

**Supplementary Table S6.** Studies reporting other physical fitness, ADL and QoL outcomes

Study	Domain	Outcome measure	Brief description of the results	Results
Hasegawa et al., 2013	Physical fitness	TUG (time)	Improvement: After 3 months intervention the CBR program significantly improved TUG time, gait speed, handgrip strength, and one-leg standing time in female participants, but not in males (comparison made pre-post intervention within gender cohorts in the intervention group only) (post-intervention)	Female: 10.5 (2.4) <sup>§</sup> p=0.01 <sup>b)</sup> Male: 10.5 (1.6) <sup>§</sup> p=0.82 <sup>b)</sup>
	Physical fitness	Gait speed (m/s)		Female: 5.0 (1.3) <sup>§</sup> p<0.01 <sup>b)</sup> Male: 4.8 (0.6) <sup>§</sup> p=0.81 <sup>b)</sup>
	Physical fitness	Handgrip strength		Female: 21.8 (4.4) <sup>§</sup> p=0.05 <sup>b)</sup> Male: 28.8 (7.6) <sup>§</sup> p=0.09 <sup>b)</sup>
	Physical fitness	One-leg standing time		Female: 27.0 (20.5) <sup>§</sup> p<0.01 <sup>b)</sup> Male: 28.8 (7.6) <sup>§</sup> p=0.48 <sup>b)</sup>
Dun et al., 2022	Physical fitness	2.4-meter TUG (time)	Improvement: After 3 months intervention the CBR program (supervised exercise) significantly improved functional ability compared with un-supervised exercise (post-intervention)	CBR group: 0.7 (0.1-1.3) <sup>  </sup> : Control group: -1.1 (-1.4 to -0.82.6) <sup>  </sup> , p<0.001 <sup>a)</sup>
Harel-Katz et al., 2020	Other physical fitness	FIM (score)	Improvement: After 12 weeks intervention focused on practicing self-management skills, the CBR group showed significant in functional ability compared to control group (post-intervention)	CBR group: 83.90 (5.35) <sup>§</sup> : Control group: 77.21 (15.77) <sup>§</sup> p<0.01 <sup>a)</sup>
	ADL	RNLI	Improvement: After 24 weeks the RNLI score improved significantly in encouraging participation after stroke in both the self-management program group	CBR group: 2.73 (12.84) <sup>§</sup> : Control group: 8.45 (18.30) <sup>§</sup> , p=0.27 <sup>a)</sup>
Wang et al., 2020	Physical fitness	Exercise adherence (score)	Improvement: After 48 weeks intervention, the CBR group showed significant in exercise adherence score compared to control group (post-intervention)	CBR group: 5.56 (1.00) <sup>§</sup> : Control group: 3.16 (1.31) <sup>§</sup> , p<0.001 <sup>a)</sup>
Gong et al., 2015	Physical fitness	Levels of physical activity (score)	Improvement: After 6-month KM2H2 (intervention) program, the intervention group showed significant in actual levels of physical activity compared to standard care (control) group (post-intervention)	CBR group: 3.37 (1.28) <sup>§</sup> : Control group: 2.66 (1.81) <sup>§</sup> , p between 0.05-0.01 <sup>a)</sup>
Kamada et al., 2015	Physical fitness	Engagement in regular physical activity <sup>4</sup>	No significant increase: Change within community-wide interventions group did not significantly increase the overall physical activity over the 3-year period (adjusted change difference of % those who met the recommendation between intervention and control)	CBR group: -1.4 (-5.3 to 2.5) <sup>  </sup> : Control group: 0.1 (-2.3-2.6) <sup>  </sup> , p>0.05 <sup>a)</sup>
Yoo et al., 2011	Physical fitness	WMFT (score)	Improvement: Significant effect was found on total score and times for the WMFT and MAL in both groups after 24 weeks (post-intervention)	Functional ability score: CBR group: 2.54 (0.97) <sup>§</sup> , p=0.004 <sup>b)</sup> : Control group: 2.37 (1.17) <sup>§</sup> , p=0.336 <sup>b)</sup> Time (s): CBR group: 29.59 (31.85) <sup>§</sup> , p=0.028 <sup>b)</sup> Control group: 35.96 (9.01) <sup>§</sup> , p=0.021 <sup>b)</sup>
	Physical fitness	MAL (amount of use)		CBR group: 1.91 (1.34) <sup>§</sup> p=0.002 <sup>b)</sup> : Control group: 1.84(1.73) <sup>§</sup> , p=0.021
		MAL (quality of movement)		CBR group: 1.95 (1.35) <sup>§</sup> , p=0.000 <sup>b)</sup> : Control group: 1.81 (1.63) <sup>§</sup> , p=0.389 <sup>b)</sup>
	QoL	Stroke Short Form QoL assessment (mobility)	Improvement: Significant effect was found on mobility in both groups after 24 weeks (post-intervention)	CBR group: 3.51 (0.74) <sup>§</sup> , p=0.019 <sup>b)</sup> : Control group: 3.36(0.87) <sup>§</sup> , p=0.040 <sup>b)</sup>
Li et al., 2010	Physical fitness	Fried frailty criteria (FFC) improved	No significant improvement: The frailty status of the intervention group was less likely to deteriorate. However, there were no significant differences between the two groups and within groups after 6-month follow-up	Intervention group: OR=1.19 (0.48-3.04) <sup>  </sup> , p=0.7 <sup>b)</sup> : Control group: OR=3.29 (0.65-16.64) <sup>  </sup> , p=0.15 <sup>b)</sup>

