Supplementary Table S1. Interview guide

1. How long have you lived here, and how did you come to live here?
2. How do you usually spend a day here?
3. How does life in the nursing home feel to you overall?
4. Which things in daily life can you decide or do for yourself?
5. Which activities do you take part in, and what do they mean to you?
6. How are your relationships with your family, other residents and staff?
7. Does living here feel like home to you?
8. What do you think it takes for older people to live well in a nursing home?
9. What would you suggest the nursing home improve?

Probes for the provisional features (asked directly, in everyday language, when residents did not raise these topics themselves):

a. Do you still feel energetic and engaged in daily life?

b. (After question 6) Can you describe any situations where residents help each other?

When residents mentioned related experiences, follow-up prompts drew on their own words. The term thriving was not used.

Supplementary Table S2. Database-specific search strategies. Publication period searched: January 2000 to December 2025. Dates of searches: main search of all seven databases (strategies 1–7), 21 December 2025; supplementary search of CNKI and Wanfang without the setting block (strategy 8), 29 October 2026; re-run of strategies 6 and 7 to obtain the number of records retrieved, 1 November 2026.

1. CINAHL (EBSCO)

No.	Search terms	Records
S1	(MH "Health Services for Older Persons") OR (MH "Housing for Older Persons") OR (MH "Inpatients") OR (MH "Long Term Care") OR (MH "Nursing Home Residents") OR (MH "Home Health Care+") OR (MH "Residential Care+") OR (MH "Residential Facilities+") OR (MH "Community Living+") OR (MH "Geriatrics") OR (MH "Gerontologic Care") OR (MH "Gerontologic Nursing+")	286,673
S2	(MH "Health Facility Environment+") OR (MH "Hospitals+")	164,029
S3	TI ("Age-Friendly Health Care*" or "Age Friendly Health Care*" or "Age-Friendly Health Service*" or "Age Friendly Health Service*" or "Age-Friendly Health System*" or "Age Friendly Health System*" or "Aged care" or "Assisted living facilit*" or "Care facilit*" or "Care home*" or "Care in place" or "Care-in-place" or "Community living" or "Continuing Care" or "Convalescent home*" or "Domiciliary care" or "Elderly resident*" or "Extended Care Facilit*" or Geriatri* or "Gerontologic care" or Gerontology or "Group home*" or "Health Care for the Aged" or "Health Services for the Aged" or "Health Services for the Elderly" or "Health services for the old*" or "Health Systems for the Aged" or "Home assistance" or "Home care" or "Home* for the aged" or "Home health care" or "Home healthcare" or "Home health clients" or "Home Health Nursing" or "Home health service user*" or "Home nursing" or "Home support service*" or "Home-based care" or "Homebound patients" or "Homemaker service*" or Hospital or Hospitals or "housing for older persons" or "Housing for the Elderly" or "In-home care" or "independent living" or Inpatient* or "Intermediate Care Facilit*" or "Life Care Center*" or "Long Term Care" or "Long-term care" or "Nursing home*" or "Old-age home*" or "Old age home*" or "Personal care service*" or "Resident* in place" or "Residential Aged Care" or "Residential care" or "Residential facilit*" or "Residents in institutions" or "Rest home*" or "Retirement Center*" or "retirement home*" or "Senior citizen* home*" or "Senior communit*" or "Senior Housing" or "Senior resident*" or "skilled nursing facilit*" or "elder care" or "retirement communit*" or "aging in place" or "healthy aging" or geropsycholog* or "residential care institution*" or "treatment facilit*") OR AB ("Age-Friendly Health Care*" or "Age Friendly Health Care*" or "Age-Friendly Health Service*" or "Age Friendly Health Service*" or "Age-Friendly Health System*" or "Age Friendly Health System*" or "Aged care" or "Assisted living facilit*" or "Care facilit*" or "Care home*" or "Care in place" or "Care-in-place" or "Community living" or "Continuing Care" or "Convalescent home*" or "Domiciliary care" or "Elderly resident*" or "Extended Care Facilit*" or Geriatri* or "Gerontologic care" or Gerontology or "Group home*" or "Health Care for the Aged" or "Health Services for the Aged" or "Health Services for the Elderly" or "Health services for the old*" or "Health Systems for the Aged" or "Home assistance" or "Home care" or "Home* for the aged" or "Home health care" or "Home healthcare" or "Home health clients" or "Home Health Nursing" or "Home health service user*" or "Home nursing" or "Home support service*" or "Home-based care" or "Homebound patients" or "Homemaker service*" or Hospital or Hospitals or "housing for older persons" or "Housing for the Elderly" or "In-home care" or "independent living" or Inpatient* or "Intermediate Care Facilit*" or "Life Care Center*" or "Long Term Care" or "Long-term care" or "Nursing home*" or "Old-age home*" or "Old age home*" or "Personal care service*" or "Resident* in place" or "Residential Aged Care" or "Residential care" or "Residential facilit*" or "Residents in institutions" or "Rest home*" or "Retirement Center*" or "retirement home*" or "Senior citizen* home*" or "Senior communit*" or "Senior Housing" or "Senior resident*" or "skilled nursing facilit*" or "elder care" or "retirement communit*" or "aging in place" or "healthy aging" or geropsycholog* or "residential care institution*" or "treatment facilit*") OR SU ("Age-Friendly Health Care*" or "Age Friendly Health Care*" or "Age-Friendly Health Service*" or "Age Friendly Health Service*" or "Age-Friendly Health System*" or "Age Friendly Health System*" or "Aged care" or "Assisted living facilit*" or "Care facilit*" or "Care home*" or "Care in place" or "Care-in-place" or "Community living" or "Continuing Care" or "Convalescent home*" or "Domiciliary care" or "Elderly resident*" or "Extended Care Facilit*" or Geriatri* or "Gerontologic care" or Gerontology or "Group home*" or "Health Care for the Aged" or "Health Services for the Aged" or "Health Services for the Elderly" or "Health services for the old*" or "Health Systems for the Aged" or "Home assistance" or "Home care" or "Home* for the aged" or "Home health care" or "Home	964,512

No.	Search terms	Records
	healthcare" or "Home health clients" or "Home Health Nursing" or "Home health service user*" or "Home nursing" or "Home support service*" or "Home-based care" or "Homebound patients" or "Homemaker service*" or Hospital or Hospitals or "housing for older persons" or "Housing for the Elderly" or "In-home care" or "independent living" or Inpatient* or "Intermediate Care Facilit*" or "Life Care Center*" or "Long Term Care" or "Long-term care" or "Nursing home*" or "Old-age home*" or "Old age home*" or "Personal care service*" or "Resident* in place" or "Residential Aged Care" or "Residential care" or "Residential facilit*" or "Residents in institutions" or "Rest home*" or "Retirement Center*" or "retirement home*" or "Senior citizen* home*" or "Senior communit*" or "Senior Housing" or "Senior resident*" or "skilled nursing facilit*" or "elder care" or "retirement communit*" or "aging in place" or "healthy aging" or geropsycholog* or "residential care institution*" or "treatment facilit*")	
S4	S1 OR S2 OR S3	997,075
S5	(MH "Aged+") OR (MH "Aging+")	1,068,782
S6	TI (((Aged or Ageing or Aging or Elder or Elderly or Eldest or "Old age*" or "Older age*" or Old* or Senior) N2 (Adult* or Citizen* or Female* or Male* or Man* or Men* or Patient* or Resident* or People* or Person* or Population* or Subject* or Woman* or Women*)) or Centarian* or Centenarian* or Elderhood or Nonagenarian* or Octogenarian* or "Oldest old*" or Senium or Septuagenarian* or Supercentenarian*) OR AB (((Aged or Ageing or Aging or Elder or Elderly or Eldest or "Old age*" or "Older age*" or Old* or Senior) N2 (Adult* or Citizen* or Female* or Male* or Man* or Men* or Patient* or Resident* or People* or Person* or Population* or Subject* or Woman* or Women*)) or Centarian* or Centenarian* or Elderhood or Nonagenarian* or Octogenarian* or "Oldest old*" or Senium or Septuagenarian* or Supercentenarian*) OR SU (((Aged or Ageing or Aging or Elder or Elderly or Eldest or "Old age*" or "Older age*" or Old* or Senior) N2 (Adult* or Citizen* or Female* or Male* or Man* or Men* or Patient* or Resident* or People* or Person* or Population* or Subject* or Woman* or Women*)) or Centarian* or Centenarian* or Elderhood or Nonagenarian* or Octogenarian* or "Oldest old*" or Senium or Septuagenarian* or Supercentenarian*)	424,913
S7	S5 OR S6	1,245,288
S8	TI (Thrive or Thrives or Thrived or Thriven or Thriving or Throve or Thriver*) OR AB (Thrive or Thrives or Thrived or Thriven or Thriving or Throve or Thriver*) OR SU (Thrive or Thrives or Thrived or Thriven or Thriving or Throve or Thriver*)	6,822
S9	S4 AND S7 AND S8	219
Limits: Publication dates: January 2000–December 2025; Languages: Chinese or English		**183**

