiveness Health service utilization					

Liu (2015)	Mental functions		Long-term care	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Functions of the digestive, metabolic and endocrine systems						

Liu (2018)	Basic needs		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Low (2011)	Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Sensory functions and pain	Quality of life	Caregiver outcomes					
Martin (2011)	Build and maintain relationships	Health service utilization						
	Mental functions			Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
Mayo-Wilson (2014)				Independent living				
	Mental functions	Basic needs	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
McClure (2005)		Quality of life	Falls					
			Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR

McWilliam (2000)	Basic needs	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Quality of life Build and maintain relationships		Assisted living				
Meinck (2004)	Mental functions	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Montgomery (2008)	Mental functions	Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Moderate quality SR
	Sensory functions and pain	Quality of life	Satisfaction of older adult				
	Neuromusculoskeletal function	Contribution	Cost-effectiveness				
		Build and maintain relationships	Health service utilization				
Munk (2016)	Neuromusculoskeletal function	Basic needs	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Moderate quality SR
	Quality of life						

Oliver (2007)		Falls	Long-term care	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Outpatient (2003)							
	Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	Moderate quality SR
		Quality of life	Caregiver outcomes				
			Health service utilization				
Ozdemir (2017)	Sensory functions and pain	Basic needs		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Low/critically low quality SR
		Quality of life					
Patterson (1999)							
			Cost (e.g., out of pocket)	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Low/critically low quality SR
			Access				
Pitkala (2013)	Neuromusculoskeletal function	Basic needs		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Low/critically low quality SR
		Mobility		Assisted living			

Poscia (2018)

Mental functions	Quality of life	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Neuromusculoskeletal function	Build and maintain relationships	Assisted living				

Potter (2011)

Mental functions	Quality of life	Falls	Residential home/apartment	Other	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Neuromusculoskeletal function			Assisted living			

Reilly (2015)

Mental functions	Basic needs	Caregiver outcomes	Residential home/apartment	Other	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	High quality SR
	Quality of life	Health service utilization	Assisted living			

Renz (2017)

	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
	Quality of life	Falls				

Resnick (2016)

Mental functions	Basic needs		Residential home/apartment	Other	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Neuromusculoskeletal function			Assisted living			

Roe (2015)	Genitourinary and reproductive functions	Assisted living	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Roets-Merken (2015)	Sensory functions and pain	Residential home/apartment		No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Santomassino (2012)		Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Low/critically low quality SR
Sean (2014)		Health service utilization				
	Mental functions	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	High quality SR
		Quality of life				
		Falls				
Shaw (2009)		Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	Low/critically low quality SR
		Cost-effectiveness	Long-term care			
		Caregiver outcomes				

Shepperd (2005)

Mental functions	Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
Neuromusculoskeletal function	Caregiver outcomes Health service utilization					

Shepperd (2011)

Mental functions	Quality of life	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
Sensory functions and pain Functions of the digestive, metabolic and endocrine systems	Health service utilization		Other			

Shepperd (2016)

Mental functions	Quality of life	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
	Cost (e.g., out of pocket)					
	Satisfaction of older adult Health service utilization					

Shvedko (2018)

Mental functions	Quality of life	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
	Social capital					
	Build and maintain relationships					

Simek (2012)

Adherence	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
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Falls

Sims-

Gould (2017)

Neuromusculoskeletal function	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
Build and maintain relationships	Assisted living					

Skelton (2013)

Adaptations to physical environment	Mental functions	Quality of life	Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	High quality SR
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Smeeth (2006)

Sensory functions and pain				Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
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Smith (2016)

Mental functions	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	High quality SR
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Quality of life

Adherence
Cost-effectiveness
Access
Health service utilization

Stall (2014)

Quality of life	Cost (e.g., out of pocket)	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Satisfaction of older adult
Cost-effectiveness
Caregiver outcomes
Health service utilization

Steultjens (2004)

Mental functions	Basic needs	Health service utilization	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Sensory functions and pain

Quality of life

Build and maintain relationships

Falls

Steultjens (2004)

Mental functions	Basic needs	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Sensory functions and pain

Quality of life

Neuromusculoskeletal function

Falls

Stolee (2012)

Mental functions	Quality of life		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Stuck (2002)

Basic needs	Health service utilization	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Talley (2011)

Genitourinary and Quality of life reproductive functions		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Tappenden (2012)

Mental functions	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
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Cost-effectiveness
Health service utilization
Falls

Therapy-based rehabilitation... (2003)

Mental functions	Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Quality of life	Caregiver outcomes	Independent living				
	Health service utilization					

Thiebaud (2014)

Neuromusculoskeletal function		Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
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Mobility

Toles (2016)	Basic needs	Satisfaction of older adult	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Moderate quality SR
	Quality of life	Health service utilization	Assisted living				
Tseng (2011)	Mental functions		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Vaapio (2009)	Quality of life		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
			Assisted living				
van Abbema (2015)	Neuromusculoskeletal function		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Van Citters (2004)	Mental functions		Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR

Ward (2003)

Basic needs	Satisfaction of older adult	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Quality of life	Cost-effectiveness Health service utilization	Long-term care Independent living Assisted living				

Watanabe (2015)

Sensory functions and pain	Basic needs	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	
Quality of life Mobility						

Weber (2018)

Mental functions	Mobility	Falls	Residential home/apartment	Other	No - assessment of effects by sex/gender NOT present	Moderate quality SR
Neuromusculoskeletal function						

Winkel (2008)

Basic needs	Cost (e.g., out of pocket)	Residential home/apartment	Usual care	No - assessment of effects by sex/gender NOT present	No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status	Low/critically low quality SR
Quality of life	Satisfaction of older adult Access Safety					

Yi (2015)

Integumentary system

Long-term careOther

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Assisted living

Young (2017)

Quality of life

Satisfaction of older adult

Residential home/apartment

Usual care

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

High quality SR

Long-term care

Health service utilization

Zhu (2013)

Functions of the digestive, metabolic and endocrine systems

Residential home/apartment

Other

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Low/critically low quality SR

Zubala (2017)

Mental functions

Adherence

Residential home/apartment

Other

No - assessment of effects by sex/gender NOT present

No - assessment of effects across any other PROGRESS characteristics? For example, socioeconomic status

Moderate quality SR

Neuromusculoskeletal function

Independent living

Assisted living

EXCLUDED STUDIES

Study	Reason for Exclusion
Aasgaard et al. (2012)	EXCLUDE on study design
Abrisqueta-Gomez et al. (2013)	EXCLUDE on study design
Aceros et al. (2016)	EXCLUDE on intervention
Achterberg (2016)	EXCLUDE on intervention
Acierno et al. (2017)	EXCLUDE on target group
Acorn (2008)	EXCLUDE on study design
Adachi et al. (2001)	EXCLUDE on intervention
Ades et al. (2003)	EXCLUDE on intervention
Afifi et al. (2014)	EXCLUDE on study design
Agmon and Embon-Magal (2018)	EXCLUDE on setting
Agree (1999)	EXCLUDE on study design
Agree et al. (2005)	EXCLUDE on study design
Aguado et al. (2010)	EXCLUDE on intervention
Aguglia et al. (2004)	EXCLUDE on intervention
Aguila (2006)	EXCLUDE on study design
Ahlner-Elmqvist et al. (2008)	EXCLUDE on study design
Ahmad (2016)	EXCLUDE on intervention
Ahmad (2018)	EXCLUDE on intervention
Aiken et al. (2006)	EXCLUDE on target group
Åkesson et al. (2018)	EXCLUDE on setting
Akiyama (2011)	EXCLUDE on study design
Albertsen (2011)	EXCLUDE on intervention
Albornos-Muñoz et al. (2018)	EXCLUDE on setting
Alessi et al. (1997)	EXCLUDE on study design
Alkan et al. (2011)	EXCLUDE on intervention
Allred et al. (2013)	EXCLUDE on intervention
Allen (1996)	EXCLUDE on study design
Allen (1999)	EXCLUDE on study design
Allen et al. (2012)	EXCLUDE on study design
Allen et al. (2014)	EXCLUDE on intervention
Allen et al. (2014)	EXCLUDE on intervention
Al-Sari et al. (2018)	EXCLUDE on intervention
Anderson et al. (2012)	EXCLUDE on setting
Antoniak and Greig (2017)	EXCLUDE on setting
Anttila et al. (2011)	EXCLUDE on study design
Anttila et al. (2012)	EXCLUDE on study design
Aoun et al. (2015)	EXCLUDE on study design
Apóstolo (2016)	EXCLUDE on intervention
Applebaum and Phillips (1990)	EXCLUDE on study design
Applegate (1991)	EXCLUDE on study design
Arai et al. (2007)	EXCLUDE on setting
Aranda (1974)	EXCLUDE on study design

Arbesman and Mosley (2012)	EXCLUDE on setting
Arean et al. (2008)	EXCLUDE on setting
Arif et al. (2014)	EXCLUDE on study design
Armstrong et al. (2016)	EXCLUDE on study design
Arnall et al. (2012)	EXCLUDE on setting
Aronson and Neysmith (1996)	EXCLUDE on study design
Arthur (2000)	EXCLUDE on intervention
Ashok (2017)	EXCLUDE on study design
Ashworth et al. (2005)	EXCLUDE on target group
Assumpção (2014)	EXCLUDE on study design
Atienza (2001)	EXCLUDE on study design
Auger et al. (2008)	EXCLUDE on target group
Bahar-Fuchs et al. (2017)	EXCLUDE on intervention
Bainbridge et al. (2016)	EXCLUDE on target group
Baker et al. (2001)	EXCLUDE on target group
Baker et al. (2016)	EXCLUDE on intervention
Bakker et al. (2011)	EXCLUDE on intervention
Baldwin et al. (2016)	EXCLUDE on intervention
Barnes et al. (2013)	EXCLUDE on intervention
Bateni and Maki (2005)	EXCLUDE on study design
Bates et al. (2018)	EXCLUDE on intervention
Belqaid et al. (2016)	EXCLUDE on intervention
Bentur et al. (1996)	EXCLUDE on intervention
Best and Solomon (1971)	EXCLUDE on study design
Best et al. (2014)	EXCLUDE on setting
Best et al. (2016)	EXCLUDE on setting
Beurskens (2016)	EXCLUDE on study design
Binder (2004)	EXCLUDE on setting
Bischoff-Ferrari (2017)	EXCLUDE on intervention
Bishop et al. (2015)	EXCLUDE on intervention
Bismuth et al. (2012)	EXCLUDE on intervention
Blackwood et al. (2016)	EXCLUDE on intervention
Blake et al. (2009)	EXCLUDE on setting
Bleijenberg et al. (2013)	EXCLUDE on target group
Bleijenberg et al. (2017)	EXCLUDE on study design
Blohm (1998)	EXCLUDE on intervention
Boland et al. (2017)	EXCLUDE on study design
Bolscher-Niehuis et al. (2016)	EXCLUDE on intervention
Borell (2018)	EXCLUDE on study design
Boucher et al. (2013)	EXCLUDE on study design
Boyd et al. (1996)	EXCLUDE on study design
Braun and Rose (1987)	EXCLUDE on study design
Braun et al. (1991)	EXCLUDE on study design
Brettschneider et al. (2015)	EXCLUDE on study design
Brismee et al. (2007)	EXCLUDE on setting

