Table S1. Included studies and the attributes, antecedents, consequents and empirical elements of concept analysis

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| --- | --- | --- |
| **ELEMENTS** | **CHARACTERISTICS/CODE** | **LITERATURE DESCRIPTION** |
| **ATTRIBUTES** | Resources available  **A3, D3, E1, F1, I1, R1, R14, H3, R22, S3** | Environmental Capital; Cultural Capital; Economic Capital; Social Capital; Social Relationships; Family and Friends; Love and Friendship; Having Divine Support; Faith in God; Spirituality. |
| Positive behaviors  **B2, B3, E2, I1, N1, M4, P6, P7, R1, R14,** **H3, E5, D4, D6, A9, C6, S4** | Courage and Strength; Resistance; Hardiness; Positive sense of self and an optimistic outlook on life; Strong positivity demonstrated by identity projects, redemptive sequences and narrative openness; Positive comparison with others; Interpersonal Control; Mastery; Belief in self; Competence; Maintaining purpose; Determination; Sense of purpose; Self-determination; Strives toward goal achievement; Prosocial Behavior; Expressing Gratitude; Sense of Humor; Ability to use humor; Problem-solving skills; Meaningful work and activities; Flexibility; Creativity; Autonomy; Recovery; Sustainability; Warrior; Adaptative; Moving-On; Self-esteem; Esteem; Strong self-efficacy. |
| **ANTECEDENTS** | Sociodemographic Characteristic  **B1, C5, D1, D2, E3, I1, M3, P4, P8, R2, R3, R9, R10, T1,** **A9, D4, E6, M5, R17, R20, S2, S3, T6** | age (<85 years and >85 years), gender (female and male), education (higher), income (higher) and status marital (have a partner) |
| Experiences of Adversity  **A3, B2, B3, B4, C2, C3, E3, F1, M2, M3, N2, M4, P3, P5, P6, R5, R7, R8, R9, E5, I2, P10, R19, S2** | Impaired Health Condition; Deficit Communication; Impaired mental health condition; Impaired social condition; Trauma exposure; Interpersonal; Preconception; Stressor; Chronic pain |
| Life experiences  **A3, A8, B1, B2, B4, M2, R9, T2, P11** | Contentment with their lives; Lived Experience; Reminiscences; Memories of a past loss can serve purposes of reconciling with ageing through an affirmation of self as resilient; Effective problem-solving history; Wisdom (wisdom attainment; wisdom that comes from having lived a life); Perceived financial situation |
| Physiology factors  **R12, W2** | Autonomic nervous system, hypothalamic-pituitary axis, innate immunity, renin-angiotensin system, insulin/growth hormone/IGF-1 pathways and their interactions with Genetic, environmental, physiologic, cellular, molecular functions may influence degree of resilience; White matter integrity of the GCC (genu of corpus callosum) and Grit (domain CD-RISC) were association |
| Social context  **B2, B3, C2, C4, D3, G1, H1, I1, M1, P8, R5, R8, R13, U1, U2, W1, A9, B5, E4, H4, P12, R20, T6** | Personal relationships:  Social competence; Family as support; Family relations; Family cohesion; Secure relationships; Accord relationships; Social relations; Social connectedness; Religiosity; Participation and social cohesion; Friends support (friends and particularly friends in similar circumstances are a great source of support); Family and friend networks; Social networks; Gerotranscendence  Environmental support:  Material resources; Social support (social policies, employment, neighbourhood, economy, health, social care e other services, rehabilitation, guide dogs, third sector); Environmental systems; Social and welfare services; Social resources (health and social care); Access to formal support; Community resources; Community level; Housing; Peer support; Engagement with art. |
| Intrinsic aspects  **A8, B2, C4, D3, F1, M2, P6, P7, R1, R2, R5, R8, R9, R15, A9, E4, H4, P12, P13** | Have purpose or goals:  Capacity building and support provided by case professionals; Moving forward with life; Curiosity/ever-seeking; “Head-On” approach to challenge (study participants expressed the belief that one should make plans when faced with a dilemma and not just sit around waiting for something to happen); Meaningfulness; Maintaining continuity; Having and maintaining interests; Perseverance; Meaning, purpose and growth  Maintenance balance:  Perceived Control; Personal control; Equanimity  Beliefs:  Spirituality and religiosity; Prayer; Spiritual Grounding |
| Health conditions  **C2, C5, D3, M1, M4, F1, H2, P3, P4, P5, P7, R2, R14, T4, W1, A10, C6, D5, H3, P12, R20, S2** | Lifestyle:  Independence and autonomy; Performance preserved from activities of daily living; Mobility; Self-care activities; Looking after yourself (self-care); Self-efficacy; "Self-efficacy, outcome expectations and exercise behavior"; Looking after yourself (self-care); Self-preservation; Self-determination; Non-obese body mass; Non-smoker; Satisfaction with quality of sleep; Having a good apetite; Brain fitness; Self-compassion  Express emotions:  Positive emotions; Emotional expression and communication; Emotional regulation; Humor; Hope (low hopelessness scores also predicted greater resilience); Self-esteem; Optimism; Facing fear; Moral compass, ethics, altruism; Cognitive and emotional flexibility; Resignation; Confrontation |
| Express self-awareness  **A3, A8, B2, B1, C4, F1, M2, R2, R5, R8, T3** | Strong sense of identity; Extending self to others; Ceaseless self-improvement; Accept one-self; Accept situation; Maintenance of self-identity; Adaptable personality; Personal competence; Self and personality; Everyday competence; Self-reliance; Self-reflection (self-criticism and the perception of being caregiver or care receiver) the availability of supportive relationships and reciprocity in these relationships as central elements in the development of resilience; “Maverick” (Being mavericks - unconventional); Existential aloneness. |