2. MEDLINE (Ovid)

No.	Search terms	Records
S1	exp Health Services for the Aged/ or exp Housing for the Elderly/ or exp Inpatients/ or exp Long-Term Care/ or exp Home Care Services/ or exp Residential Facilities/ or exp Geriatrics/ or exp Geriatric Nursing/	224,033
S2	exp health facility environment/ or exp hospitals/	350,756
S3	("Age-Friendly Health Care*" or "Age Friendly Health Care*" or "Age-Friendly Health Service*" or "Age Friendly Health Service*" or "Age-Friendly Health System*" or "Age Friendly Health System*" or "Aged care" or "Assisted living facilit*" or "Care facilit*" or "Care home*" or "Care in place" or "Care-in-place" or "Community living" or "Continuing Care" or "Convalescent home*" or "Domiciliary care" or "Elderly resident*" or "Extended Care Facilit*" or Geriatri* or "Gerontologic care" or Gerontology or "Group home*" or "Health Care for the Aged" or "Health Services for the Aged" or "Health Services for the Elderly" or "Health services for the old*" or "Health Systems for the Aged" or "Home assistance" or "Home care" or "Home* for the aged" or "Home health care" or "Home healthcare" or "Home health clients" or "Home Health Nursing" or "Home health service user*" or "Home nursing" or "Home support service*" or "Home-based care" or "Homebound patients" or "Homemaker service*" or Hospital or Hospitals or "housing for older persons" or "Housing for the Elderly" or "In-home care" or "independent living" or Inpatient* or "Intermediate Care Facilit*" or "Life Care Center*" or "Long Term Care" or "Long-term care" or "Nursing home*" or "Old-age home*" or "Old age home*" or "Personal care service*" or "Resident* in place" or "Residential Aged Care" or "Residential care" or "Residential facilit*"	2,066,585

No.	Search terms	Records
	or "Residents in institutions" or "Rest home*" or "Retirement Center*" or "retirement home*" or "Senior citizen* home*" or "Senior communit*" or "Senior Housing" or "Senior resident*" or "skilled nursing facilit*" or "elder care" or "retirement communit*" or "aging in place" or "healthy aging" or geropsycholog* or "residential care institution*" or "treatment facilit*").ti,ab,kf.	
S4	S1 OR S2 OR S3	2,257,625
S5	exp Aged/ or exp Aging/	4,159,214
S6	(((Aged or Ageing or Aging or Elder or Elderly or Eldest or "Old age*" or "Older age*" or Old* or Senior) adj3 (Adult* or Citizen* or Female* or Male* or Man* or Men* or Patient* or Resident* or People* or Person* or Population* or Subject* or Woman* or Women*)) or Centarian* or Centenarian* or Elderhood or Nonagenarian* or Octogenarian* or "Oldest old*" or Senium or Septuagenarian* or Supercentenarian*).ti,ab,kf.	1,820,243
S7	S5 OR S6	5,269,388
S8	(Thrive or Thrives or Thrived or Thriven or Thriving or Throve or Thriver*).ti,ab,kf.	24,798
S9	S4 AND S7 AND S8	382
Limits: Publication dates: January 2000–December 2025; Languages: Chinese or English		**297**

3. APA PsycINFO (Ovid)

No.	Search terms	Records
S1	(Elder Care or Retirement Communities or Aging in Place or Healthy Aging or Geriatrics or Geriatric Psychiatry or Geriatric Assessment or Geriatric Psychotherapy or Gerontology or Geropsychology or Nursing Home Residents or Long Term Care or Home Care or Nursing Homes or Residential Care Institutions or Treatment Facilities or Assisted Living or Group Homes).sh.	74,888
S2	(Hospital Environment or Hospitals).sh.	23,859
S3	("Age-Friendly Health Care*" or "Age Friendly Health Care*" or "Age-Friendly Health Service*" or "Age Friendly Health Service*" or "Age-Friendly Health System*" or "Age Friendly Health System*" or "Aged care" or "Assisted living facilit*" or "Care facilit*" or "Care home*" or "Care in place" or "Care-in-place" or "Community living" or "Continuing Care" or "Convalescent home*" or "Domiciliary care" or "Elderly resident*" or "Extended Care Facilit*" or Geriatri* or "Gerontologic care" or Gerontology or "Group home*" or "Halfway House*" or "Health Care for the Aged" or "Health Services for the Aged" or "Health Services for the Elderly" or "Health services for the old*" or "Health Systems for the Aged" or "Home assistance" or "Home care" or "Home* for the aged" or "Home health care" or "Home healthcare" or "Home health clients" or "Home Health Nursing" or "Home health service user*" or "Home nursing" or "Home support service*" or "Home-based care" or "Homebound patients" or "Homemaker service*" or Hospital or Hospitals or "housing for older persons" or "Housing for the Elderly" or "In-home care" or "In-Home Respite" or "In Home Respite" or "independent living" or Inpatient* or "Intermediate Care Facilit*" or "Life Care Center*" or "Long Term Care" or "Long-term care" or "Nursing home*" or "Old-age home*" or "Old age home*" or "Personal care service*" or "Resident* in place" or "Residential Aged Care" or "Residential care" or "Residential facilit*" or "Residents in institutions" or "Respite Care" or "Rest home*" or "Retirement Center*" or "retirement home*" or "Senior citizen* home*" or "Senior communit*" or "Senior Housing" or "Senior resident*" or "skilled nursing facilit*" or "elder care" or "retirement communit*" or "aging in place" or "healthy aging" or geropsycholog* or "residential care institution*" or "treatment facilit*").ti,ab,hw,id.	324,197
S4	S1 OR S2 OR S3	324,419
S5	(Older Adulthood or Aging or Cognitive Aging or Physiological Aging or "Aging (Attitudes Toward)").sh.	110,461
S6	(((Aged or Ageing or Aging or Elder or Elderly or Eldest or "Old age*" or "Older age*" or Old* or Senior) adj3 (Adult* or Citizen* or Female* or Male* or Man* or Men* or Patient* or Resident* or People* or Person* or Population* or Subject* or Woman* or Women*)) or Centarian* or Centenarian* or Elderhood or Nonagenarian* or Octogenarian* or "Oldest old*" or Senium or Septuagenarian* or Supercentenarian*).ti,ab,hw,id.	398,571
S7	S5 OR S6	423,932

No.	Search terms	Records
S8	(Thrive or Thrives or Thrived or Thriven or Thriving or Throve or Thriver*).ti,ab,hw,id.	9,789
S9	S4 AND S7 AND S8	135
Limits: Publication dates: January 2000–December 2025; Languages: Chinese or English		**111**

4. Scopus (Elsevier)

No.	Search terms	Records
S1	TITLE-ABS-KEY (("Age-Friendly Health Care*" OR "Age Friendly Health Care*" OR "Age-Friendly Health Service*" OR "Age Friendly Health Service*" OR "Age-Friendly Health System*" OR "Age Friendly Health System*" OR "Aged care" OR "Assisted living facilit*" OR "Care facilit*" OR "Care home*" OR "Care in place" OR "Care-in-place" OR "Community living" OR "Continuing Care" OR "Convalescent home*" OR "Domiciliary care" OR "Elderly resident*" OR "Extended Care Facilit*" OR geriatri* OR "Gerontologic care" OR gerontology OR "Group home*" OR "Health Care for the Aged" OR "Health Services for the Aged" OR "Health Services for the Elderly" OR "Health services for the old*" OR "Health Systems for the Aged" OR "Home assistance" OR "Home care" OR "Home* for the aged" OR "Home health care" OR "Home healthcare" OR "Home health clients" OR "Home Health Nursing" OR "Home health service user*" OR "Home nursing" OR "Home support service*" OR "Home-based care" OR "Homebound patients" OR "Homemaker service*" OR hospital OR hospitals OR "housing for older persons" OR "Housing for the Elderly" OR "In-home care" OR "independent living" OR inpatient* OR "Intermediate Care Facilit*" OR "Life Care Center*" OR "Long Term Care" OR "Long-term care" OR "Nursing home*" OR "Old-age home*" OR "Old age home*" OR "Personal care service*" OR "Resident* in place" OR "Residential Aged Care" OR "Residential care" OR "Residential facilit*" OR "Residents in institutions" OR "Rest home*" OR "Retirement Center*" OR "retirement home*" OR "Senior citizen* home*" OR "Senior communit*" OR "Senior Housing" OR "Senior resident*" OR "skilled nursing facilit*" OR "elder care" OR "retirement communit*" OR "aging in place" OR "healthy aging" OR geropsycholog* OR "residential care institution*" OR "treatment facilit*"))	3,769,063
S2	TITLE-ABS-KEY (((aged OR ageing OR aging OR elder OR elderly OR eldest OR "Old age*" OR "Older age*" OR old* OR senior) W/2 (adult* OR citizen* OR female* OR male* OR man* OR men* OR patient* OR resident* OR people* OR person* OR population* OR subject* OR woman* OR women*)) OR centarian* OR centenarian* OR elderhood OR nonagenarian* OR octogenarian* OR "Oldest old*" OR senium OR septuagenarian* OR supercentenarian*)	2,283,448
S3	TITLE-ABS-KEY (thrive OR thrives OR thrived OR thriven OR thriving OR throve OR thriver*)	77,377
S4	S1 AND S2 AND S3	554
Limits: Publication dates: January 2000–December 2025; Languages: Chinese or English		**462**