Britian (1999)	EXCLUDE on study design
Bruun-Olsen et al. (2013)	EXCLUDE on setting
Bull (1994)	EXCLUDE on study design
Cabilan et al. (2013)	EXCLUDE on target group
Caplan et al. (2010)	EXCLUDE on intervention
Cardemil et al. (2013)	EXCLUDE on setting
Carlson et al. (2007)	EXCLUDE on intervention
Carlson et al. (2017)	EXCLUDE on target group
Challis et al. (1991)	EXCLUDE on study design
Chan et al. (2016)	EXCLUDE on setting
Chan et al. (2016)	EXCLUDE on setting
Chan et al. (2017)	EXCLUDE on setting
Chandler and Knackert (1997)	EXCLUDE on study design
Chesbro et al. (2005)	EXCLUDE on intervention
Chiatti et al. (2015)	EXCLUDE on target group
ChiCtr (2013)	EXCLUDE on intervention
Chien et al. (2008)	EXCLUDE on target group
Childress et al. (2008)	EXCLUDE on intervention
Chippendale (2012)	EXCLUDE on intervention
Chiu and Man (2004)	EXCLUDE on intervention
Chiu et al. (2015)	EXCLUDE on study design
Choi et al. (2014)	EXCLUDE on intervention
Chou (2011)	EXCLUDE on setting
Choyce et al. (2017)	EXCLUDE on target group
Chung and Zhao (2016)	EXCLUDE on setting
Cifu (2010)	EXCLUDE on study design
Ciliska et al.(1996)	EXCLUDE on target group
Clark (1998)	EXCLUDE on study design
Clarke and Colantonio (2005)	EXCLUDE on study design
Clegg (2014)	EXCLUDE on intervention
Clemson et al. (2012)	EXCLUDE on intervention
Coleman (1995)	EXCLUDE on study design
Coster et al. (2018)	EXCLUDE on study design
Cumming (2015)	EXCLUDE on setting
Cyarto et al. (2006)	EXCLUDE on study design
Dale and Brown (2006)	EXCLUDE on intervention
Dalton et al. (2018)	EXCLUDE on target group
Danilovich et al. (2017)	EXCLUDE on target group
Dapp et al. (2011)	EXCLUDE on intervention
Davison et al. (2016)	EXCLUDE on intervention
Day (2000)	EXCLUDE on intervention
Day et al. (2012)	EXCLUDE on setting
De Almeida (2015)	EXCLUDE on intervention
De Roos (2018)	EXCLUDE on setting
De van der Schueren (2017)	EXCLUDE on intervention

De Vriendt et al. (2016)	EXCLUDE on setting
De Vries (2016)	EXCLUDE on setting
Delbaere et al. (2006)	EXCLUDE on study design
Dellasega and Zerbe (2002)	EXCLUDE on target group
Der-Fa et al. (2013)	EXCLUDE on intervention
Dohrn et al. (2017)	EXCLUDE on setting
Donaldson (1990)	EXCLUDE on study design
Donaldson and Bond (1991)	EXCLUDE on intervention
Douglas and Lawrence (2015)	EXCLUDE on study design
Douma et al. (2015)	EXCLUDE on intervention
Dozeman et al. (2011)	EXCLUDE on intervention
Dozeman et al. (2012)	EXCLUDE on intervention
Dreizler et al. (2014)	EXCLUDE on study design
Drummond et al. (2013)	EXCLUDE on setting
Duckworth et al. (2013)	EXCLUDE on study design
Dumoulin et al. (2014)	EXCLUDE on intervention
Effectiveness and cost-effectiveness... (2016)	EXCLUDE on study design
Eklund et al. (2013)	EXCLUDE on setting
Elbadawy (2017)	EXCLUDE on setting
El-Khoury et al. (2015)	EXCLUDE on setting
Eloranta (2010)	EXCLUDE on study design
Engberg et al. (1997)	EXCLUDE on study design
Evans (2007)	EXCLUDE on study design
Fahlman et al. (2007)	EXCLUDE on setting
Fairhall et al. (2015)	EXCLUDE on study design
Fanning et al. (2018)	EXCLUDE on setting
Farmer et al. (2006)	EXCLUDE on study design
Feldman et al. (2005)	EXCLUDE on intervention
Fernandez-Barres et al. (2017)	EXCLUDE on intervention
Fields et al. (2014)	EXCLUDE on setting
Finkelstein and Fuller (2012)	EXCLUDE on study design
Fischer et al. (2015)	EXCLUDE on study design
Fitzgerald et al. (1994)	EXCLUDE on setting
Fleet et al. (2014)	EXCLUDE on intervention
Flora and Faulkner (2006)	EXCLUDE on study design
Forbes (2002)	EXCLUDE on study design
Forster et al. (2008)	EXCLUDE on setting
Forster et al. (2017)	EXCLUDE on intervention
Fowler and Kim (2015)	EXCLUDE on study design
Galle et al. (2017)	EXCLUDE on setting
Gary (2006)	EXCLUDE on intervention
Ghassemzadeh et al. (2013)	EXCLUDE on study design
Gianoudis et al. (2011)	EXCLUDE on setting
Gibson (2002)	EXCLUDE on study design
Gielen et al. (2013)	EXCLUDE on intervention

Giesbrecht et al. (2012)	EXCLUDE on study design
Gine-Garriga et al. (2010)	EXCLUDE on setting
Giordano et al. (2016)	EXCLUDE on intervention
Gleeson et al. (2014)	EXCLUDE on intervention
Goedendorp et al. (2017)	EXCLUDE on intervention
Gollub (2002)	EXCLUDE on study design
Gomes (2018)	EXCLUDE on intervention
Gordon (1990)	EXCLUDE on study design
Gosman-Hedstrom et al. (2002)	EXCLUDE on setting
Gothe et al. (2014)	EXCLUDE on setting
Graff et al. (2003)	EXCLUDE on study design
Graham-Phillips et al. (2016)	EXCLUDE on study design
Gray and Sedhom (1997)	EXCLUDE on study design
Griffiths (2000)	EXCLUDE on study design
Griffiths (2013)	EXCLUDE on intervention
Gros et al. (2016)	EXCLUDE on study design
Guidetti et al. (2010)	EXCLUDE on setting
Guidon and McGee (2013)	EXCLUDE on setting
Guitard et al. (2013)	EXCLUDE on intervention
Haines et al. (2009)	EXCLUDE on intervention
Halvarsson et al. (2015)	EXCLUDE on setting
Hariprasad et al. (2013)	EXCLUDE on intervention
Harrison et al. (2008)	EXCLUDE on setting
Hauer (2015)	EXCLUDE on intervention
Hayashi et al. (2011)	EXCLUDE on setting
Healey (2011)	EXCLUDE on setting
Health (2008)	EXCLUDE on intervention
Heneka et al. (2016)	EXCLUDE on setting
Hennig et al. (2012)	EXCLUDE on study design
Henrard (1991)	EXCLUDE on study design
Herke et al. (2018)	EXCLUDE on intervention
Hile et al. (2018)	EXCLUDE on study design
Hinkka et al. (2007)	EXCLUDE on setting
Hinrichs et al. (2011)	EXCLUDE on intervention
Hirsch (2015)	EXCLUDE on study design
Hofstad et al. (2013)	EXCLUDE on study design
Holthe et al. (2018)	EXCLUDE on intervention
Hooper et al. (2014)	EXCLUDE on intervention
Hori et al. (2014)	EXCLUDE on intervention
Hu (2007)	EXCLUDE on intervention
Huang and Acton (2004)	EXCLUDE on intervention
Hughes et al. (1987)	EXCLUDE on study design
Hum et al. (2018)	EXCLUDE on study design
Humbert et al. (2007)	EXCLUDE on study design
Hummel et al. (2017)	EXCLUDE on intervention

Hung et al. (2003)	EXCLUDE on study design
Hussain (2013)	EXCLUDE on intervention
Iecovich (2007)	EXCLUDE on study design
Ifudu et al. (1994)	EXCLUDE on target group
Ilieva et al. (2013)	EXCLUDE on study design
Iliffe, Kendrick, et al. (2015)	EXCLUDE on intervention
Iliffe, Kendrick, et al. (2015)	EXCLUDE on intervention
Intiso et al. (2012)	EXCLUDE on study design
Istvandity (2017)	EXCLUDE on intervention
Iversen (2012)	EXCLUDE on study design
Iyengar et al. (2007)	EXCLUDE on study design
Jacobson et al. (2011)	EXCLUDE on intervention
Jame (2016)	EXCLUDE on intervention
Jansen et al. (2013)	EXCLUDE on setting
Jeon and Jeong (2015)	EXCLUDE on setting
Jessup et al. (2003)	EXCLUDE on setting
Jobe et al. (2001)	EXCLUDE on intervention
Johnen and Schott (2018)	EXCLUDE on study design
Johnson and Cockburn (1988)	EXCLUDE on study design
Joranson et al. (2017)	EXCLUDE on intervention
Jung et al. (2018)	EXCLUDE on intervention
Jyvakorpi et al. (2012)	EXCLUDE on intervention
Kamioka et al. (2004)	EXCLUDE on intervention
Kamioka et al. (2006)	EXCLUDE on intervention
Karlsson et al. (2013)	EXCLUDE on study design
Karmarkar (2009)	EXCLUDE on study design
Karmarkar (2009)	EXCLUDE on study design
Karmarkar et al. (2010)	EXCLUDE on study design
Katzel (2016)	EXCLUDE on setting
Kawagoshi et al. (2015)	EXCLUDE on setting
Keall et al. (2017)	EXCLUDE on intervention
Keeney et al. (2017)	EXCLUDE on study design
Kegelmeyer et al. (2013)	EXCLUDE on study design
Kelly et al. (2014)	EXCLUDE on intervention
Kemmler et al. (2010)	EXCLUDE on intervention
Kendall et al. (2018)	EXCLUDE on setting
Kerschman et al. (1998)	EXCLUDE on study design
Kerski et al. (1987)	EXCLUDE on study design
Kerwin et al. (2012)	EXCLUDE on study design
Kimura (2003)	EXCLUDE on intervention
Kind (2016)	EXCLUDE on intervention
King et al. (2012)	EXCLUDE on study design
Kiosses et al. (2010)	EXCLUDE on intervention
Kiosses et al. (2015)	EXCLUDE on study design
Kiosses et al. (2018)	EXCLUDE on study design