| **CONSEQUENTS** | Components of mental health  **A2, A6, B4, C3, C5, D1, D2, L1, P1, P6, P7, R6, R10, R15, S1, T1, V1, W2,** **A10, P11, M5, E5** | Control of symptoms psychological:  Less depressive symptoms; Less depression; Less apathy; Less anxiety  Control of emotions:  Control of stressful events; Control of stress and negative affect/negative emotion; Stress reduction; Control daily negative emotion; Lower emotional distress; Emotional stability; Express happiness; Maintaining a strong positive self-concept; Express daily positive emotion; Emotional maturity; Gratitude |
| Positive perspective and experience of ageing  **A1, A2, A3, A7, B3, B4, C2, C3, C5, E1, F1, H1, M1, M3, O1, P3, P4, R1, R2, R4, R11, R13, R15, R16, S1, T3, U2, V1,** **A10, E5, P11, P12, R21, T6, S4, R22, S5, D4, E6, E8, R18, A9, G2, E7, E8, C7, F3, H4, S3** | Active aging:  Well-being; Quality of life; Life satisfaction; Successful aging (life satisfaction; morale; health-promoting lifestyle); Self-rated successful ageing; Longevity; Ageing with integrity; Experience an quiet ageing; Savoring life; Being active; Keeping active and busy; Outdoor visits; Walking; Going to churchill  Independence and autonomy:  Different strategies to maintain a sense of independence; Fast gait speed; Keep doing a job and earning a living; Resilience demonstrated more protective for risk of dependence for activities of daily livings in younger elderly (65-84 years); Reduced risk of dependence on activities of daily living; Express stoic attitudes (wisdom and moderation) in facing increasing frailty; Driving abilities  Values socialization:  Greater social participation; Greater perception social support; Maintain active social (to value intergenerationality and relationship with youngest); Value interaction with friends, family and neighbours; Volunteering  Personal behavior:  Personal growth; Purpose in life; Continuity; Perseverance; Self-acceptance; Redemption; Acquiring an empowering perspective; Learning to let go and moving on’; Remaining active and keeping busy; Individual innovativeness; Sense Purpose; Religiosity; Spirituality |
| Grief and loss experience  **B2, D1, P9, R14, E4** | Recovery with loss; Protection factor against widowhood; They lived active lives, indicating a relatively stable, healthy level of psychological, and physical functioning following the death of their spouse; Not express denial or avoid talking about the loss |
| Coping strategies  **A1, A8, B4, E1, H1, M4, R1, R4, O1, V1,** **E7, F2, N3, R19** | Problem-solving; Coping escape (avoids stressful situations); Practical coping; Emotional coping; Spiritual coping; Problem coping; Emotional coping; Coping styles; Coping resources; Courage and resourcefulness; Speaking it out was expressed as a strategy to relieve hardship; Successfully coping with adversity; Coping with unfavorable situations, recovery and/or maintenance of health, personal and family protection; Strategy of coping with vulnerabilities; Strategy of coping with discrimination; Coping to financial hardship; Coping to nutrition risk |
| Health perspective  **A4, H2, I1, L1, P9, T1, R7, R12, R14, P14, E9** | Positive health self-report; Good physical and mental health; Less impact related to the treatment of chronic and acute conditions; Expresses homeostasis conditions and basal levels |
| Optimistic perspective  **A6, C1, D3, F1, M1, R2,** **P11, E4, P12, R18, R21** | Optimism; Maintaining a positive outlook on life; Positive reappraisal; Positive Attitude; Express positive and being thankful for life; Happiness; Good humor |
| **EMPIRICAL ELEMENTS** | Scales  **A2, A4, A7, C1, C5, H2, M1, N2, P1, P2, P8, R6, R7, V1, W2,** **M2, I2, R11, B1, R9, T1, T4, E2, D1, A1, R4, T2, P6, P7, P8, B2, D2, S1, P7, L1, C6, E7, P11, P12, R19, R20, S3, S5, A9, E4, E6, F3, G2, P12, S2, F2, P14, A10, B5, C7, H4, N3, P10, R17, H3, D4, D6, P13** | Connor Davidson Resilience Scale (Four domains - grit, active coping self-efficacy, accommodative coping self-efficacy e spirituality); The Resilience Scale (Two domains - personal competence; acceptance of self and life); Simplified Resilience Score=Leave Behind Questionnaire + Resilience Scale; Brief Resilient Coping Scale; Dispositional Resilience Scale; Groningen Ageing Resilience Inventory; The Hardy-Gill Resilience Scale; Resilience in Older Adults Survey; The Ego-Resilience Scale; John Henry Active Coping level; Psychological Resilience Scale for Adults; Psychological Resilience Against Physical Difficulties Index (PRAPDI). |
| Interventions and qualitative assessment  **A3, A5, B3, C2, C3, C4, E1, F1, H1, M3, N1, P3, R2, P4, R3, R5, R13, R15, T3, U1, W1, E4, R21, T6, T5, R21, R18, F2, E8, E4** | To explore significant life events and experiences; To explore events of adversity and confrontation; To explore resilience; To explore support mechanisms; To measure social support; To measure self-efficacy; To measure self-awareness; To explore physical and cognitive performance; To explore how is it getting old; To explore resilient characteristics.  In context COVID-19 Pandemic: To explore challenges experienced; How COVID-19 affected their lives; What were the changes in that period; To explore social networks and assistance from government agencies or communities during the pandemic; To explore impact financial hardship during COVID-19; To explore strategies, resources and processes do older adults. |