5. Web of Science Core Collection (Clarivate)

No.	Search terms	Records
S1	("Age-Friendly Health Care*" or "Age Friendly Health Care*" or "Age-Friendly Health Service*" or "Age Friendly Health Service*" or "Age-Friendly Health System*" or "Age Friendly Health System*" or "Aged care" or "Assisted living facilit*" or "Care facilit*" or "Care home*" or "Care in place" or "Care-in-place" or "Community living" or "Continuing Care" or "Convalescent home*" or "Domiciliary care" or "Elderly resident*" or "Extended Care Facilit*" or Geriatri* or "Gerontologic care" or Gerontology or "Group home*" or "Health Care for the Aged" or "Health Services for the Aged" or "Health Services for the Elderly" or "Health services for the old*" or "Health Systems for the Aged" or "Home assistance" or "Home care" or "Home* for the aged" or "Home health care" or "Home healthcare" or "Home health clients" or "Home Health Nursing" or "Home health service user*" or "Home nursing" or "Home support service*" or "Home-based care" or "Homebound patients" or "Homemaker service*" or Hospital or Hospitals or "housing for older persons" or "Housing for the Elderly" or "In-home care" or "independent living" or Inpatient* or "Intermediate Care Facilit*" or "Life Care Center*" or "Long Term Care" or "Long-term care" or "Nursing home*" or "Old-age home*" or "Old age home*" or "Personal care service*" or "Resident* in place" or "Residential Aged Care" or "Residential care" or "Residential facilit*" or "Residents in institutions" or "Rest home*" or "Retirement Center*" or "retirement home*"	2,080,654

No.	Search terms	Records
	or "Senior citizen* home*" or "Senior communit*" or "Senior Housing" or "Senior resident*" or "skilled nursing facilit*" or "elder care" or "retirement communit*" or "aging in place" or "healthy aging" or geropsycholog* or "residential care institution*" or "treatment facilit*") (Topic)	
S2	((Aged or Ageing or Aging or Elder or Elderly or Eldest or "Old age*" or "Older age*" or Old* or Senior) NEAR/2 (Adult* or Citizen* or Female* or Male* or Man* or Men* or Patient* or Resident* or People* or Person* or Population* or Subject* or Woman* or Women*)) or Centarian* or Centenarian* or Elderhood or Nonagenarian* or Octogenarian* or "Oldest old*" or Senium or Septuagenarian* or Supercentenarian* (Topic)	2,644,852
S3	Thrive or Thrives or Thrived or Thriven or Thriving or Throve or Thriver* (Topic)	49,600
S4	S1 AND S2 AND S3	374
Limits: Publication dates: January 2000–December 2025; Languages: Chinese or English		**320**

6. China National Knowledge Infrastructure (CNKI)

Professional search; TKA = title, keywords and abstract.

No.	Search terms	Records
S1	TKA=('养老院'+'养老机构'+'养老服务机构'+'护理院'+'护理机构'+'敬老院'+'福利院'+'老年福利院'+'老年公寓'+'照护机构'+'长期照护'+'长期护理'+'长期照料'+'医养结合'+'医养融合'+'机构养老') English translation: nursing home; elderly care institution; elderly care service institution; nursing care home; nursing institution; home for the aged; welfare home; welfare home for older adults; senior apartment; care institution; long-term care; long-term nursing care; long-term caregiving; combined medical and elderly care; integrated medical and elderly care; institutional elderly care.	≈98,100
S2	TKA=('老年人'+'老人'+'老年'+'高龄'+'长者'+'老龄'+'晚年') English translation: older adults; older people; old age; advanced age; seniors; ageing; later life.	≈853,100
S3	TKA=('繁盛'+'兴盛'+'茁壮成长'+'蓬勃发展'+'蓬勃向上'+'繁荣'+'繁茂'+'旺盛感'+'生命旺盛感') English translation: flourishing; prospering; growing vigorously; vigorous development; vigorous and upward; prosperity; luxuriance; sense of thriving; thriving in life.	≈75,600
S4	S1 AND S2 AND S3	275
Limits: Publication dates: January 2000–December 2025; Languages: Chinese; Document types: journal articles; master's and doctoral theses		**246**

7. Wanfang Data

Professional search; 主题 = subject field.

No.	Search terms	Records
S1	主题:("养老院" OR "养老机构" OR "养老服务机构" OR "护理院" OR "护理机构" OR "敬老院" OR "福利院" OR "老年福利院" OR "老年公寓" OR "照护机构" OR "长期照护" OR "长期护理" OR "长期照料" OR "医养结合" OR "医养融合" OR "机构养老") English translation: nursing home; elderly care institution; elderly care service institution; nursing care home; nursing institution; home for the aged; welfare home; welfare home for older adults; senior apartment; care institution; long-term care; long-term nursing care; long-term caregiving; combined medical and elderly care; integrated medical and elderly care; institutional elderly care.	16,365
S2	主题:("老年人" OR "老人" OR "老年" OR "高龄" OR "长者" OR "老龄" OR "晚年") English translation: older adults; older people; old age; advanced age; seniors; ageing; later life.	1,819,379
S3	主题:("繁盛" OR "兴盛" OR "茁壮成长" OR "蓬勃发展" OR "蓬勃向上" OR "繁荣" OR "繁茂" OR "旺盛感" OR "生命旺盛感") English translation: flourishing; prospering; growing vigorously; vigorous development; vigorous and upward; prosperity; luxuriance; sense of thriving; thriving in life.	5,595

No.	Search terms	Records
S4	S1 AND S2 AND S3	—
Limits: Publication dates: January 2000–December 2025; Languages: Chinese; Document types: journal articles; master's and doctoral theses		**223**

Note to strategies 6 and 7: in December 2025, titles and abstracts were screened by two reviewers in the database interface and only the retained records were exported (CNKI, 22; Wanfang, 24); the number of records retrieved was not recorded. The strategies were therefore re-run with the original limits on 1 November 2026, retrieving 246 (CNKI) and 223 (Wanfang) records. All re-run records were screened again independently by two reviewers using the same eligibility criteria and compared by title and author with the records retained in December 2025. All retained records were present in the re-run results, and no additional records were selected for full-text assessment. Figure 1 reports the re-run counts.

8. Supplementary search of CNKI and Wanfang (thriving in life, 生命旺盛感)

Added in revision to check, without the setting block, for Chinese reports on thriving in life (生命旺盛感), which concern mainly community-dwelling older adults. A preliminary search without the setting block had retrieved a large number of records unrelated to care settings, so the setting block was used in strategies 6 and 7. The terms 旺盛感 (sense of thriving) and 生命旺盛感 (thriving in life) were included in the concept block of strategies 6 and 7 but were omitted from the version of this table submitted with the original manuscript. Limits as in strategies 6 and 7.

CNKI (professional search): TKA=('生命旺盛'+'生命旺盛感'+'旺盛感') AND TKA=('老年人'+'老人'+'老年'+'高龄'+'长者'+'老龄'+'晚年'). Date searched: 29 October 2026; records: 8. English translation: ('life thriving' OR 'thriving in life' OR 'sense of thriving') AND ('older adults' OR 'older people' OR 'old age' OR 'advanced age' OR 'seniors' OR 'ageing' OR 'later life').

Wanfang (professional search): 主题:("生命旺盛" OR "生命旺盛感" OR "旺盛感") AND 主题:("老年人" OR "老人" OR "老年" OR "高龄" OR "长者" OR "老龄" OR "晚年"). Date searched: 29 October 2026; records: 7. English translation: subject: ("life thriving" OR "thriving in life" OR "sense of thriving") AND subject: ("older adults" OR "older people" OR "old age" OR "advanced age" OR "seniors" OR "ageing" OR "later life").

Records remaining after removal of duplicates between the two databases: 9 (none duplicated records retrieved by strategies 1–7). Reports meeting the eligibility criteria: 4, namely the three reports on thriving in life listed in Supplementary Table S3, which had first been identified during the preliminary search, and Du et al. [16]. The other five records were unrelated to thriving in older adults.