Kolt et al. (2009)	EXCLUDE on intervention
Konick-McMahan et al. (2003)	EXCLUDE on study design
Konno (2012)	EXCLUDE on study design
Kono et al. (2009)	EXCLUDE on study design
Kravitz et al. (1994)	EXCLUDE on study design
Kruse et al. (2013)	EXCLUDE on study design
Kumar et al. (2017)	EXCLUDE on intervention
Kunik et al. (2017)	EXCLUDE on intervention
Kuo et al. (2013)	EXCLUDE on target group
Kuo et al. (2016)	EXCLUDE on target group
Kusumoto et al. (2007)	EXCLUDE on intervention
Lacroix et al. (2016)	EXCLUDE on setting
Lahtinen et al. (2015)	EXCLUDE on setting
Lahtinen et al. (2017)	EXCLUDE on setting
Lai (2004)	EXCLUDE on intervention
Lai (2017)	EXCLUDE on intervention
Lam et al. (2012)	EXCLUDE on setting
Laming (2017)	EXCLUDE on study design
Lapid et al. (2006)	EXCLUDE on setting
Laufer (2002)	EXCLUDE on setting
Leinonen et al. (2007)	EXCLUDE on intervention
Leone et al. (2012)	EXCLUDE on intervention
Leung (2005)	EXCLUDE on study design
Levine and Gitlin (1993)	EXCLUDE on study design
Levy-Storms (2008)	EXCLUDE on study design
Liebel (2008)	EXCLUDE on study design
Lim et al. (2003)	EXCLUDE on setting
Lim et al. (2005)	EXCLUDE on target group
Lin et al. (2012)	EXCLUDE on setting
Lindegaard (2016)	EXCLUDE on study design
Lingler et al. (2014)	EXCLUDE on intervention
Littlewood et al. (2016)	EXCLUDE on intervention
Liu and Lai (2014)	EXCLUDE on setting
Liu and Lai (2014)	EXCLUDE on intervention
Liu et al. (2016)	EXCLUDE on intervention
Livingston et al. (2013)	EXCLUDE on target group
Lord et al. (2003)	EXCLUDE on setting
Low et al. (2013)	EXCLUDE on intervention
Low and Fletcher (2015)	EXCLUDE on study design
Luger et al. (2016)	EXCLUDE on intervention
Lundqvist et al. (2015)	EXCLUDE on study design
Luukinen et al. (2006)	EXCLUDE on intervention
MacNeil (2012)	EXCLUDE on intervention
Madara (2016)	EXCLUDE on target group
Maghsoudi et al. (2015)	EXCLUDE on study design

Majewski et al. (2015)	EXCLUDE on study design
Maki et al. (2008)	EXCLUDE on study design
Mameletzi et al. (2011)	EXCLUDE on setting
Mangione et al. (2010)	EXCLUDE on setting
Marioni et al. (2013)	EXCLUDE on intervention
Markle-Reid et al. (2013)	EXCLUDE on study design
Marston (2007)	EXCLUDE on setting
Martini et al. (2018)	EXCLUDE on setting
Mason et al. (2007)	EXCLUDE on target group
Mazzuca et al. (1997)	EXCLUDE on intervention
McCusker et al. (2001)	EXCLUDE on setting
McEwan (1992)	EXCLUDE on study design
McMillan (2005)	EXCLUDE on study design
McNeil (1995)	EXCLUDE on study design
Mehlhorn et al. (2014)	EXCLUDE on setting
Mehrholz et al. (2015)	EXCLUDE on setting
Mehrholz (2017)	EXCLUDE on setting
Melin (1995)	EXCLUDE on setting
Melis et al. (2005)	EXCLUDE on intervention
Melis et al. (2010)	EXCLUDE on study design
Meng (2004)	EXCLUDE on intervention
Mercadante et al. (2011)	EXCLUDE on study design
Merom et al. (2016)	EXCLUDE on intervention
Messeccar (1999)	EXCLUDE on study design
Messeccar (2003)	EXCLUDE on study design
Michaud and Duchesne (2017)	EXCLUDE on setting
Mikkelsen et al. (2017)	EXCLUDE on study design
Miller et al. (2010)	EXCLUDE on study design
Miriam (2013)	EXCLUDE on study design
Mitchell (1987)	EXCLUDE on study design
Mitseva et al. (2012)	EXCLUDE on study design
Moffa-Trotter and Anemaet (1996)	EXCLUDE on study design
Moholdt et al. (2012)	EXCLUDE on intervention
Molloy et al. (2006)	EXCLUDE on setting
Moniz (2012)	EXCLUDE on intervention
Monteau (2010)	EXCLUDE on study design
Montgomery (2010)	EXCLUDE on setting
Moore et al. (2016)	EXCLUDE on setting
Morag (2017)	EXCLUDE on intervention
Morey et al. (2015)	EXCLUDE on setting
Moriarty et al. (2016)	EXCLUDE on target group
Morin (2017)	EXCLUDE on setting
Mortenson et al. (2013)	EXCLUDE on intervention
Mottram et al. (2007)	EXCLUDE on study design
Mozley et al. (2007)	EXCLUDE on study design

Mozolic et al. (2008)	EXCLUDE on setting
Mukamel et al. (2007)	EXCLUDE on study design
Muller et al. (2014)	EXCLUDE on study design
Mustian et al. (2009)	EXCLUDE on intervention
Nelson et al. (2016)	EXCLUDE on study design
Ness et al. (2018)	EXCLUDE on setting
Neville (2015)	EXCLUDE on setting
Newbury and Marley (2000)	EXCLUDE on study design
Newcomer et al. (1999)	EXCLUDE on target group
Nguyen et al. (2015)	EXCLUDE on study design
Nieman et al. (2017)	EXCLUDE on intervention
Niemelä (2011)	EXCLUDE on setting
Niemela et al. (2012)	EXCLUDE on study design
Nijs et al. (2006)	EXCLUDE on intervention
Nikolaus et al. (1995)	EXCLUDE on intervention
Nikoleitou et al. (2016)	EXCLUDE on intervention
Nilsson et al. (2012)	EXCLUDE on study design
Nishiguchi et al. (2015)	EXCLUDE on setting
Noelker and Bass (1989)	EXCLUDE on study design
Norrbom (1991)	EXCLUDE on intervention
Northey et al. (2018)	EXCLUDE on setting
Nour et al. (2002)	EXCLUDE on intervention
Nourhashemi (2015)	EXCLUDE on setting
Nowak et al. (1998)	EXCLUDE on target group
Oleske and Hauck (1988)	EXCLUDE on intervention
Oliveira et al. (2016)	EXCLUDE on setting
Ollonqvist et al. (2008)	EXCLUDE on setting
Olsen (2016)	EXCLUDE on setting
Orrell et al. (2007)	EXCLUDE on intervention
Orrell et al. (2014)	EXCLUDE on intervention
Ostaszkiwicz (2004)	EXCLUDE on intervention
Ottmann et al. (2013)	EXCLUDE on study design
Overbeek et al. (2018)	EXCLUDE on intervention
Padulo et al. (2018)	EXCLUDE on study design
Palvanen et al. (2012)	EXCLUDE on setting
Pan (2018)	EXCLUDE on setting
Park et al. (2017)	EXCLUDE on intervention
Parlevliet et al. (2010)	EXCLUDE on intervention
Parsons et al. (2013)	EXCLUDE on intervention
Pathy et al. (1992)	EXCLUDE on intervention
Payette et al. (2002)	EXCLUDE on intervention
Pearson et al. (2007)	EXCLUDE on intervention
Pedersen (2005)	EXCLUDE on study design
Perula et al. (2012)	EXCLUDE on setting
Pflaum et al. (2016)	EXCLUDE on study design

PG (1989)	EXCLUDE on study design
Pihl et al. (2011)	EXCLUDE on study design
Pine et al. (2002)	EXCLUDE on study design
Ploeg et al. (2010)	EXCLUDE on intervention
Podd et al. (2015)	EXCLUDE on setting
Pollack (1998)	EXCLUDE on study design
Pollock et al. (2012)	EXCLUDE on setting
Pozet et al. (2016)	EXCLUDE on target group
Pressler (2015)	EXCLUDE on study design
Prizer and Zimmerman (2018)	EXCLUDE on study design
Pynnonen et al. (2018)	EXCLUDE on setting
Ramsay et al. (2011)	EXCLUDE on intervention
Rana et al. (2010)	EXCLUDE on study design
Ranganathan et al. (2012)	EXCLUDE on study design
Rantanen et al. (2012)	EXCLUDE on setting
Ratzka (1986)	EXCLUDE on study design
Redford (1993)	EXCLUDE on study design
Reeder et al. (2013)	EXCLUDE on intervention
Reid and Ploeg (2002)	EXCLUDE on study design
Reid et al. (2017)	EXCLUDE on intervention
Rentschler et al. (2008)	EXCLUDE on study design
Resnick and Galik (2013)	EXCLUDE on study design
Ricauda et al. (2004)	EXCLUDE on setting
Richardson et al. (1989)	EXCLUDE on study design
Rideout (2004)	EXCLUDE on study design
Rizzo et al. (1996)	EXCLUDE on intervention
Robertson et al. (2001)	EXCLUDE on study design
Robinson et al. (2013)	EXCLUDE on setting
Rogers et al. (2018)	EXCLUDE on study design
Romskaug et al. (2017)	EXCLUDE on intervention
Rossi et al. (2014)	EXCLUDE on setting
Routasalo et al. (2009)	EXCLUDE on setting
Rubin et al. (1992)	EXCLUDE on setting
Rudilla et al. (2016)	EXCLUDE on intervention
Ruikes et al. (2016)	EXCLUDE on study design
Ryburn et al. (2009)	EXCLUDE on study design
Rydwik et al. (2010)	EXCLUDE on intervention
Sahota (2016)	EXCLUDE on setting
Sahyoun and Vaudin (2014)	EXCLUDE on study design
Sakurai et al. (2011)	EXCLUDE on setting
Sakurai et al. (2013)	EXCLUDE on setting
Salazar et al. (2000)	EXCLUDE on target group
Sampedro (2015)	EXCLUDE on intervention
Sampson et al. (2009)	EXCLUDE on intervention
Sanford et al. (1995)	EXCLUDE on intervention