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Supplementary Table S6. Continued

Study	Domain	Outcome measure	Brief description of the results	Results
Liang et al., 2021	Physical fitness	Gait speed (m/s)	Improvement: After 12 months, the multidomain intervention group showed significant improvement in gait speed compared to control group for normal older adults, while no significant difference in the other three sub-groups (physio-cognitive decline group, cognitive dysfunction group, and mobility-type frailty group) (post-intervention)	Physio-cognitive decline syndrome group: CBR group: 0.08(0.25) <sup>§</sup> ; Control group: 0.05 (0.23) <sup>§</sup> , p=0.355 <sup>a)</sup> Cognitive dysfunction only group: CBR group: -0.02 (0.27) <sup>§</sup> ; Control group: -0.06 (0.19) <sup>§</sup> , p=0.521 <sup>a)</sup> Mobility-type frailty only group: CBR group: -0.35 (4.80) <sup>§</sup> ; Control group: 1.03(6.74) <sup>§</sup> , p=0.069 <sup>a)</sup> Normal group: CBR group: 0.10 (0.23) <sup>§</sup> ; Control group: -0.03 (0.25) <sup>§</sup> , p=0.001 <sup>a)</sup>
		Handgrip strength	The physio-cognitive decline group showed significant improvement in handgrip strength compared to the control group after the intervention (p=0.002), but there were no significant changes in the other three intervention groups compared to the control group who received health education alone.	Physio-cognitive decline syndrome group: CBR group: 1.10(4.42) <sup>§</sup> ; Control group: -1.60 (6.44) <sup>§</sup> , p=0.002 <sup>a)</sup> Cognitive dysfunction only group: CBR group: -0.39 (3.05) <sup>§</sup> ; Control group: 0.18 (3.86) <sup>§</sup> , p=0.682 <sup>a)</sup> Mobility-type frailty only group: CBR group: -0.35 (4.80) <sup>§</sup> ; Control group: 1.03(6.74) <sup>§</sup> , p=0.069 <sup>a)</sup> Normal group: CBR group: -0.51 (4.69) <sup>§</sup> ; Control group: 0.71 (4.22) <sup>§</sup> , p=0.118 <sup>a)</sup>
	Physical fitness	Physical activity (MET) changes	No significant improvement: After 12 months, the multidomain intervention group showed no significant improvement in physical activity compared to control group for normal older adults and older adults with physio-cognitive decline syndrome, cognitive dysfunction only group, and mobility-type frailty (post-intervention)	Physio-cognitive decline syndrome group: CBR group: 1.09(14.95) <sup>§</sup> ; Control group: 1.20 (17.46) <sup>§</sup> , p=0.580 <sup>a)</sup> Cognitive dysfunction only group: CBR group: -0.38 (12.79) <sup>§</sup> ; Control group: -5.17 (40.21) <sup>§</sup> , p=0.944 <sup>a)</sup> Mobility-type frailty only group: CBR group: -2.32 (28.45) <sup>§</sup> ; Control group: 2.74(21.65) <sup>§</sup> , p=0.187 <sup>a)</sup> Normal group: CBR group: 1.05 (17.04) <sup>§</sup> ; Control group: -1.59 (31.36) <sup>§</sup> , p=0.596 <sup>a)</sup>
Song et al., 2021	Physical fitness	Short Physical Performance Battery (SPPB) (score)	Significant improvement: After 10 weeks interventions, focused on enablement group, practicing self-management skills, the physical-cognitive training, health education showed significant improvement in both balance and functional ability in intervention group but not in control group (post-intervention)	CBR group: 8 (3-12) <sup>‡</sup> , p=0.005 <sup>b)</sup> ; Control group: 9 (5-12) <sup>‡</sup> , p=0.915 <sup>b)</sup>
		De Morton Mobility Index (DEMMI) (score)		CBR group: 67 (44-100) <sup>‡</sup> , p=0.007 <sup>b)</sup> ; Control group: 67 (48-100) <sup>‡</sup> , p=0.046 <sup>b)</sup>
Sun et al., 2021	Physical fitness	Kihon checklist (KCL)	After 12 weeks interventions, focused on participants listened to music and performed physical activity, the CBR group showed significant improvement compared to control group in fitness but not in frailty (post-intervention)	CBR group: 5.84 (4.15) <sup>§</sup> , p<0.001 <sup>b)</sup> ; Control group: 6.65 (3.76) <sup>§</sup> , p=0.096 <sup>b)</sup> , p=0.261 <sup>a)</sup>
	Physical fitness	Senior Fitness Test		CBR group: 21.95 (7.26) <sup>§</sup> , p<0.001 <sup>b)</sup> ; Control group: 15.93 (4.11) <sup>§</sup> , p<0.001 <sup>b)</sup> , p<0.001 <sup>a)</sup>