Summary of records retrieved

Database	Records after limits
CINAHL (EBSCO)	183
MEDLINE (Ovid)	297
APA PsycINFO (Ovid)	111
Scopus (Elsevier)	462
Web of Science Core Collection (Clarivate)	320
China National Knowledge Infrastructure (CNKI) (re-run, 1 November 2026)	246
Wanfang Data (re-run, 1 November 2026)	223
Subtotal, strategies 1–7 (strategies 1–5, 21 December 2025; strategies 6 and 7, re-run 1 November 2026)	**1,842**
Supplementary search (strategy 8): CNKI 8; Wanfang 7	**15**
Total	**1,857**

Supplementary Table S3. Characteristics and conceptual content of the 39 reports included in the theoretical phase.

No.	Report	Country; setting	Design	Definition or description of thriving (source wording)	Attributes, dimensions or themes (source terms)	Antecedents or contextual conditions	Consequences	Relevance to candidate features
Theoretical papers and evidence syntheses								
1	**Bergland & Kirkevold (2001) [6]**	Norway Nursing homes	Theoretical discussion (literature review)	No formal definition; three perspectives reviewed: "(1) thriving as an outcome of growth and development; (2) thriving as a psychological state; (3) thriving as an expression of physical health state." Proposed: "Thriving is therefore related to an attitude of making the best of the situation, taking part in activities and social relationships according to their capacity and wishes."	Requirements for the concept: "It must be a multidimensional concept, including both physical and psychosocial dimensions"; separated from failure to thrive; account for progressive loss of physical function; "take the elderly person's experience of satisfaction into account". Lowered expectations described as "conditional thriving", with the caveat that "one cannot claim that a nursing-home resident who has no expectations of life is thriving".	Institutional rules, fixed schedules and routines limiting residents' influence; relevance limited to a relatively stable phase rather than the terminal phase.	Not specified.	AC, ME, RC; CC (institutional constraints)
2	**Barba et al. (2002) [34]**	USA Nursing homes	Practice model discussion	"Based on this model, frail older adults living in human habitats would live life to the fullest, growing and developing because of positive interactions with their human and nonhuman environment." (Descriptive application citing Haight et al. [14], not an independent formal definition)	Not specified.	Decentralised decision-making, companionship, intergenerational activity and staff support.	Physical, social and psychological resilience (theoretically proposed consequences of the human habitat model; not isolated effects of thriving).	AU, ME, RC, CR; CC
3	**Haight et al. (2002) [14]**	USA Lifespan	Theory development	"Thriving is defined as the ongoing process of growing through continuous human environment interactions, resulting in social, physical, and psychological resilience and growth." (Theory of Thriving)	Critical attributes: "social connectedness, ability to find environment, adaptation to physical patterns, and positive cognitive/affective function" (wording as printed).	"Relational ties, independence, pride, engagement, and self-care" (antecedents); concordance of person, human and non-human environment.	"medical, social, and psychological resilience" (theoretically proposed).	RC, AC, VG; CC (person–environment)
4	**Sullivan & Willis (2018) [10]**	USA Long-term care (6 RNs, 6 residents)	Hybrid concept analysis	Phase 1 working definition: "Thriving involves the individual's response to some situation which could be manifested by vitality and growth, connectedness, self-care ability, weight maintenance, well-being and happiness, resilience, transformation, better mood and cognitive state, and improved physical or psychosocial state." Final definition: "Thriving in LTC is an older adults' situational response manifested by a pattern of satisfying social interactions and connection with others, freedom from pain and physical stressors, appetite and weight maintenance, regular physical activity for benefits of health and as a means to maintain independence, purposeful communication, self-advocacy, autonomy, and contribution, within an environment that is supportive to one's needs and personhood. Thriving was a conscious choice; an acceptance, and willingness to do well." (Final definition proposed by the authors)	Resident categories: "Engagement"; "Approach to Life"; "Reflecting on Life"; "Self-directed Decision-Making"; "Adapting to Life".	Environment supporting needs and personhood; responsive care; safety and comfort.	Not specified.	AC, AU, ME, RC, CR; VG (working definition)

No.	Report	Country; setting	Design	Definition or description of thriving (source wording)	Attributes, dimensions or themes (source terms)	Antecedents or contextual conditions	Consequences	Relevance to candidate features
5	**Zhang et al. (2022) [18]**	China Older adults (general)	Theoretical paper	“本研究将老年人生命旺盛感定义为：老年人在生活中积极维持生命存续与生命意义的意向性活动，是追求健康与福祉生活过程中情感和认知两方面同时存在的心理成长状态，即个体体验到的学习适应、生活意志力、生命活力、乐观态度及和谐关系的心理状态。” English translation: This study defines thriving in older adults as intentional activity to sustain life and its meaning, and a state of psychological growth involving affect and cognition while pursuing health and well-being, comprising learning/adaptation, will to live, vitality, optimism and harmonious relationships. (Explicit definition proposed by the authors)	Theoretical dimensions: “学习适应”; “生活意志力”; “生命活力”; “乐观态度”; “和谐关系”. (English translation: learning/adaptation; will to live; vitality; optimism; harmonious relationships).	Discusses psychological needs and relational/environmental interaction; thriving may be positioned as a motive or an outcome.	Theoretical: thriving may be both a motive and a result of action; the proposed model links it to “促进个体发展和身心健康” (English translation: promoting individual development and physical and mental health).	VG, RC; other (will to live, optimism)
6	**Du et al. (2024) [16]**	China Older adults (general; 14 sources)	Concept analysis (Walker and Avant; literature-based)	“老年人旺盛感是一个人与人文环境和物理环境相互作用达到的主观幸福感，受个体及环境等多方面影响” English translation: Thriving in older adults is subjective well-being achieved through the interaction between the person and the humanistic and physical environment, and it is influenced by individual, environmental and other factors. (Definition proposed by the authors)	Defining attributes: “自我感知良好”; “利用现有资源调整自我期望”; “实现自我的成长和发展” (English translation: good self-perception; adjusting self-expectations by using existing resources; achieving self-growth and development).	Antecedents: “积极的态度”; “高质量的照护者及照护服务”; “良好的物理环境和人文环境” (English translation: a positive attitude; high-quality caregivers and care services; a good physical and humanistic environment).	“老年人拥有更好的适应能力、主观体验和健康水平” (English translation: older adults have better adaptability, subjective experience and health) (theoretically proposed).	AC, VG; ME, RC (within self-growth and development); CC
7	**Baxter et al. (2021b) [8]**	Sweden Nursing homes (7 peer-reviewed sources)	Meta-ethnography	“Thriving can be defined as a holistic concept denoting lived experiences of situated contentment.” (Definition proposed by the synthesis)	Main themes: “ingredients for thriving” (“personal contributors”; “social contributors”) and “environment for thriving” (“spacial contributors”; “societal contributors”).	Choice, relational preferences, care, living spaces and resource arrangements.	None identified: “there was no evidence to suggest negative aspects or consequences to thriving”.	AC, AU, ME, RC; CC
8	**Silvennoinen et al. (2025b) [17]**	Finland Care homes (17 studies, 2012–2022)	Scoping review	“a holistic experience of place-related well-being” (Definition excerpt attributed to Bergland and Kirkevold [6,11,63])	Contributing factors: “the resident’s attitude towards living in a care home”; “the quality of care and caregivers”; “activities and interactions with others”; “qualities of the physical environment”; “health”.	Contributing factors span personal and environmental conditions; two intervention studies identified.	Not specified.	AC, ME, RC; CC
Qualitative studies								
9	**Bergland & Kirkevold (2005) [54]**[a]	Norway Nursing homes (26 residents)	Observation and interviews	“thriving must be conceptualized as a multidimensional phenomenon that includes the residents’ subjective experience of satisfaction” (Definition excerpt attributed to Bergland and Kirkevold [6], explicitly adopted in this study)	Not specified.	Appropriate care from kind caregivers eased life, but its contribution to thriving varied.	Not specified.	RC; CC (care)