Sayers et al. (2003)	EXCLUDE on setting
Schoenmakers et al. (2010)	EXCLUDE on target group
Schoonhoven et al. (2015)	EXCLUDE on intervention
Schwartz et al. (1990)	EXCLUDE on study design
Seitz et al. (2014)	EXCLUDE on study design
Sharpe et al. (2016)	EXCLUDE on setting
Shaw and Page (2008)	EXCLUDE on setting
Sheppard (1998)	EXCLUDE on target group
Shepperd and Iliffe (1998)	EXCLUDE on target group
Sherrington et al. (2004)	EXCLUDE on intervention
Sherwood (1980)	EXCLUDE on study design
Sherwood et al. (1986)	EXCLUDE on study design
Shimada et al. (2017)	EXCLUDE on intervention
Shisheghar et al. (2018)	EXCLUDE on intervention
Sidel et al. (1990)	EXCLUDE on intervention
Signe and Elmstahl (2008)	EXCLUDE on study design
Simmons et al. (1995)	EXCLUDE on study design
Simmons et al. (1996)	EXCLUDE on study design
Singh (2017)	EXCLUDE on setting
Singh (2018)	EXCLUDE on setting
Siragusa et al. (2005)	EXCLUDE on study design
Sjosten et al. (2008)	EXCLUDE on intervention
Sladek et al. (2011)	EXCLUDE on intervention
Smith et al. (2006)	EXCLUDE on study design
Sorensen et al. (2002)	EXCLUDE on target group
Sosnoff et al. (2014)	EXCLUDE on intervention
Sprange et al. (2013)	EXCLUDE on setting
Stark et al. (2017)	EXCLUDE on intervention
Stathi et al. (2018)	EXCLUDE on setting
Stein et al. (1981)	EXCLUDE on study design
Stelmack (2005)	EXCLUDE on intervention
Stenvall et al. (2007)	EXCLUDE on setting
Steultjens and Clemson (2006)	EXCLUDE on study design
Stevens-Lapsley (2016)	EXCLUDE on setting
Stevenson and Gray (1981)	EXCLUDE on study design
Stewart et al. (2005)	EXCLUDE on intervention
Stewart (2006)	EXCLUDE on study design
Stewart et al. (2016)	EXCLUDE on study design
Stolle et al. (2012)	EXCLUDE on intervention
Stoltz (2004)	EXCLUDE on target group
Stow et al. (2015)	EXCLUDE on study design
Straw and Harley (1991)	EXCLUDE on study design
Stuck et al. (1995)	EXCLUDE on study design
Stuck et al. (2007)	EXCLUDE on intervention
Student (2013)	EXCLUDE on target group

Sturkenboom et al. (2016)	EXCLUDE on study design
Sungkarat et al. (2017)	EXCLUDE on setting
Suwanwela et al. (2002)	EXCLUDE on target group
Swank et al. (2011)	EXCLUDE on setting
Tappen and Debra (2014)	EXCLUDE on intervention
Tasiemski et al. (2005)	EXCLUDE on setting
Taule et al. (2015)	EXCLUDE on study design
Tennsleed et al. (1998)	EXCLUDE on intervention
Wolinsky (2011)	EXCLUDE on intervention
Thomas (1989)	EXCLUDE on study design
Thomas et al. (2007)	EXCLUDE on intervention
Thoreau (2015)	EXCLUDE on study design
Thulesius et al. (2002)	EXCLUDE on target group
Tibaek et al. (2014)	EXCLUDE on setting
Tiedemann et al. (2013)	EXCLUDE on setting
Tiedemann et al. (2015)	EXCLUDE on intervention
Tiedemann et al. (2016)	EXCLUDE on intervention
Timonen, Rantanen, Ryyanen, et al. (2002)	EXCLUDE on intervention
Timonen, Rantanen, Ryyanen, et al. (2002)	EXCLUDE on setting
Tinetti et al. (1993)	EXCLUDE on study design
Toevs (2000)	EXCLUDE on study design
Toot et al. (2011)	EXCLUDE on intervention
Torres et al. (2017)	EXCLUDE on intervention
Torres-Arreola et al. (2009)	EXCLUDE on setting
Toseland et al. (1990)	EXCLUDE on target group
Towfighi et al. (2017)	EXCLUDE on target group
Troyer et al. (2010)	EXCLUDE on intervention
Tsai et al. (2017)	EXCLUDE on setting
Tse et al. (2016)	EXCLUDE on study design
Tsuchihashi-Makaya et al. (2011)	EXCLUDE on target group
Ukawa, Satoh, et al. (2012)	EXCLUDE on intervention
Ukawa, Satoh, et al. (2012)	EXCLUDE on study design
Ukawa, Satoh, et al. (2012)	EXCLUDE on intervention
Ukawa (2015)	EXCLUDE on study design
Ullmann and Li (2017)	EXCLUDE on setting
Uy (2008)	EXCLUDE on setting
Vaapio et al. (2007)	EXCLUDE on setting
Vahlberg et al. (2017)	EXCLUDE on setting
van Ginneken et al. (2013)	EXCLUDE on target group
van Hout et al. (2005)	EXCLUDE on intervention
van Mulligen-van (2013)	EXCLUDE on study design
van Ooijen et al. (2013)	EXCLUDE on setting
Van Spall (2018)	EXCLUDE on setting
Vandepitte, Noortgate, et al. (2016)	EXCLUDE on setting
VanDeVelde-Coke (2004)	EXCLUDE on setting

Vass et al. (2004)	EXCLUDE on intervention
Vass (2005)	EXCLUDE on intervention
Venturelli et al. (2010)	EXCLUDE on setting
Verloo et al. (2015)	EXCLUDE on setting
Vetter et al. (1984)	EXCLUDE on intervention
Victor and Vetter (1988)	EXCLUDE on study design
Viswanathan et al. (2007)	EXCLUDE on study design
von Humboldt and Leal (2014)	EXCLUDE on intervention
Wallace et al. (2004)	EXCLUDE on intervention
Wanderley et al. (2015)	EXCLUDE on setting
Wang (2008)	EXCLUDE on study design
Wang et al. (2011)	EXCLUDE on intervention
Wang et al. (2013)	EXCLUDE on intervention
Wang et al. (2016)	EXCLUDE on target group
Wang and Wu (2017)	EXCLUDE on study design
Ward et al. (1978)	EXCLUDE on intervention
Warland and Tønning (1991)	EXCLUDE on study design
Warner et al. (2016)	EXCLUDE on intervention
Waterman et al. (2016)	EXCLUDE on study design
Weiss et al. (2004)	EXCLUDE on study design
Whitehead, Walker, et al. (2016)	EXCLUDE on study design
Whitehead, Walker, et al. (2016)	EXCLUDE on intervention
Whittemore et al. (2014)	EXCLUDE on study design
Whitten and Mickus (2007)	EXCLUDE on intervention
Wilhelmson et al. (2011)	EXCLUDE on intervention
Williams (2013)	EXCLUDE on study design
Williams et al. (2015)	EXCLUDE on study design
Wilson et al. (1999)	EXCLUDE on setting
Wilson and Truman (2005)	EXCLUDE on study design
Winter et al. (2016)	EXCLUDE on target group
Wittwer (2016)	EXCLUDE on intervention
Wong et al. (2014)	EXCLUDE on setting
Wong (2015)	EXCLUDE on study design
Wong et al. (2018)	EXCLUDE on setting
Wongcharoen et al. (2017)	EXCLUDE on intervention
Woolrych (2016)	EXCLUDE on study design
Wu (2007)	EXCLUDE on setting
Wu (2008)	EXCLUDE on target group
Wu (2017)	EXCLUDE on intervention
Wyatt et al. (2004)	EXCLUDE on target group
Wyers et al. (2010)	EXCLUDE on intervention
Xueyu et al. (2017)	EXCLUDE on intervention
Yoon et al. (2018)	EXCLUDE on setting
Yu (2016)	EXCLUDE on setting
Yusif et al. (2016)	EXCLUDE on study design

Yu-Yahiro et al. (2009)	EXCLUDE on study design
Zarit et al. (2017)	EXCLUDE on study design
Zeeuwe et al. (2006)	EXCLUDE on intervention
Zhang et al. (2014)	EXCLUDE on setting
Zhao et al. (2017)	EXCLUDE on study design
Zheng et al. (2016)	EXCLUDE on setting
Zimmer (1984)	EXCLUDE on study design
Zimmer et al. (1990)	EXCLUDE on study design

SOURCES OF SUPPORT

Internal sources

- No sources of support provided

External sources

- World Health Organization (WHO)
- Canadian Institute of Health Research (CIHR), Canada

DATA AND ANALYSES

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SUPPORTING INFORMATION

Additional supporting information may be found online in the Supporting Information section.

How to cite this article: Welch, V., Mathew, C. M., Babelmorad, P., et al. (2021). Health, social care and technological interventions to improve functional ability of older adults living at home: An evidence and gap map. *Campbell Systematic Reviews*, 17, e1175. <https://doi.org/10.1002/cl2.1175>

APPENDIX 1: AGELINE SEARCH STRATEGY

#	Query	Limiters/expanders	Last run via	Results
S117	S114 AND S115 AND S116	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	1620
S116	S97 OR S98 OR S99 OR S100 OR S101 OR S102 OR S103 OR S104 OR S105 OR S106 OR S107 OR S108 OR S109 OR S110 OR S111 OR S112	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	50,309
S115	S63 OR S64 OR S65 OR S66 OR S67 OR S68 OR S69 OR S70 OR S71 OR S72 OR S73 OR S74 OR S75 OR S76 OR S77 OR S78 OR S79 OR S80 OR S81 OR S82 OR S83 OR S84 OR S85 OR S86 OR S87 OR S88 OR S89 OR S90 OR S91 OR S92 OR S93 OR S94 OR S95 OR S96	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	76,717
S114	S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21 OR S22 OR S23 OR S24 OR S25 OR S26 OR S27 OR S28 OR S29 OR S30 OR S31 OR S32 OR S33 OR S34 OR S35 OR S36 OR S37 OR S38 OR S39 OR S40 OR S41 OR S42 OR S43 OR S44 OR S45 OR S46 OR S47 OR S48 OR S49 OR S50 OR S51 OR S52 OR S53 OR S54 OR S55 OR S56 OR S57 OR S58 OR S59 OR S60 OR S61 OR S62	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	9488
S113	S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11 OR S12	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	105,340
S112	AB "usual care" or "usual practices"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	472
S111	AB groups	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	36,075
S110	TI trial OR AB trial	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	4922
S109	TI randomly OR AB randomly	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	2580
S108	TI randomized OR AB randomized	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	2866
S107	TI controlled N study OR AB controlled N2 study	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	347
S106	DE "Randomized Controlled Trials" OR DE "Controlled Clinical Trials"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	2002
S105	AB medline	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	745
S104	AB pubmed	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	363
S103	TI overview OR AB overview	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	3185
S102	TI evidence N2 synthesi* OR AB evidence N2 synthesi*	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	44

S101	TI review	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	2612
S100	AB review* and (literature or studies or trials)	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	8168
S99	TI (meta-analysis or metaanalysis) OR AB (meta-analysis or metaanalysis)	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	697
S98	TI (meta-analysis or metaanalysis) OR (meta-analysis or metaanalysis)	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	870
S97	TI systematic* OR AB systematic*	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	2823
S96	TI institutionalization OR AB institutionalization	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	1701
S95	TI reablement OR AB reablement	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	8
S94	TI adherence OR AB adherence	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	1010
S93	TI satisfaction OR AB satisfaction	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	6127
S92	TI relationships OR AB relationships	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	20,928
S91	TI security OR AB security	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	9802
S90	TI "community life" OR AB "community life"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	106
S89	TI mobility OR AB mobility	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	3638
S88	TI "self efficacy" OR AB "self efficacy"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	1155
S87	TI "self care" OR AB "self care"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	1221
S86	TI tiredness OR AB tiredness	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	72
S85	TI fatigue OR AB fatigue	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	678
S84	TI energy OR AB energy	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	1789
S83	TI vitality OR AB vitality	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	391