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**A4** Zhang, K.; Zhang, W.; Wu, B.; Liu, S. Anxiety about aging, resilience and health status among Chinese older adults: findings from Honolulu and Wuhan. *Arch Gerontol Geriatr,* **2020,** 104015. <https://doi.org/10.1016/j.archger.2020.104015>

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**A8** Wagnild, G. M.; Collins, J. A. Assessing Resilience. *J Psychosoc Nurs Ment Health Serv* **2009,** 47(12), 28–33. <https://doi.org/10.3928/02793695-20091103-01>

**A9** Ferreira, G. S.; Souto, R. Q.; Almeida, S. A. de; Ribeiro, G. D. S.; Araújo, G. K. N. de; Santos, R. D. C. Assessment of resilience profile and associated factors in community elderly. *Rev. enferm. UERJ* **2020,** 28, e51659. <https://doi.org/10.12957/reuerj.2020.51659>

**A10** Perez-Rojo, G.; López, J.; Noriega, C.; Velasco, C.; Carretero, I.; López-Frutos, P.; Galarraga, L. A multidimensional approach to the resilience in older adults despite COVID-19. *BMC Geriatrics,* **2022,** 22(1). <https://doi.org/10.1186/s12877-022-03472-y>

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**B2** Van Abbema, R.; Bielderman, A.; de Greef, M.; Hobbelen, H.; Krijnen, W.; Van der Schans, C. Building from a conceptual model of the resilience process during ageing, towards the Groningen Aging Resilience Inventory. *J Adv Nurs* **2015,** 71(9), 2208–2219. <https://doi.org/10.1111/jan.12685>

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**B5** da Silva-Sauer, L.; de la Torre-Luque, A.; Smith, B. W.; C. M. C. Lins, M.; Andrade, S.; Fernández-Calvo, B. Brief Resilience Scale (BRS) Portuguese Version: validity and metrics for the older adult population. *Aging Ment Health* **2020,** 1–10. <https://doi.org/10.1080/13607863.2020.1753015>

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**C2** Li, J.; Xu, L.; Chi, I. Challenges and resilience related to aging in the United States among older Chinese immigrants. *Aging Ment Health* **2017***,* 22(12), 1548–1555. <https://doi.org/10.1080/13607863.2017.1377686>

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**C5** Laird, K. T.; Lavretsky, H.; Paholpak, P.; Vlasova, R. M.; Roman, M.; Cyr, N. S.; Siddarth, P. Clinical correlates of resilience factors in geriatric depression*. Int Psychogeriatr* **2019,** 31(2), 193–202. <https://doi.org/10.1017/S1041610217002873>

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**C7** Silva‐Sauer, L.; Martins‐Rodrigues, R.; Torre‐Luque, A.; Fernández‐Calvo, B. Cross‐cultural adaptation and psychometric properties of the Brazilian Portuguese version of successful aging scale in community‐dwelling older adults. *J Community Psychol* **2020** <https://doi.org/10.1002/jcop.22374>

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**D2** Mehta, M.; Whyte, E.; Lenze, E.; Hardy, S.; Roumani, Y.; Subashan, P.; Huang, W.; Studenski, S. Depressive symptoms in late life: associations with apathy, resilience and disability vary between young-old and old-old. *Int J Geriatr Psychiatry* **2008**,23(3), 238–243. <https://doi.org/10.1002/gps.1868>

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**D5** Pedone, C.; Costanzo, L.; Finamore, P.; Bandinelli, S.; Ferrucci, L.; Antonelli Incalzi, R. Defining resilience in older people: does a subjective definition of stressor work? *J Gerontol A Biol Sci Med Sci.* **2020** <https://doi.org/10.1093/gerona/glaa189>

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**E7** Mao, W.; Wu, B.; Chi, I.; Yang, W.; Dong, X. Experiences of discrimination and oral health‐related quality of life among foreign‐born older Chinese Americans: does resilience play a mediating role? *Community Dent Oral Epidemiol* **2021.** <https://doi.org/10.1111/cdoe.12723>

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