No.	Report	Country; setting	Design	Definition or description of thriving (source wording)	Attributes, dimensions or themes (source terms)	Antecedents or contextual conditions	Consequences	Relevance to candidate features
10	**Bergland & Kirkevold (2006) [11]**[a]	Norway Nursing homes (two homes; 26 residents)	Observation and interviews	"From an emotional state perspective, thriving is considered a state of satisfaction or psychological well-being, emanating from a positive balance between the expectations of the individual and the environment's capacity to meet the expectations" (Emotional-state perspective attributed to earlier work)	Contributing aspects: "The residents' attitude towards living in a nursing home"; "the quality of care and caregivers"; "Positive peer relationships"; "participation in meaningful activities"; "opportunities to go outside the ward or nursing home"; "positive relationships with family"; "qualities in the physical environment".	Quality of care, outdoor opportunities and physical environment (listed among contributing aspects).	Not specified.	AC, ME, RC; CC
11	**Bergland & Kirkevold (2008) [63]**[a]	Norway Nursing homes (two homes; 26 mentally lucid residents)	Qualitative descriptive exploratory (field observation and interviews)	"Defined as 'living life fully' (Haight et al. [14]) within the health and contextual constraints of the individual, thriving is assumed to be an ongoing process and the result of an optimal interaction between persons and their human and non-human environment" (Conceptual description citing earlier work and Haight et al. [14]); "thriving is achieved when there is a good match between the individual's expectations and the environment's capability to fulfil them" (citing earlier work).	Not specified as attributes. Findings: "peer relationships had to be experienced as positive and meaningful"; "A personal relationship to peer residents was not essential to an experience of thriving among all the residents"; some residents thriving without peer relationships "seemed to downgrade the importance of peer relationships" (interpreted as an accommodative strategy).	Caregivers' role "as facilitators in the development of meaningful interactions"; residents' "varied wishes, expectations and capacity to interact with peer residents"; frequent contact with family.	Not specified.	RC, AC (accommodative strategy); CC (caregiver facilitation)
12	**Lund & Engelsrud (2008) [51]**	Norway Senior centre	Participant observation	"which was associated with involvement in the community and participation in the structured daily activities to promote the senses of belonging and being useful." (Description of observed meaning, not a formal definition)	Experiential meanings: "belonging"; "being useful".	Senior-centre opportunities, social interaction and cultural ideals of youth/healthy bodies.	Not specified.	ME, RC, CR (usefulness)
13	**Østensen et al. (2017) [72]**[b]	Norway Residential care facilities and supported senior apartments (15 older adults, two municipalities)	Qualitative exploratory intervention (tablet workshops over 1 year)	No formal definition; thriving treated as a subjective experience supported through participation.	Not specified; findings describe enjoyment, social participation and "subjective experiences of thriving"; "all kinds of use and all levels of mastery generated a sense of pride that supported thriving and enjoyment".	Four-component model: "simplified tools"; "person-centered process"; "young volunteers to teach technology, establishing an intergenerational arena"; "being mindful of driving forces that encourage use and learning".	Not specified.	ME, RC, VG (mastery, learning); CC (technology)
14	**Øderud et al. (2017) [50]**[b]	Norway Residential care facilities; supported senior apartments (15 older adults)	Exploratory intervention (conference paper)	"Thriving can be seen as subjective experiences of meaningfulness, wellbeing, and experienced quality of life." (Conceptual description)	Qualitative themes: "Sense of Accomplishment, Confidence and Thriving"; "Staying Informed and Feeling Included in Society"; "Social Contact and Participation"; "Bridging the Gap between Generations".	Tablets, internet access, interest-based applications and young volunteer tutors.	Not specified.	VG, ME, RC; CC (technology)

No.	Report	Country; setting	Design	Definition or description of thriving (source wording)	Attributes, dimensions or themes (source terms)	Antecedents or contextual conditions	Consequences	Relevance to candidate features
15	**Ericson-Lidman (2019) [73]**	Sweden Residential care (6 residents)	Qualitative content analysis	No formal definition; thriving reported as an experiential category.	Theme: "Struggling between a sense of belonging and a sense of alienation". Category "Feelings of thriving": "The significance of visits from loved ones"; "A functional communication with the care providers"; "The pleasant physical care environment"; "Being secure and met with respect"; "To be satisfied with one's life". Contrasting category "Feelings of loneliness": "The unpleasant physical care environment"; "The daily life at the residence is boring"; "Being insecure and met with disrespect"; "Feelings of losses".	Visits, communication, setting and care responses.	Not specified.	AC, RC; other (security, respect)
16	**Baxter et al. (2020) [7]**	Australia Nursing home (rural; 21 residents)	Qualitative (phenomenological hermeneutic; narrative interviews with residents)	"a multidimensional phenomenon that encompasses elements of subjective well-being, environmental adjustment, and life satisfaction" (Definition excerpt citing Bergland and Kirkevold [6,11])	Themes: "Striving toward acceptance of being in a nursing home while maintaining a positive outlook"; "Feeling supported and cared for while maintaining a sense of independence"; "Balancing opportunities for solitude and company while living with others"; "Feeling a sense of home while residing in an institutional environment". Comprehensive understanding: "having options" and "having choices".	Available care, choice, personal space and activity arrangements.	Not specified.	AC, AU, RC, ME
17	**Baxter et al. (2021a) [15]**[c]	Australia Nursing home (rural; 14 nurses: 2 RNs, 12 ENs)	Qualitative (content analysis; staff interviews)	"place-related well-being relative to the individual and the wider institutional, relational and environmental context" (Conceptual description excerpt citing earlier work)	Main categories: "Understanding thriving"; "Observing thriving"; "Sensing thriving"; sub-categories include "Seeing resident participation and engagement", "Perceiving resident attitudes towards living in the nursing home" and "Feeling that residents are content and satisfied". Descriptive terms: "growth, development or contentment".	Poor physical or mental health affects thriving, but residents "could still be observed to thrive with support from other people and utilization of resources within the nursing home".	Not specified.	AC, ME, RC, VG (staff perspective)
18	**Corneliusson et al. (2023) [55]**[d]	Sweden Sheltered housing (5 accommodations; 38 residents in 7 group interviews)	Qualitative (group interviews)	"a holistic concept denoting lived experiences of situated contentment" (Definition excerpt attributed to Baxter et al. [8])	Facilitator and barrier categories: "individual factors"; "social context"; "environmental factors"; "organisational context".	Declining health, unmet expectations and social tensions are barriers; support, accessibility and services are facilitators. Residents "commonly reported supporting each other by either volunteering, or assisting and helping neighbours with practical matters".	Not specified.	AC, AU, RC, CR (mutual help); CC

No.	Report	Country; setting	Design	Definition or description of thriving (source wording)	Attributes, dimensions or themes (source terms)	Antecedents or contextual conditions	Consequences	Relevance to candidate features
19	**Morgan Brett et al. (2024) [49]**	UK Care homes (16 homes; 125 participants: older people, families, care teams, managers)	Qualitative (grey-literature report)	"doing well, progressing, or improving in an aspect of life, even despite challenges. This might include self-development, personal growth or increased resilience." (Definition used in the report)	Dimensions: "Thrive Relationally"; "Thrive Actively"; "Thrive Inclusively"; "Thrive Securely"; "Thrive with Dignity"; "Thrive Healthily". "Thrive Actively" includes "Active Citizenship and Reciprocity": "finding roles which gave them the opportunity to contribute to their care home community".	Personalised support, activity opportunities, inclusive care, timely assistance and healthcare.	Not specified.	AU, ME, RC, VG, CR; other (security, dignity, inclusion, health)
20	**Baxter et al. (2025) [74]**[c]	Australia Nursing home	Qualitative (staff interviews)	"Thriving is described as resulting from optimal interactions between a person and their human and non-human environment, indicating a good fit between the person and their life-world" (Theoretical description attributed to Haight et al. [14])	Promotion themes: "Promoting personalized care"; "Promoting opportunities for autonomy"; "Promoting meaning and connection"; "Promoting a curated environment".	Personalised care, choices, meaningful activities, relationships and environmental arrangements.	Not specified.	AU, ME, RC; CC (staff perspective)
Quantitative studies								
21	**Bergland et al. (2014) [75]**[c]	Norway Nursing homes (12 homes; 48 resident–family–staff triads)	Instrument development (cross-sectional survey)	"refers to a subjective experience of being or feeling well, content, in positive relationships and settling in" (Definition excerpt citing earlier work and Bergland and Kirkevold [11])	Instrument development domains: "residents' mental attitude towards living in a nursing home"; "quality of the care and caregivers"; "positive relationships with other residents"; "participation in meaningful activities"; "opportunities to get outside and around"; "relationships with family"; "qualities in the physical environment".	Care and environment (instrument content).	Not specified.	AC, RC; CC
22	**Bergland et al. (2015) [9]**[c]	Norway, Sweden Long-term care (13 facilities; 259 residents, 146 family members, 52 staff)	Psychometric validation (cross-sectional; exploratory factor analysis)	"In the Scandinavian languages, 'thriving' is a frequently used phrase to describe a person's level of well-being in relation to the extent to which the person has settled into, or enjoy being in a specific place or environment" (citing earlier work); residents who thrive "have settled down, found their place in the new environment and experience their life as being as good as possible in this institutional environment".	Five factors: "Resident' attitudes towards being in long-term care"; "Quality of care and caregivers"; "Resident engagement and peer relationships"; "Keeping in touch with people and places"; "Quality of the physical environment". Underlying theory: seven dimensions, "two core and five additional dimensions".	Interaction of the person, the human environment and the non-human environment (citing Haight et al. [14]).	Not specified.	AC, ME, RC; CC (care, environment)
23	**Patomella et al. (2016) [59]**	Sweden Nursing homes	Cross-sectional	"Thriving is conceptualized as people's experiences of well-being in relation to the environment where they live." (Conceptual definition)	Theoretical dimensions: core—"Residents' mental attitude towards living in a nursing home"; "The quality of care and caregivers"; additional—"Relationships with family"; "Participation in meaningful activities"; "Opportunities to get outside and around"; "Positive relationships with other residents"; "Qualities in the physical environment".	Higher-scoring residents had better function, less cognitive impairment/fewer behavioural symptoms and more outdoor opportunities.	Not specified.	AC, ME, RC; CC (function, outdoor opportunities)