S82	TI distress OR AB distress	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	1763
S81	TI pain OR AB pain	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	3778
S80	TI "sensory function*" OR AB "sensory function"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	91
S79	TI cognitive OR AB cognitive	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	16,478
S78	TI depression OR AB depression	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	12,698
S77	TI "functional ability" OR AB "functional ability"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	865
S76	TI "mental health" OR AB "mental health"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	6757
S75	TI (happiness or happier) OR AB (happiness or happier)	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	755
S74	TI "social participation" OR AB "social participation"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	315
S73	TI "social life" OR AB "social life"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	343
S72	TI wellbeing OR AB wellbeing	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	328
S71	TI independence OR AB independence	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	3181
S70	TI "quality of life" OR AB "quality of life"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	6388
S69	TI "activities of daily living" OR AB "activities of daily living"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	4863
S68	DE "Quality of Life"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	5646
S67	DE "Functional Ability"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	3318
S66	DE "Leisure Activities" OR DE "Games" OR DE "Hobbies" OR DE "Reading" OR DE "Recreation" OR DE "Travel"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	3271
S65	DE "Instrumental Activities of Daily Living"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	676
S64	DE "Daily Activities"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	394

S63	DE "Activities of Daily Living"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	3306
S62	TI ((kitchen or bathroom or bedroom)) OR AB ((kitchen or bathroom or bedroom))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	662
S61	TI (medication N2 reminders) OR AB (medication N2 reminders)	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	21
S60	TI "foot care" OR AB "foot care"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	56
S59	TI toileting OR AB toileting	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	268
S58	TI "personal hygiene" OR AB "personal hygiene"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	85
S57	TI grooming OR AB grooming	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	151
S56	TI bathing OR AB bathing	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	425
S55	TI (((household or routine) N (jobs or tasks or chores))) OR AB (((household or routine) N (jobs or tasks or chores)))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	117
S54	TI housekeeping OR AB housekeeping	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	294
S53	TI homemaking OR AB homemaking	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	91
S52	TI ((meal* N3 (provision or assistance or help or service* or preparation or delivery))) OR AB ((meal* N3 (provision or assistance or help or service* or preparation or delivery)))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	575
S51	TI ((food N (preparation or assistance or help or service or delivery))) OR AB ((food N (preparation or assistance or help or service or delivery)))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	4
S50	TI "house help" OR AB "house help"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	5
S49	TI shopping OR AB shopping	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	873
S48	TI "community services" OR AB "community services"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	949
S47	TI "home visit*" OR AB "home visit*"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	630
S46	TI "home support service*" OR AB "home support service*"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	44
S45	TI "home care service*" OR AB "home care service*"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	668

S44	DE "Home Care"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	3133
S43	TI (ramp or ramps) OR AB (ramp or ramps)	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	66
S42	TI "shallow steps" OR AB "shallow steps"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	1
S41	TI "stair rails" OR AB "stair rails"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	2
S40	TI stairs OR AB stairs	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	330
S39	TI "stair climbing" OR AB "stair climbing"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	46
S38	TI Stair lift* OR AB "Stair lift*"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	5
S37	TI (((Adapt* or adjust*) N3 (door* or entry or exit))) OR ABSearch modes—Boolean/Phrase (((Adapt* or adjust*) N3 (door* or entry or exit)))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	12
S36	TI "vision aid*" OR AB "vision aid*"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	18
S35	TI "hearing aid*" OR AB "hearing aid*"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	317
S34	TI "hearing device*" OR AB "hearing device*"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	11
S33	TI spectacles OR AB spectacles	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	20
S32	TI glasses OR AB glasses	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	104
S31	TI eyeglasses OR AB eyeglasses	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	61
S30	DE "Hearing Aids"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	214
S29	TI ((communication N (aid* or device*))) OR AB ((communication N (aid* or device*)))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	1
S28	TI "transfer device*" OR AB "transfer device*"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	5
S27	TI scooter* OR AB scooter*	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	22
S26	TI Wheelchair* OR AB Wheelchair*	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	435

S25	TI ((Adapt* N3 (home* or house*))) OR AB ((Adapt* N3 (home* or house*)))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	168
S24	TI ((Adapt* N3 (cars or transport or vehicles))) OR AB ((Adapt* N3 (cars or transport or vehicles)))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	13
S23	TI "walking stick*" OR AB "walking stick"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	8
S22	TI crutches OR AB crutches	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	20
S21	TI cane* OR AB cane*	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	140
S20	TI ((walking N2 (device* or aid* or equipment))) OR AB ((walking N2 (device* or aid* or equipment)))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	79
S19	TI motility OR AB motility	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	16
S18	TI "mobility aid*" OR AB "mobility aid"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	26
S17	TI "mobility device*" OR AB "mobility device"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	34
S16	TI "mobility equipment" OR AB "mobility equipment"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	5
S15	TI "assistive equipment" OR AB "assistive equipment"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	9
S14	TI "assistive devices" OR AB "assistive devices"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	284
S13	DE "Assistive Devices"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	751
S12	TI ((veteran* and (old* or home* or retire*))) OR AB ((veteran* and (old* or home* or retire*)))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	1576
S11	TI geriatric* OR AB geriatric*	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	16,521
S10	TI ((Resident* and (old* or home* or retirement or nursing))) OR AB ((Resident* and (old* or home* or retirement or nursing)))	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	14,367
S9	TI "end of life" OR AB "end of life"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	2172
S8	TI retirement OR AB retirement	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	16,495
S7	TI pensioners OR AB pensioners	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases Search Screen—Advanced Search Database—AgeLine	286

S6	TI old* age* OR AB old* age*	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases 34,385 Search Screen—Advanced Search Database—AgeLine
S5	TI "older women" OR AB "older women"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases 3854 Search Screen—Advanced Search Database—AgeLine
S4	TI "older men" OR AB "older men"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases 1695 Search Screen—Advanced Search Database—AgeLine
S3	TI "older adult*" OR AB "older adult"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases 37,102 Search Screen—Advanced Search Database—AgeLine
S2	TI "older people" OR AB "older people"	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases 9585 Search Screen—Advanced Search Database—AgeLine
S1	TI elderly OR AB elderly	Search modes—Boolean/Phrase	Interface—EBSCOhost Research Databases 32,088 Search Screen—Advanced Search Database—AgeLine

APPENDIX 2: ASSIA SEARCH STRATEGY

(MAINSUBJECT.EXACT("Elderly people") OR MAINSUBJECT.EXACT("Elderly people") OR ti(elderly OR "older people" OR "older men" OR older women " or " older age " or " old age " or pensioners or retirement or " end of life " or geriatric") OR ab(elderly OR "older people" OR "older men" OR older women " or " older age " or " old age " or pensioners or retirement or " end of life " or geriatric") OR ti((Resident* AND (old* OR home* OR retirement OR nursing))) OR ti((Resident* AND (old* OR home* OR retirement OR nursing))) OR ab((veteran* AND (old* OR home* OR retire*)))) AND ((ti,ab("assistive devices" or "assistive equipment" or "mobility equipment" or "mobility devices" or "mobility aid*" or motility) OR ti,ab(walking near/2 (device* or aid* or equipment)) OR ti,ab(cane* or crutch* or "walking stick" or wheelchair* or scooter) OR ti,ab(adapt* near/3 (cars or transport or vehicles or home* or house*)) OR ti,ab(communication near/2 (device* or aid* or equipment)) OR ti,ab("hearing aid*" or hearing device* or eyeglasses or glasses or spectacles or "vision aid*") OR ti,ab((adapt* or adjust) near/3 (door* or entry or exit)) OR ti,ab(stair*) OR ti,ab(ramp or ramps) OR MAINSUBJECT.EXACT.EXPLODE("Home care")) OR (ti("home care" OR "home support" OR home visit " or " community services " or shopping or " house help " or " home help " or homemaking or housekeeping or bathing or grooming or " personal hygiene " or toileting or " footcare "")) OR ab("home care" OR "home support" OR home visit " or " community services " or shopping or " house help " or " home help " or homemaking or housekeeping or bathing or grooming or " personal hygiene " or toileting or " footcare "")) OR ti,ab(food near (preparation or assistance or help or service or delivery)) OR ti,ab(meal* near/3 (provision or preparation or assistance or help or service or delivery)) OR ti,ab(kitchen or bathroom or bedroom))

APPENDIX 3: CINAHL SEARCH STRATEGY

Query	Results
S122 S16 AND S68 AND S103 AND S121	1,915
S121 S104 OR S105 OR S106 OR S107 OR S108 OR S109 OR S110 OR S111 OR S112 OR S113 OR S114 OR S115 OR S116 OR S117 OR S118 OR S119 OR S120	1,059,185
S120 AB "usual care" or "usual practices"	7,133
S119 AB groups	535,924
S118 TI trial OR AB trial	241,739
S117 TI randomly OR AB randomly	66,660
S116 TI randomized OR AB randomized	147,898
S115 TI controlled N study OR AB controlled N2 study	19,862
S114 (MH "Randomized Controlled Trials")	75,376
S113 AB medline	34,544
S112 AB pubmed	27,376

S111	TI overview OR AB overview	36,219
S110	TI evidence N2 synthesi* OR AB evidence N2 synthesi*	2,611
S109	TI review	147,301
S108	AB review* and (literature or studies or trials)	230,546
S107	TI (meta-analysis or metaanalysis) OR AB (meta-analysis or metaanalysis)	47,271
S106	TI (meta-analysis or metaanalysis) OR (meta-analysis or metaanalysis)	59,045
S105	TI systematic* OR AB systematic*	111,442
S104	(MH "Systematic Review")	65,382
S103	(S69 OR S70 OR S71 OR S72 OR S73 OR S74 OR S75 OR S76 OR S77 OR S78 OR S79 OR S80 OR S81 OR S82 OR S83 OR S84 OR S85 OR S86 OR S87 OR S88 OR S89 OR S90 OR S91 OR S92 OR S93 OR S94 OR S95 OR S96 OR S97 OR S98 OR S99 OR S100 OR S101 OR S102)	899,122
S102	TI institutionalization OR AB institutionalization	1,956
S101	TI reablement OR AB reablement	59
S100	TI adherence OR AB adherence	34,819
S99	TI satisfaction OR AB satisfaction	58,116
S98	TI relationships OR AB relationships	221,114
S97	TI security OR AB security	14,091
S96	TI "community life" OR AB "community life"	293
S95	TI mobility OR AB mobility	20,472
S94	TI "self efficacy" OR AB "self efficacy"	16,170
S93	TI "self care" OR AB "self care"	12,062
S92	TI tiredness OR AB tiredness	1,133
S91	TI fatigue OR AB fatigue	28,761
S90	TI energy OR AB energy	45,433
S89	TI vitality OR AB vitality	2,603
S88	TI distress OR AB distress	37,058
S87	TI pain OR AB pain	191,463
S86	TI "sensory function*" OR AB "sensory function"	671
S85	TI cognitive OR AB cognitive	96,135
S84	TI depression OR AB depression	92,125
S83	TI "functional ability" OR AB "functional ability"	2,170
S82	TI "mental health" OR AB "mental health"	78,164
S81	TI (happiness or happier) OR AB (happiness or happier)	3,585
S80	TI "social participation" OR AB "social participation"	1,462
S79	TI "social life" OR AB "social life"	1,416
S78	TI wellbeing OR AB wellbeing	8,393
S77	TI independence OR AB independence	13,126
S76	TI "quality of life" OR AB "quality of life"	90,744
S75	TI "activities of daily living" OR AB "activities of daily living"	11,299
S74	(MM "Automobile Driving")	5,878
S73	(MM "Quality of Life + ")	45,014
S72	(MM "Human Activities")	619
S71	(MM "Home Maintenance")	751
S70	(MM "Leisure Activities")	3,321
S69	(MH "Activities of Daily Living + ")	55,234
S68	S17 OR S18 OR S19 OR S20 OR S21 OR S22 OR S23 OR S24 OR S25 OR S26 OR S27 OR S28 OR S29 OR S30 OR S31 OR S32 OR S33 OR S34 OR S35 OR S36 OR S37 OR S38 OR S39 OR S40 OR S41 OR S42 OR S43 OR S44 OR S45 OR S46 OR S47 OR S48 OR S49 OR S50 OR S51 OR S52 OR S53 OR S54 OR S55 OR S56 OR S57 OR S58 OR S59 OR S60 OR S61 OR S62 OR S63 OR S64 OR S65 OR S66 OR S67	53,724

S67	TI ((kitchen or bathroom or bedroom)) OR AB ((kitchen or bathroom or bedroom))	2,693
S66	TI (medication N2 reminders) OR AB (medication N2 reminders)	141
S65	TI "foot care" OR AB "foot care"	1,048
S64	TI toileting OR AB toileting	543
S63	TI "personal hygiene" OR AB "personal hygiene"	503
S62	TI grooming OR AB grooming	458
S61	TI bathing OR AB bathing	1,784
S60	TI (((household or routine) N (jobs or tasks or chores))) OR AB (((household or routine) N (jobs or tasks or chores)))	5
S59	TI housekeeping OR AB housekeeping	662
S58	TI homemaking OR AB homemaking	64
S57	TI ((meal* N3 (provision or assistance or help or service* or preparation or delivery))) OR AB ((meal* N3 (provision or assistance or help or service* or preparation or delivery)))	674
S56	TI ((food N (preparation or assistance or help or service or delivery))) OR AB ((food N (preparation or assistance or help or service or delivery)))	18
S55	TI "house help" OR AB "house help"	2
S54	TI shopping OR AB shopping	2,202
S53	TI "community services" OR AB "community services"	1,494
S52	TI "home visit*" OR AB "home visit"	4,651
S51	TI "home support service*" OR AB "home support service"	43
S50	TI "home care service*" OR AB "home care service"	1,128
S49	(MM "Home Care Equipment and Supplies")	247
S48	(MH "Home Rehabilitation + ")	1,802
S47	TI (ramp or ramps) OR AB (ramp or ramps)	1,036
S46	TI "shallow steps" OR AB "shallow steps"	12
S45	TI "stair rails" OR AB "stair rails"	2
S44	TI stairs OR AB stairs	2,309
S43	TI "stair climbing" OR AB "stair climbing"	671
S42	TI Stair lift* OR AB "Stair lift"	12
S41	TI (((Adapt* or adjust*) N3 (door* or entry or exit))) OR AB (((Adapt* or adjust*) N3 (door* or entry or exit)))	126
S40	TI "vision aid*" OR AB "vision aid"	53
S39	TI "hearing aid*" OR AB "hearing aid"	4,815
S38	TI "hearing device*" OR AB "hearing device"	296
S37	TI spectacles OR AB spectacles	505
S36	TI glasses OR AB glasses	885
S35	TI eyeglasses OR AB eyeglasses	121
S34	(MH "Hearing Aids + ")	14,658
S33	TI ((communication N (aid* or device*))) OR AB ((communication N (aid* or device*)))	3
S32	TI "transfer device*" OR AB "transfer device"	102
S31	TI scooter* OR AB scooter*	231
S30	TI Wheelchair* OR AB Wheelchair*	4,427
S29	TI ((Adapt* N3 (home* or house*))) OR AB ((Adapt* N3 (home* or house*)))	514
S28	TI ((Adapt* N3 (cars or transport or vehicles))) OR AB ((Adapt* N3 (cars or transport or vehicles)))	79
S27	TI "walking stick*" OR AB "walking stick"	70
S26	TI crutches OR AB crutches	398
S25	TI cane* OR AB cane*	870
S24	TI ((walking N2 (device* or aid* or equipment))) OR AB ((walking N2 (device* or aid* or equipment)))	682
S23	TI motility OR AB motility	3,562

S22	TI "mobility aid*" OR AB "mobility aid*"	Display
S21	TI "mobility device*" OR AB "mobility device*"	Display
S20	TI "mobility equipment" OR AB "mobility equipment"	Display
S19	TI "assistive equipment" OR AB "assistive equipment"	Display
S18	TI "assistive devices" OR AB "assistive devices"	Display
S17	(MM "Assistive Technology Devices")	Display
S16	S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11 OR S12 OR S13 OR S14 OR S15	Display
S15	TI ((veteran* and (old* or home* or retire*))) OR AB ((veteran* and (old* or home* or retire*)))	Display
S14	TI geriatric* OR AB geriatric*	Display
S13	TI ((Resident* and (old* or home* or retirement or nursing))) OR AB ((Resident* and (old* or home* or retirement or nursing)))	Display
S12	TI "end of life" OR AB "end of life"	Display
S11	TI retirement OR AB retirement	Display
S10	TI pensioners OR AB pensioners	Display
S9	TI old* age* OR AB old* age*	Display
S8	TI "older women" OR AB "older women"	Display
S7	TI "older men" OR AB "older men"	Display
S6	TI "older adult*" OR AB "older adult*"	Display
S5	TI "older people" OR AB "older people"	Display
S4	TI elderly OR AB elderly	Display
S3	(MM "Frail Elderly")	Display
S2	(MH "Aged, 80 and Over")	Display
S1	(MM "Aged")	Display

APPENDIX 4: COCHRANE LIBRARY SEARCH STRATEGY

Search Name:

Date Run: 31/07/18 14:52:15.684

Description:

ID Search Hits

#1 MeSH descriptor: [Aged] explode all trees 1381

#2 MeSH descriptor: [Aged, 80 and over] explode all trees 176

#3 MeSH descriptor: [Frail Elderly] explode all trees 707

#4 elderly:ti,ab 23565

#5 "older people":ti,ab 2886

#6 "older adult*":ti,ab 8626

#7 "older men":ti,ab 1070

#8 "older women":ti,ab 1656

#9 "old* age*":ti,ab 3327

#10 pensioners:ti,ab 23

#11 retirement:ti,ab 270

#12 "end of life":ti,ab 923

#13 (Resident* and (old* or home* or retirement or nursing)):ti,ab 3257

#14 geriatric*:ti,ab 4492

#15 (veteran* and (old* or home* or retire*)):ti,ab 930

#16 #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11 or #12 or #13 or #14 or #15 43904

#17 MeSH descriptor: [Self-Help Devices] explode all trees 440

#18 "assistive devices":ti,ab 154

#19 "assistive equipment":ti,ab 5

#20 "mobility equipment":ti,ab 0

- #21 "mobility device*":ti,ab 24
- #22 "mobility aid*":ti,ab 22
- #23 motility:ti,ab 3258
- #24 (walking near/2 (device* or aid* or equipment)):ti,ab 233
- #25 cane*:ti,ab 262
- #26 crutches:ti,ab 101
- #27 "walking stick*":ti,ab 11
- #28 (Adapt* near/3 (cars or transport or vehicles)):ti,ab 7
- #29 (Adapt* near/3 (home* or house*)):ti,ab 103
- #30 Wheelchair*:ti,ab 564
- #31 scooter*:ti,ab 11
- #32 "transfer device*":ti,ab 8
- #33 (communication near (aid* or device*)):ti,ab 208
- #34 MeSH descriptor: [Optical Devices] explode all trees 3992
- #35 MeSH descriptor: [Hearing Aids] explode all trees 489
- #36 eyeglasses:ti,ab 52
- #37 glasses:ti,ab 619
- #38 spectacles:ti,ab 386
- #39 "hearing device*":ti,ab 24
- #40 "hearing aid*":ti,ab 571
- #41 "vision aid*":ti,ab 44
- #42 ((Adapt* or adjust*) near/3 (door* or entry or exit)):ti,ab 31
- #43 "Stair lift*":ti,ab 1
- #44 "stair climbing":ti,ab 343
- #45 stairs:ti,ab 450
- #46 "stair rails":ti,ab 1
- #47 "shallow steps":ti,ab 0
- #48 (ramp or ramps):ti,ab 474
- #49 MeSH descriptor: [Home Care Services] explode all trees 2709
- #50 "home care service*":ti,ab 123
- #51 "home support service*":ti,ab 3
- #52 "home visit*":ti,ab 2466
- #53 "community services":ti,ab 252
- #54 shopping:ti,ab 257
- #55 "house help":ti,ab 0
- #56 "home help":ti,ab 46
- #57 (food near (preparation or assistance or help or service or delivery)):ti,ab 432
- #58 (meal* near/3 (provision or assistance or help or service* or preparation or delivery)):ti,ab 181
- #59 homemaking:ti,ab 3
- #60 housekeeping:ti,ab 65
- #61 ((household or routine) near (jobs or tasks or chores)):ti,ab 74
- #62 bathing:ti,ab 531
- #63 grooming:ti,ab 58
- #64 personal hygiene:ti,ab 257
- #65 toileting:ti,ab 122
- #66 "foot care":ti,ab 161
- #67 (medication near/2 reminders):ti,ab 95
- #68 (kitchen or bathroom or bedroom):ti,ab 400
- #69 #17 or #17 or #18 or #19 or #20 or #21 or #22 or #23 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 or #39 or #40 or #41 or #42 or #43 or #44 or #45 or #46 or #47 or #48 or #49 or #50 or #51 or #52 or #53 or #54 or #55 or #56 or #57 or #58 or #59 or #60 or #61 or #62 or #63 or #64 or #65 or #66 or #67 or #68 19187
- #70 #16 and #69 1814