No.	Report	Country; setting	Design	Definition or description of thriving (source wording)	Attributes, dimensions or themes (source terms)	Antecedents or contextual conditions	Consequences	Relevance to candidate features
24	**Björk et al. (2017) [53]**[f]	Sweden Nursing homes	Cross-sectional	"The concept of thriving is defined as experiences of well-being in relation to the place where a person lives, as emerging from an interaction between the person and the living environment" (Definition citing Bergland and Kirkevold [11], earlier work and Bergland et al. [75])	Contributing aspects: "the quality of care and caregivers"; "relationships with family"; "opportunities to go outside".	Activity programmes, dressing nicely and spending time with someone were positively associated with thriving.	Not specified.	ME, RC; CC (activities)
25	**Björk et al. (2018a) [70]**[f]	Sweden Nursing homes	Cross-sectional	"Thriving is a concept that denotes experiences of well-being in relation to the living environment." (Conceptual definition)	Not specified.	Positive psychosocial climate, newspaper access, special care units and unlocked facilities were associated with higher thriving.	Not specified.	AU; CC (environment)
26	**Björk et al. (2018b) [76]**[f]	Sweden Nursing homes	Cross-sectional	"Thriving has been described as a nursing concept denoting human growth from optimal interactions between the person and the environment in different stages throughout life" (Theoretical description citing Haight et al. [14])	Theoretical model components (citing Bergland and Kirkevold [11]): core—"residents' attitudes towards living in the nursing home"; "the quality of care and caregivers"; additional—"relationships with family"; "opportunities to go outside"; "qualities of the physical environment"; "positive relationships with other residents"; "engagement in activities meaningful to the resident".	Aggression and depressive symptoms were associated with lower thriving; patterns varied by cognitive functioning.	Not specified.	AC, ME, RC; CC (health, cognition)
27	**Baxter et al. (2019) [77]**[f]	Sweden Nursing homes	Psychometric evaluation	"The adaptation of the concept of thriving for nursing home residents has been said to emphasize subjective experiences of well-being in relation to the environment where a person lives" (Definition excerpt attributed to Bergland and Kirkevold [6,11])	Scale domains: "the resident's attitude (towards living in a nursing home)"; "quality of care and caregivers"; "resident engagement and peer relationships"; "keeping in touch with people and places"; "qualities in the physical environment".	Care and environment items (scale content).	Not specified.	AC, ME, RC; CC (care, environment)
28	**Corneliusson et al. (2020) [78]**[d]	Sweden Sheltered housing; community	Matched-group survey	"Thriving is a concept closely related to well-being, where the interaction between the person, the human environment, and non-human environment that contributes to an individual's well-being in the context of their place of residence is explored" (Conceptual description citing Bergland et al. [9])	Scale dimensions (TOPAS-SH): "residents' attitude, quality of care and caregivers, resident engagement and peer relationships, keeping in touch with people and places and qualities in the physical environment".	Function, self-rated health and depression interact with residential setting in patterns of thriving.	Not specified.	AC, ME, RC; CC (person–environment fit)
29	**Lämås et al. (2020) [52]**[g]	Sweden Home care	Cross-sectional	"The concept of thriving is a frequently used everyday word in the Scandinavian languages to describe the lived experience of the extent to which a person enjoys being in a specific place or environment." (Everyday Scandinavian meaning)	Scale domains: "residents' attitude towards the place they were currently living"; "quality of care and caregivers"; "activities and peer relationships"; "opportunities to keep in touch with people and places"; "qualities in the physical environment".	Social relationships and self-determination in activities inside and outside the home were associated with thriving.	Not specified.	AU, ME, RC; CC

No.	Report	Country; setting	Design	Definition or description of thriving (source wording)	Attributes, dimensions or themes (source terms)	Antecedents or contextual conditions	Consequences	Relevance to candidate features
30	**Lämås et al. (2021) [79]**[g]	Sweden Home care	Non-randomised controlled trial	"It is used to describe an experience of enjoying to be in a specific place or environment." Everyday meaning of thriving.	Scale subscales: "residents' attitude towards the place they are currently living in; quality of care and caregivers; HCS recipients' activities and peer relationships; opportunities to keep in touch with people and places of importance; and quality of the physical environment".	Staff care practices and opportunities for recipient participation are intervention components.	Not specified.	AC, AU, ME, RC; CC (care practices)
31	**Li et al. (2021) [20]**	Taiwan Long-term care facilities	Cross-cultural psychometric study	"Despite gradual loss of physical functions, thriving refers to a sense of spiritual and psychological well-being and growth" (Conceptual description attributed to Bergland and Kirkevold [6])	Scale domains: "resident attitudes towards being in long-term care"; "quality of care and caregivers"; "resident engagement and peer relationships"; "keeping in touch with people and places"; "quality of the physical environment".	Care and environment domains (scale content).	Not specified.	AC, ME, RC; CC (care, environment)
32	**Baxter et al. (2022) [80]**[f]	Sweden Nursing homes	Repeated cross-sectional	"Experiences of thriving are theorised to emerge from balanced interactions between a person and their human and non-human environment." (Theoretical description citing Haight et al. [14])	Contributing aspects: "the residents' attitude towards living in a long-term care facility"; "the quality of care and caregivers".	Agitation/aggression, depression, apathy and irritability were negatively associated with thriving; elation/euphoria was positively associated.	Not specified.	AC; CC (care, health)
33	**Sjögren et al. (2022) [81]**	Australia, Norway, Sweden Nursing homes	Non-randomised controlled study	"Thriving is an emerging concept in long-term care, referring to a subjective experience of well-being in relation to the place in which a person lives" (Definition attributed to Bergland and Kirkevold [11] and Bergland et al. [75])	Components (citing Baxter et al. [8]): "individual attributes, relationships with others, the lived environment and societal structure".	Individualised social/leisure activities and care-environment changes are intervention components.	Not specified.	ME, RC; CC (care environment)
34	**Forster et al. (2023) [82]**	Norway Community	Cross-sectional	"To what extent do you thrive in your local community?" Measurement item; no formal definition.	Not specified.	Built-environment accessibility and disability were associated with thriving, including an interaction.	Not specified.	CC (accessibility)
35	**Zhang et al. (2023) [83]**	China Community (urban)	Network simulation	"生命旺盛（心理）现象，又称生命旺盛感，是指老年人在生活中积极维持生命存续与生命意义的意向性心理活动，是追求健康与幸福生活过程中情感和认知两方面同时存在的心理成长状态，即个体体验到的学习适应力、生活意志力、生命活力、乐观态度及和谐关系的心理状态" English translation: Thriving is an intentional psychological activity through which older adults sustain life and its meaning; it is a state of psychological growth involving affect and cognition in pursuing health and happiness, comprising learning/adaptive capacity, will to live, vitality, optimism and harmonious relationships. (Definition attributed to earlier work)	Theoretical dimensions: "学习适应力"; "生活意志力"; "生命活力"; "乐观态度"; "和谐关系". (English translation: learning/adaptive capacity; will to live; vitality; optimism; harmonious relationships).	Not applicable (simulation parameters).	Not specified.	VG, RC

No.	Report	Country; setting	Design	Definition or description of thriving (source wording)	Attributes, dimensions or themes (source terms)	Antecedents or contextual conditions	Consequences	Relevance to candidate features
36	**Santana-Berlanga et al. (2024) [45]**	Spain Nursing homes	Cross-cultural psychometric study	"Thriving implies that older adults have found their place in the nursing home environment, experiencing an improvement in their quality of life." (Conceptual description rather than a new formal definition)	Scale factors: "Resident attitude"; "Quality of Care and Caregivers"; "Resident Engagement and Peer Relationships"; "Keeping in Touch with People and Places"; "Qualities in the Physical Environment".	Care and environment (inherited scale content).	Not specified.	AC, ME, RC; CC
37	**Zhang et al. (2024a) [19]**[h]	China Community (urban)	Cross-sectional	"Thriving is related to a composite state that exhibits the following aspects: making the best of the situation, taking part in activities, and maintaining social relationships by the capacity and wishes." (Description of thriving in life, reproduced as written)	Measurement dimensions: "perceived harmonious relations"; "live for the moment"; "maintain personal growth"; "maintain vitality".	Attitudes towards own ageing were modelled as moderators; causal antecedents were not established.	Quality of life and suicidal ideation were modelled as outcomes of thriving in life (cross-sectional; associations, not established effects).	VG, RC, AC
38	**Zhang et al. (2024b) [71]**[h]	China Community (urban)	Cross-sectional	"也即老年人在生活中积极维持既有生命存续与生命意义的意向性活动，是老年人在追求健康与福祉过程中情感、行动和认知三方面同时存在心理成长的综合状态。" English translation: That is, intentional activity through which older adults sustain their existing life and its meaning, and an integrated state of psychological growth involving emotion, action and cognition in their pursuit of health and well-being. (Authors' description of their previously developed concept)	Measurement dimensions: "学习、活力、积极关系及活在当下". (English translation: learning, vitality, positive relationships and living in the present).	Optimistic disposition, attitudes towards own ageing and perceived social support were tested as moderators.	"城市老年人的生命旺盛感能够积极预测老年人的心理幸福感" English translation: thriving in life positively predicts psychological well-being among urban older adults (cross-sectional).	VG, RC
39	**Silvennoinen et al. (2025a) [84]**	Finland Care homes	Cross-sectional	"Thriving has been defined as a holistic experience of place-related well-being as a result of human-environment interaction." (Cited definition; references 6 and 7 in the article)	Theoretical dimensions (citing Bergland and Kirkevold [11]): core—"the resident's attitude towards living in the nursing home"; "the quality of care and caregivers"; additional—"positive relationships with other residents"; "participation in meaningful activities"; "opportunities to get outside and around"; "relationships with family"; "qualities of the physical environment".	InterRAI social engagement had the strongest association with thriving, followed by female gender.	Not specified.	AC, ME, RC; CC

Note. Reports are grouped by type of report and listed chronologically within each group; numbers in square brackets refer to the reference list of the main manuscript. Quoted text reproduces source wording; Chinese definitions are followed by an English translation. Unquoted text is paraphrase. "Not specified" indicates that no defining attributes, conditions or consequences were identified in the examined text. Consequences include only effects attributed to thriving itself; correlates, psychometric results and effects of interventions on thriving are excluded, and theoretically proposed consequences are labelled as such. Few reports specified consequences separately.

Relevance to candidate features (mapping by the authors): AC, acceptance and contentment; AU, autonomy and control within dependence; ME, meaningful engagement and participation; RC, relational connectedness and a sense of home; VG, vitality, growth and continued learning; CR, contribution and reciprocity; CC, contextual conditions; other, content not covered by the candidate features.

Linked reports (not independent samples): a, reports 9–11 (same research programme); b, reports 13 and 14 (same tablet and volunteer intervention project); c, reports 17 and 20 (same nursing home and same staff sample of 14 nurses; probably the same interviews); d, reports 18 and 28 (same sheltered-housing study); e, reports 21 and 22 (same instrument development programme); f, reports 24–27 and 32 (same national nursing-home survey programme); g, reports 29 and 30 (baseline and intervention data from the same home-care study); h, reports 37 and 38 (same survey sample of 764 urban older adults, October 2019–December 2020). The 39 reports therefore represent 27 distinct studies or research programmes.

Supplementary Table S4. Mapping of the 39 reports included in the theoretical phase to the six candidate features and to contextual conditions, with the type of evidence each report provides.

No.	Report	Country; setting	Design	Evidence type	AC	AU	ME	RC	VG	CR	CC
1	Bergland & Kirkevold (2001) [6]	Norway; Nursing homes	Theoretical discussion (literature review)	T	●		●	●			●
2	Barba et al. (2002) [34]	USA; Nursing homes	Practice model discussion	T		●	●	●		●	●
3	Haight et al. (2002) [14]	USA; Lifespan	Theory development	T	●			●	●		●
4	Sullivan & Willis (2018) [10]	USA; Long-term care (6 RNs, 6 residents)	Hybrid concept analysis	R	●	●	●	●	●*	●	
5	Zhang et al. (2022) [18]	China; Older adults (general)	Theoretical paper	T				●	●		
6	Du et al. (2024) [16]	China; Older adults (general; 14 sources)	Concept analysis (literature-based)	T	●		●	●	●		●
7	Baxter et al. (2021b) [8]	Sweden; Nursing homes (7 peer-reviewed sources)	Meta-ethnography	Y	●	●	●	●			●
8	Silvennoinen et al. (2025b) [17]	Finland; Care homes (17 studies, 2012–2022)	Scoping review	Y	●		●	●			●
9	Bergland & Kirkevold (2005) [54][a]	Norway; Nursing homes (26 residents)	Observation and interviews	R				●			●
10	Bergland & Kirkevold (2006) [11][a]	Norway; Nursing homes (two homes; 26 residents)	Observation and interviews	R	●		●	●			●
11	Bergland & Kirkevold (2008) [63][a]	Norway; Nursing homes (two homes; 26 mentally lucid residents)	Qualitative descriptive exploratory (field observation and interviews)	R	●			●			●
12	Lund & Engelsrud (2008) [51]	Norway; Senior centre	Participant observation	O			●	●		●	
13	Østensen et al. (2017) [72][b]	Norway; Residential care facilities and supported senior apartments (15 older adults, two municipalities)	Qualitative exploratory intervention (tablet workshops over 1 year)	R			●	●	●		●
14	Øderud et al. (2017) [50][b]	Norway; Residential care facilities; supported senior apartments (15 older adults)	Exploratory intervention (conference paper)	R			●	●	●		●
15	Ericson-Lidman (2019) [73]	Sweden; Residential care (6 residents)	Qualitative content analysis	R	●			●			
16	Baxter et al. (2020) [7]	Australia; Nursing home (rural; 21 residents)	Qualitative (phenomenological hermeneutic; narrative interviews with residents)	R	●	●	●	●			
17	Baxter et al. (2021a) [15][c]	Australia; Nursing home (rural; 14 nurses: 2 RNs, 12 ENs)	Qualitative (content analysis; staff interviews)	S	●		●	●	●		
18	Corneliusson et al. (2023) [55][d]	Sweden; Sheltered housing (5 accommodations; 38 residents in 7 group interviews)	Qualitative (group interviews)	O	●	●		●		●	●
19	Morgan Brett et al. (2024) [49]	UK; Care homes (16 homes; 125 participants: older people, families, care teams, managers)	Qualitative (grey-literature report)	R		●	●	●	●	●	
20	Baxter et al. (2025) [74][c]	Australia; Nursing home	Qualitative (staff interviews)	S		●	●	●			●
21	Bergland et al. (2014) [75][e]	Norway; Nursing homes (12 homes; 48 resident–family–staff triads)	Instrument development (cross-sectional survey)	Q	●			●			●
22	Bergland et al. (2015) [9][e]	Norway, Sweden; Long-term care (13 facilities; 259 residents, 146 family members, 52 staff)	Psychometric validation (cross-sectional; exploratory factor analysis)	Q	●		●	●			●

No.	Report	Country; setting	Design	Evidence type	AC	AU	ME	RC	VG	CR	CC
23	Patomella et al. (2016) [59]	Sweden; Nursing homes	Cross-sectional	Q	●		●	●			●
24	Björk et al. (2017) [53][f]	Sweden; Nursing homes	Cross-sectional	Q			●	●			●
25	Björk et al. (2018a) [70][f]	Sweden; Nursing homes	Cross-sectional	Q		●					●
26	Björk et al. (2018b) [76][f]	Sweden; Nursing homes	Cross-sectional	Q	●		●	●			●
27	Baxter et al. (2019) [77][f]	Sweden; Nursing homes	Psychometric evaluation	Q	●		●	●			●
28	Corneliusson et al. (2020) [78][d]	Sweden; Sheltered housing; community	Matched-group survey	QO	●		●	●			●
29	Lämås et al. (2020) [52][g]	Sweden; Home care	Cross-sectional	QO		●	●	●			●
30	Lämås et al. (2021) [79][g]	Sweden; Home care	Non-randomised controlled trial	QO	●	●	●	●			●
31	Li et al. (2021) [20]	Taiwan; Long-term care facilities	Cross-cultural psychometric study	Q	●		●	●			●
32	Baxter et al. (2022) [80][f]	Sweden; Nursing homes	Repeated cross-sectional	Q	●						●
33	Sjögren et al. (2022) [81]	Australia, Norway, Sweden; Nursing homes	Non-randomised controlled study	Q			●	●			●
34	Forster et al. (2023) [82]	Norway; Community	Cross-sectional	QO							●
35	Zhang et al. (2023) [83]	China; Community (urban)	Network simulation	QO				●	●		
36	Santana-Berlanga et al. (2024) [45]	Spain; Nursing homes	Cross-cultural psychometric study	Q	●		●	●			●
37	Zhang et al. (2024a) [19][h]	China; Community (urban)	Cross-sectional	QO	●			●	●		
38	Zhang et al. (2024b) [71][h]	China; Community (urban)	Cross-sectional	QO				●	●		
39	Silvennoinen et al. (2025a) [84]	Finland; Care homes	Cross-sectional	Q	●		●	●			●
Number of reports describing each feature: all reports				**39**	**24**	**10**	**26**	**36**	**11**	**5**	**29**
of which residents' accounts, long-term residential care (R)				9	5	3	6	9	4	2	5
of which older people's accounts, other settings (O)				2	1	1	1	2	0	2	1
of which staff accounts (S)				2	1	1	2	2	1	0	1
of which quantitative or measurement, long-term care (Q)				12	9	1	9	10	0	0	12
of which quantitative, other settings (QO)				7	3	2	3	6	3	0	4
of which theoretical or conceptual (T)				5	3	1	3	5	3	1	4
of which evidence syntheses (Y)				2	2	1	2	2	0	0	2