APPENDIX 5: EMBASE SEARCH STRATEGY

Database: Embase <1974 to 2018 July 30>

Search Strategy:

-
- 1 Frail Elderly/(8986)
 - 2 elderly.ti.ab. (307606)
 - 3 older people.ti.ab. (28244)
 - 4 older adult*.ti.ab. (77298)
 - 5 older men.ti.ab. (10061)
 - 6 older women.ti.ab. (16183)
 - 7 old* age*.ti.ab. (91882)
 - 8 pensioners.ti.ab. (1069)
 - 9 retirement.ti.ab. (13626)
 - 10 "end of life".ti.ab. (26578)
 - 11 (Resident* and (old* or home* or retirement or nursing)).ti.ab. (50626)
 - 12 geriatric*.ti.ab. (66412)
 - 13 (veteran* and (old* or home* or retire*)).ti.ab. (7328)
 - 14 or/1-13 (597440)
 - 15 self help device/(686)
 - 16 orthopedic equipment/(7113)
 - 17 assistive devices.ti.ab. (2030)
 - 18 assistive equipment.ti.ab. (67)
 - 19 mobility equipment.ti.ab. (40)
 - 20 mobility device*.ti.ab. (366)
 - 21 mobility aid*.ti.ab. (423)
 - 22 motility.ti.ab. (107762)
 - 23 (walking adj2 (device* or aid* or equipment)).ti.ab. (1867)
 - 24 cane*.ti.ab. (7668)
 - 25 crutch/(907)
 - 26 crutches.ti.ab. (1592)
 - 27 walking stick*.ti.ab. (314)
 - 28 (Adapt* adj3 (cars or transport or vehicles)).ti.ab. (570)
 - 29 (Adapt* adj3 (home* or house*)).ti.ab. (1916)
 - 30 Wheelchair*.ti.ab. (9414)
 - 31 scooter*.ti.ab. (455)
 - 32 transfer device*.ti.ab. (324)
 - 33 (communication adj (aid* or device*)).ti.ab. (1123)
 - 34 eyeglasses.ti.ab. (737)
 - 35 glasses.ti.ab. (9279)
 - 36 spectacles.ti.ab. (2696)
 - 37 exp hearing aid/(24552)
 - 38 hearing aid*.ti.ab. (9542)
 - 39 hearing device*.ti.ab. (588)
 - 40 vision aid*.ti.ab. (467)
 - 41 ((Adapt* or adjust*) adj3 (door* or entry or exit)).ti.ab. (302)
 - 42 Stair lift*.ti.ab. (5)
 - 43 stair climbing.ti.ab. (1871)
 - 44 stairs.ti.ab. (4629)
 - 45 stair rails.ti.ab. (4)
 - 46 shallow steps.ti.ab. (1)
 - 47 (ramp or ramps).ti.ab. (8753)
 - 48 exp home care/(67776)
 - 49 home care service*.ti.ab. (1915)
 - 50 home support service*.ti.ab. (62)

- 51 home visit*.ti,ab. (9825)
- 52 community services.ti,ab. (3077)
- 53 shopping.ti,ab. (4729)
- 54 house help.ti,ab. (3)
- 55 home help.ti,ab. (526)
- 56 (food adj (preparation or assistance or help or service or delivery)).ti,ab. (4484)
- 57 (meal* adj3 (provision or assistance or help or service* or preparation or delivery)).ti,ab. (1594)
- 58 homemaking.ti,ab. (141)
- 59 housekeeping.ti,ab. (10998)
- 60 ((household or kitchen or routine) adj (jobs or tasks or chores)).ti,ab. (1136)
- 61 bathing.ti,ab. (11145)
- 62 grooming.ti,ab. (6112)
- 63 personal hygiene.ti,ab. (2422)
- 64 toileting.ti,ab. (1310)
- 65 foot care.ti,ab. (1788)
- 66 (medication adj2 reminders).ti,ab. (242)
- 67 (kitchen or bathroom or bedroom).ti,ab. (7945)
- 68 or/15-67 (322386)
- 69 daily life activity/(78117)
- 70 Human Activities/(3185)
- 71 independent living/(3089)
- 72 recreation/(18512)
- 73 shopping/(1911)
- 74 social participation/(4612)
- 75 "activities of daily living".ti,ab. (30943)
- 76 "quality of life".ti,ab. (359513)
- 77 independence.ti,ab. (47534)
- 78 wellbeing.ti,ab. (18483)
- 79 social life.ti,ab. (5685)
- 80 social participation.ti,ab. (2771)
- 81 happiness.ti,ab. (6798)
- 82 happier.ti,ab. (909)
- 83 mental health.ti,ab. (147320)
- 84 functional ability.ti,ab. (6217)
- 85 depression.ti,ab. (400172)
- 86 cognitive.ti,ab. (416634)
- 87 sensory function*.ti,ab. (4984)
- 88 pain.ti,ab. (796354)
- 89 distress.ti,ab. (135545)
- 90 vitality.ti,ab. (14572)
- 91 energy.ti,ab. (546309)
- 92 fatigue.ti,ab. (127854)
- 93 tiredness.ti,ab. (5785)
- 94 self care.ti,ab. (20633)
- 95 self efficacy.ti,ab. (26490)
- 96 mobility.ti,ab. (142390)
- 97 community life.ti,ab. (577)
- 98 security.ti,ab. (47760)
- 99 relationships.ti,ab. (378690)
- 100 satisfaction.ti,ab. (157439)
- 101 adherence.ti,ab. (146634)
- 102 reablement.ti,ab. (63)
- 103 institutionalization.ti,ab. (5821)
- 104 or/69-103 (3385736)

105 "systematic review"/(174301)
 106 systematic*.ti,ab. (453751)
 107 (meta-analysis or metaanalysis).ti,ab. (148557)
 108 (review* and (literature or studies or trials)).ab. (880084)
 109 review.ti. (455568)
 110 (evidence adj2 synthesi*).ti,ab. (6614)
 111 overview.ti,ab. (167411)
 112 pubmed.ab. (104333)
 113 medline.ab. (118298)
 114 or/106-113 (1650752)
 115 exp controlled clinical trial/(694556)
 116 randomized.ti,ab. (638306)
 117 randomly.ab. (384901)
 118 trial.ti,ab. (727369)
 119 groups.ab. (2487203)
 120 usual care.ab. (18552)
 121 or/115-120 (3623667)
 122 114 or 121 (5002455)
 123 14 and 68 and 104 and 122 (3448)

APPENDIX 6: PSYCINFO SEARCH STRATEGY

Database: PsycINFO <1806 to July Week 4 2018>

Search Strategy:

 1 elderly.ti,ab. (54174)
 2 older people.ti,ab. (12110)
 3 older adult*.ti,ab. (41115)
 4 older men.ti,ab. (2189)
 5 older women.ti,ab. (4109)
 6 old* age*.ti,ab. (20699)
 7 pensioners.ti,ab. (185)
 8 retirement.ti,ab. (9183)
 9 "end of life".ti,ab. (8017)
 10 (Resident* and (old* or home* or retirement or nursing)).ti,ab. (20000)
 11 geriatric*.ti,ab. (14314)
 12 (veteran* and (old* or home* or retire*)).ti,ab. (3282)
 13 or/1-12 (152396)
 14 assistive devices.ti,ab. (459)
 15 assistive equipment.ti,ab. (12)
 16 mobility equipment.ti,ab. (9)
 17 mobility device*.ti,ab. (109)
 18 mobility aid*.ti,ab. (96)
 19 motility.ti,ab. (2556)
 20 (walking adj2 (device* or aid* or equipment)).ti,ab. (158)
 21 cane*.ti,ab. (672)
 22 crutches.ti,ab. (96)
 23 walking stick*.ti,ab. (38)
 24 (Adapt* adj3 (cars or transport or vehicles)).ti,ab. (31)
 25 (Adapt* adj3 (home* or house*)).ti,ab. (515)
 26 Wheelchair*.ti,ab. (1489)
 27 scooter*.ti,ab. (87)
 28 transfer device*.ti,ab. (11)
 29 (communication adj (aid* or device*)).ti,ab. (660)

- 30 Hearing aids/(1719)
- 31 eyeglasses.ti,ab. (133)
- 32 glasses.ti,ab. (1145)
- 33 spectacles.ti,ab. (464)
- 34 hearing device*.ti,ab. (93)
- 35 hearing aid*.ti,ab. (2472)
- 36 vision aid*.ti,ab. (53)
- 37 ((Adapt* or adjust*) adj3 (door* or entry or exit)).ti,ab. (116)
- 38 Stair lift*.ti,ab. (1)
- 39 stair climbing.ti,ab. (166)
- 40 stairs.ti,ab. (563)
- 41 stair rails.ti,ab. (1)
- 42 (ramp or ramps).ti,ab. (1042)
- 43 home care service*.ti,ab. (497)
- 44 home support service*.ti,ab. (30)
- 45 home visit*.ti,ab. (3811)
- 46 community services.ti,ab. (2062)
- 47 shopping.ti,ab. (5054)
- 48 house help.ti,ab. (1)
- 49 home help.ti,ab. (168)
- 50 (food adj (preparation or assistance or help or service or delivery)).ti,ab. (1559)
- 51 (meal* adj3 (provision or assistance or help or service* or preparation or delivery)).ti,ab. (474)
- 52 homemaking.ti,ab. (248)
- 53 housekeeping.ti,ab. (531)
- 54 ((household or kitchen or routine) adj (jobs or tasks or chores)).ti,ab. (995)
- 55 bathing.ti,ab. (838)
- 56 grooming.ti,ab. (4042)
- 57 personal hygiene.ti,ab. (415)
- 58 toileting.ti,ab. (515)
- 59 foot care.ti,ab. (123)
- 60 (medication adj2 reminders).ti,ab. (43)
- 61 (kitchen or bathroom or bedroom).ti,ab. (1808)
- 62 or/14-61 (35245)
- 63 exp "Activities of Daily Living"/(5520)
- 64 "activities of daily living".ti,ab. (8352)
- 65 "quality of life".ti,ab. (59139)
- 66 "Quality of Life"/(37055)
- 67 independence.ti,ab. (24287)
- 68 wellbeing.ti,ab. (10013)
- 69 social life.ti,ab. (5978)
- 70 social participation.ti,ab. (2191)
- 71 happiness.ti,ab. (13763)
- 72 happier.ti,ab. (1484)
- 73 mental health.ti,ab. (157706)
- 74 functional ability.ti,ab. (1345)
- 75 depression.ti,ab. (219164)
- 76 cognitive.ti,ab. (370295)
- 77 sensory function*.ti,ab. (1264)
- 78 pain.ti,ab. (83792)
- 79 distress.ti,ab. (57532)
- 80 vitality.ti,ab. (3953)
- 81 energy.ti,ab. (33607)
- 82 fatigue.ti,ab. (22222)
- 83 tiredness.ti,ab. (1251)

84 self care.ti,ab. (8094)
 85 self efficacy.ti,ab. (34497)
 86 mobility.ti,ab. (16761)
 87 community life.ti,ab. (1109)
 88 security.ti,ab. (25264)
 89 relationships.ti,ab. (258664)
 90 satisfaction.ti,ab. (95291)
 91 adherence.ti,ab. (24737)
 92 reablement.ti,ab. (16)
 93 institutionalization.ti,ab. (4822)
 94 or/63-93 (1229400)
 95 systematic*.ti,ab. (108262)
 96 (meta-analysis or metaanalysis).ti,ab. (23648)
 97 (review* and (literature or studies or trials)).ab. (201906)
 98 review.ti. (142171)
 99 (evidence adj2 synthesi*).ti,ab. (1195)
 100 overview.ti,ab. (69147)
 101 pubmed.ab. (9463)
 102 medline.ab. (11506)
 103 or/95-102 (435243)
 104 randomized.ti,ab. (63903)
 105 randomly.ab. (66378)
 106 trial.ti,ab. (94392)
 107 groups.ab. (454479)
 108 usual care.ab. (3673)
 109 or/104-108 (591784)
 110 103 or 109 (980597)
 111 13 and 62 and 94 and 110 (539)

APPENDIX 7: SOCIAL POLICY AND PRACTICE SEARCH STRATEGY

Database: Social Policy and Practice <201804>

Search Strategy:

 1 elderly.ti,ab. (13983)
 2 older people.ti,ab. (24556)
 3 older adult*.ti,ab. (5159)
 4 older men.ti,ab. (545)
 5 older women.ti,ab. (1322)
 6 old* age*.ti,ab. (4684)
 7 pensioners.ti,ab. (876)
 8 retirement.ti,ab. (3880)
 9 "end of life".ti,ab. (1661)
 10 (Resident* and (old* or home* or retirement or nursing)).ti,ab. (11855)
 11 geriatric*.ti,ab. (2842)
 12 (veteran* and (old* or home* or retire*)).ti,ab. (184)
 13 or/1-12 (55038)
 14 assistive devices.ti,ab. (74)
 15 assistive equipment.ti,ab. (8)
 16 mobility equipment.ti,ab. (9)
 17 mobility device*.ti,ab. (14)
 18 mobility aid*.ti,ab. (17)
 19 motility.ti,ab. (1)
 20 (walking adj2 (device* or aid* or equipment)).ti,ab. (19)

- 21 cane*.ti,ab. (51)
- 22 crutches.ti,ab. (3)
- 23 walking stick*.ti,ab. (7)
- 24 (Adapt* adj3 (cars or transport or vehicles)).ti,ab. (13)
- 25 (Adapt* adj3 (home* or house*)).ti,ab. (310)
- 26 Wheelchair*.ti,ab. (316)
- 27 scooter*.ti,ab. (19)
- 28 transfer device*.ti,ab. (3)
- 29 (communication adj (aid* or device*)).ti,ab. (50)
- 30 [Hearing aids/] (0)
- 31 eyeglasses.ti,ab. (1)
- 32 glasses.ti,ab. (29)
- 33 spectacles.ti,ab. (17)
- 34 hearing device*.ti,ab. (1)
- 35 hearing aid*.ti,ab. (85)
- 36 vision aid*.ti,ab. (7)
- 37 ((Adapt* or adjust*) adj3 (door* or entry or exit)).ti,ab. (1)
- 38 Stair lift*.ti,ab. (5)
- 39 stair climbing.ti,ab. (10)
- 40 stairs.ti,ab. (70)
- 41 stair rails.ti,ab. (1)
- 42 (ramp or ramps).ti,ab. (40)
- 43 home care service*.ti,ab. (684)
- 44 home support service*.ti,ab. (49)
- 45 home visit*.ti,ab. (670)
- 46 community services.ti,ab. (1160)
- 47 shopping.ti,ab. (884)
- 48 house help.ti,ab. (0)
- 49 home help.ti,ab. (382)
- 50 (food adj (preparation or assistance or help or service or delivery)).ti,ab. (67)
- 51 (meal* adj3 (provision or assistance or help or service* or preparation or delivery)).ti,ab. (241)
- 52 homemaking.ti,ab. (12)
- 53 housekeeping.ti,ab. (40)
- 54 ((household or kitchen or routine) adj (jobs or tasks or chores)).ti,ab. (84)
- 55 bathing.ti,ab. (142)
- 56 grooming.ti,ab. (273)
- 57 personal hygiene.ti,ab. (47)
- 58 toileting.ti,ab. (61)
- 59 foot care.ti,ab. (26)
- 60 (medication adj2 reminders).ti,ab. (2)
- 61 (kitchen or bathroom or bedroom).ti,ab. (311)
- 62 or/14-61 (5918)
- 63 [exp "Activities of Daily Living"/] (0)
- 64 "activities of daily living".ti,ab. (1300)
- 65 "quality of life".ti,ab. (6357)
- 66 ["Quality of Life"/] (0)
- 67 independence.ti,ab. (3826)
- 68 wellbeing.ti,ab. (4416)
- 69 social life.ti,ab. (337)
- 70 social participation.ti,ab. (347)
- 71 happiness.ti,ab. (405)
- 72 happier.ti,ab. (118)
- 73 mental health.ti,ab. (23759)
- 74 functional ability.ti,ab. (211)

75 depression.ti.ab. (7846)
 76 cognitive.ti.ab. (7353)
 77 sensory function*.ti.ab. (23)
 78 pain.ti.ab. (1266)
 79 distress.ti.ab. (2687)
 80 vitality.ti.ab. (167)
 81 energy.ti.ab. (2664)
 82 fatigue.ti.ab. (320)
 83 tiredness.ti.ab. (32)
 84 self care.ti.ab. (659)
 85 self efficacy.ti.ab. (842)
 86 mobility.ti.ab. (2688)
 87 community life.ti.ab. (244)
 88 security.ti.ab. (5575)
 89 relationships.ti.ab. (13857)
 90 satisfaction.ti.ab. (4829)
 91 adherence.ti.ab. (688)
 92 reablement.ti.ab. (163)
 93 institutionalization.ti.ab. (581)
 94 or/63-93 (74744)
 95 systematic*.ti.ab. (5049)
 96 (meta-analysis or metaanalysis).ti.ab. (684)
 97 (review* and (literature or studies or trials)).ab. (11073)
 98 review.ti. (9726)
 99 (evidence adj2 synthesi*).ti.ab. (113)
 100 overview.ti.ab. (9080)
 101 pubmed.ab. (196)
 102 medline.ab. (471)
 103 or/95-102 (28484)
 104 randomized.ti.ab. (634)
 105 randomly.ab. (1161)
 106 trial.ti.ab. (2435)
 107 groups.ab. (25738)
 108 usual care.ab. (230)
 109 or/104-108 (28684)
 110 103 or 109 (54320)
 111 13 and 62 and 94 and 110 (196)

APPENDIX 8: SOCIAL SCIENCE CITATION INDEX (SSCI) VIA WEB OF SCIENCE SEARCH STRATEGY

SSCI via Web of Science

# 4	640	#3 AND #2 AND #1Indexes = SSCI Timespan = 1900-2018
# 3	40,698	TITLE: ("systematic review" or "controlled trial")Indexes = SSCI Timespan = 1900-2018
# 2	501,019	TI = (mobility or function* or "quality of life" or independence or wellbeing or social or activities)Indexes = SSCI Timespan = 1900-2018
# 1	258,485	TITLE: (old* or elderly or aged)Indexes = SSCI Timespan = 1900-2018

APPENDIX 9: CODING TOOL

Category		Answer
Geographical information	WHO Regions	1. South Asia 2. Sub-Saharan Africa 3. East Asia and Pacific 4. Europe and Central Asia 5. Latin America and Caribbean 6. Middle East and North Africa 7. North America
	World Bank Region (2019 FY)	1. Low income economies 2. Lower Middle income economies 3. Upper Middle income economies 4. High income economies
Study design	Design	1. Systematic reviews 2. - RCT
	Publication status	1. Complete 2. On-going (e.g., Protocols)
Population	Age Group	1. Includes <65 years 2. Includes >65 years 3. Includes >75 years 4. Includes >85 years
	Sex/Gender	1. Includes LGBTQ2+ 2. Proportion of females included in study
Health Conditions		1. Communicable Disease 2. Noncommunicable disease 3. Injury 4. Discharge from hospital 5. End-of-life 6. Physical Frailty 7. Social Frailty 8. - Care Dependent
Intervention	General Social support services, systems and policies	1. Homemaking 2. Personal Care 3. Transportation 4. Family/Caregiver support 5. Befriending or friendly visits
	Health services, systems and policies	1. General health services for disease prevention 2. Health promotion services 3. Rehabilitation Services 4. Long-term care services 5. Visiting Healthcare Professionals 6. Visiting Lay care providers
	Products and Technology	1. Personal mobility and transportation devices 2. Adaptations to physical environment
Outcome	Intrinsic Capacity	1. Mental 2. Sensory functions and pain 3. Neuro-musculoskeletal function 4. Voice and speech 5. Cardiovascular, Haematological, Immune, Respiratory 6. Digestive, Endocrine, Metabolic functions 7. Genitourinary, Reproductive function 8. Integumentary system function
	Functional Ability	1. Basic needs 2. Learning and applying knowledge 3. Contribution 4. Mobility 5. Communication 6. Relationships
	Process and other	1. Falls 2. Cost (out of pocket) 3. Cost-effectiveness 4. Satisfaction

	5. Access 6. Safety 7. Caregiver outcomes 8. Adherence 9. Health Service Utilization 10. Quality of Life 11. Financial security and stability 12. Stigma
Setting	1. Residential home/apartment 1. Long-term care 1. Independent living 1. Assisted Living
Comparison	1. Usual Care 2. Other
Systematic Review quality	1. High 2. Moderate 3. Low 4. Critically Low 5. Protocol
PROGRESS	1. Place of residence 2. Race/Ethnicity 3. Occupation 4. Gender/sex 5. Religion 6. Education 7. Socioeconomic status 8. Social Capital
Gender Inequalities Is there an assessment of effects by sex/gender	1. Yes 2. No 3. Planned but not reported
Other inequalities Is there an assessment of effects by other characteristics, for example, socioeconomic status, income, race/ethnicity, etc	1. Yes 2. No 3. Planned but not reported

APPENDIX 10: LINK TO ONLINE INTERACTIVE EGM

The online interactive EGM is available at https://globalageing.cochrane.org/sites/globalageing.cochrane.org/files/public/uploads/ageing_egm_interactive_map_may5_20.html.