Note. ● indicates that the feature appeared in the report's definition or description of thriving, in residents' or staff members' accounts of thriving, or in the dimensions or items used to measure it; CC indicates that the report described factors related to care, the environment, activities or health that shaped thriving. The wording and content are given in Supplementary Table S3. Mapping was conducted by one author (Y.L.) and checked by a second author (L.X.); a report could be mapped to more than one feature. Counts indicate how often a feature appeared, not its importance, because qualitative accounts, measurement dimensions and statistical associations provide different kinds of evidence. Marks for reports that used the TOPAS largely reflect the dimensions of that instrument and are therefore not independent of one another. Reports are numbered as in Supplementary Table S3.

Features: AC, acceptance and contentment; AU, autonomy and control within dependence; ME, meaningful engagement and participation; RC, relational connectedness and a sense of home; VG, vitality, growth and continued learning (provisional); CR, contribution and reciprocity (provisional); CC, contextual conditions.

Evidence type: R, qualitative accounts of residents or older people in nursing homes or other long-term residential care (Report 4 also includes nurses; Report 19 also includes families and care teams); O, qualitative accounts of older people in other settings (senior centre, sheltered housing); S, qualitative accounts of nursing-home staff; Q, quantitative, psychometric or intervention studies in long-term care; QO, quantitative studies in other settings (sheltered housing, home care, community); T, theoretical or conceptual papers; Y, evidence syntheses.

a–h Linked reports (not independent samples), as defined in Supplementary Table S3; the 39 reports represent 27 distinct studies or research programmes. Numbers in square brackets refer to the reference list of the main manuscript.

***** Report 4: vitality and growth appeared in the working definition drawn from the literature rather than in residents' accounts.

Supplementary Table S5. PRISMA-ScR checklist for the scoping review conducted in the theoretical phase.

Items follow Tricco et al. [27]. Locations refer to sections, tables and figures of the revised manuscript.

No.	Item	Location in revised manuscript	Reported content
Title			
1	Title	Title	Identified as a hybrid concept analysis; the scoping review forms its theoretical phase.
Abstract			
2	Structured summary	Abstract	Background, objectives, methods, results and conclusions.
Introduction			
3	Rationale	Section 1	Contributions and limitations of previous concept analyses, syntheses and the Chinese TOPAS; rationale for the hybrid model.
4	Objectives	Sections 1 and 2.3	Study aim (Section 1); three review questions and Population–Concept–Context elements (Section 2.3).
Methods			
5	Protocol and registration	Section 4.7	No protocol was prepared or registered.
6	Eligibility criteria	Section 2.3	PCC framework; eligibility and exclusion criteria; publication period and languages, with rationale.
7	Information sources	Section 2.3; Supplementary Table S2	Seven databases (Scopus, Web of Science Core Collection, PsycINFO, CINAHL, MEDLINE, CNKI, Wanfang); date of search for each database; supplementary search of CNKI and Wanfang without the setting block (29 October 2026).
8	Search	Supplementary Table S2	Full electronic search strategy for each database, including limits.
9	Selection of sources of evidence	Section 2.3; Figure 1	Independent title/abstract and full-text screening by two reviewers; third reviewer for disagreements; reasons for full-text exclusion.
10	Data charting process	Section 2.3	Standardised form; independent charting by two reviewers; discrepancies resolved through discussion.
11	Data items	Section 2.3	Author, year, country, design, population, definition of thriving, attributes, antecedents, consequences and measures.
12	Critical appraisal of individual sources of evidence	Section 2.3	Methodological quality not formally appraised, consistent with the conceptual aim and scoping-review methodology.
13	Synthesis of results	Section 2.3	Qualitative content analysis with inductive and deductive steps, using existing conceptualisations as sensitising concepts; classification into attributes, antecedents/conditions and consequences; mapping of all reports (Supplementary Table S4).
Results			
14	Selection of sources of evidence	Figure 1	Records identified, screened, sought for retrieval, assessed and included, with reasons for exclusion.
15	Characteristics of sources of evidence	Supplementary Table S3	Country, setting, design and conceptual content of each of the 39 reports; linked reports identified.
16	Critical appraisal within sources of evidence	Not applicable	Not conducted (see item 12).
17	Results of individual sources of evidence	Supplementary Tables S3 and S4	Definitions, attributes, antecedents/conditions and consequences of each report; mapping to candidate features and evidence type.
18	Synthesis of results	Section 3.1; Table 2; Supplementary Table S4	Four recurrent candidate attributes and two provisional features; consequences rarely specified.
Discussion			
19	Summary of evidence	Sections 4.1–4.2	Refined attributes in relation to previous research.

No.	Item	Location in revised manuscript	Reported content
20	Limitations	Section 4.7	Heterogeneous literature base; no protocol prepared or registered; language, period and search-term restrictions; author-led mapping.
21	Conclusions	Section 5	Provisional, context-specific framework and implications for research and assessment.
Funding			
22	Funding	Funding and Conflicts of Interest statements	Sources of funding for the study; the funders had no role in the study.

Supplementary Table S6. Illustrative coding trails for the two provisional features, from residents' statements to analytical decisions.

Provisional feature	Resident statement (participant)	Code	Category	Analytical decision	Alternative classification considered	Reason the final classification was preferred
Vitality, growth and continued learning	"I had to train this leg well again. I'd be so tired I couldn't move, done in — but now it's trained up." (P04)	Regaining walking through sustained, self-directed practice after a stroke	Maintaining function through one's own effort	Placed within autonomy and control within dependence: framed as recovering and maintaining capacity rather than growth beyond earlier capacity	Growth	Described as recovering a former capacity (training the leg "back"), not as gaining a new one
	"After all, I still have things of my own—number puzzles to fill in and work out. Move the brain, keep the brain moving." (P05)	Keeping the mind active with number puzzles	Using mind and body to fill the day	Placed within meaningful engagement: valued for keeping the mind in use, not described as learning	Continued learning	Valued for keeping the mind from sitting idle; no new knowledge or skill described
	Followed history and culture programmes and current affairs: "At our age, world affairs still deserve attention." (P03)	Following history programmes and current affairs	Valued everyday activity	Placed within meaningful engagement	Continued learning	Valued for the programmes' content and as something to talk about with other residents; learning or personal growth not described. Borderline case resting on the analysts' judgement
	"At this age it's naturally less; the energy is limited. Compared with the others, though, I'm better off." (P01; response to a direct question about vitality)	Reduced energy accepted as part of ageing; favourable comparison with other residents	Vitality as abundant energy rarely described	Vitality not supported as a distinct element in these accounts; statement also reflects acceptance and contentment	Vitality	Energy described as limited and accepted as part of ageing, not as abundant vitality
Contribution and reciprocity	"The care workers are busy; at nine o'clock it's often still me who switches it on. … I have to do them myself anyway." (P03)	Starting the group exercises when staff were busy	Shared everyday activity	Placed within meaningful engagement	Contribution	Done because staff were busy and he exercised anyway; not described as feeling useful or as part of his own well-being
	Shared food with other residents and spoke up for those who were teased (P04)	Sharing with and protecting fellow residents	Caring relationships with peers	Expressed through relational connectedness	Contribution	Sharing described as eating together and speaking up as a matter of fairness; neither described as feeling useful or as part of her own well-being
	Raised with the manager the needs of a resident with severe tremor (P06)	Advocating for a fellow resident	Concern for others in the home	Expressed through relational connectedness; content not distinct from existing attributes	Contribution	Described in terms of the other resident's needs, not as a source of her own well-being

Note. Statements are translated from Mandarin; paraphrased entries are summarised from interview transcripts. Codes and categories are condensed English renderings of the Mandarin codes. The provisional features were explored through follow-up probes when residents mentioned related experiences and through direct questions when they did not (Section 2.4.2). Alternative classifications and the reasons for the final classifications were added in the second revision, when each coding trail was re-examined against the transcripts. Reciprocity was judged by whether residents described help given and received between residents; no accounts of such mutual exchange were found.