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Supplementary Table S6. Continued

Study	Domain	Outcome measure	Brief description of the results	Results
Ota et al., 2007	Physical fitness	Lower-limb strength (kg)	No significant improvement: After 12 weeks interventions, focused on power rehabilitation, the CBR group showed significant improvement compared to control group in fitness but not in lower-limb strength (change of difference)	CBR group: 3.8 (-0.7 to 22.9) <sup>‡</sup> ; Control group: 4.5 (-1.9 to 8.9) <sup>‡</sup> , p=0.275 <sup>a)</sup>
	Physical fitness	Sit-and-reach test	No significant difference: After 12 weeks interventions, no significant difference found balance between the CBR (exercise) groups and the usual care groups (after the intervention)	CBR group: 2.5 (-8.0 to 20.0) <sup>‡</sup> ; Control group: 0.5 (-3.5 to 5.5) <sup>‡</sup> , p=0.061 <sup>a)</sup>
Kwok T et al., 2014	Physical fitness	Elderly Mobility Scale (EMS)	Significant improvement: After 6 months interventions, focused on exercise, showed significant improvement in both balance and functional ability in intervention group but not in control group (post-intervention)	CBR group: 0.88 (0.39–1.36) <sup>  </sup> , p<0.001 <sup>b)</sup> ; Control group: 0.08 (-0.15 to 0.30) <sup>  </sup> , p>0.056 <sup>b)</sup>
		Berg Balance Scale (BBS)		CBR group: 3.46 (2.07–4.85) <sup>  </sup> , p<0.001 <sup>b)</sup> ; Control group: 0.42 (0.61–1.45) <sup>  </sup> , p>0.056 <sup>b)</sup>
Tsang et al., 2018	Physical fitness	6MWT (m)	Significant improvement: After 3 years interventions, focused on CBR and HBR, showed significant improvement in cardiopulmonary function in both CBR and HBR groups (post-intervention)	CBR group: 443.08 (89.41) <sup>§</sup> , p<0.001 <sup>b)</sup> ; HBR group: 303.88 (125.98) <sup>§</sup> , p<0.001 <sup>b)</sup>
Zhang et al., 2017	Physical fitness	6MWT (m)	Significant improvement: After 3 years interventions, focused on exercise, showed significant improvement in cardiopulmonary function and SF-12 in CBR group compared with usual care group (change of difference)	CBR group: 57.42 (41.06–73.20) <sup>  </sup> ; Control group: -9.8 (-33.60 to 14.00) <sup>  </sup> , p<0.001 <sup>a)</sup>
	HRQoL	SF-12		CBR group: 8.70 (6.05–11.34) <sup>  </sup> ; Control group: -3.4 (-5.72 to -1.08) <sup>  </sup> , p<0.01 <sup>a)</sup>
Inokuchi S et al., 2007	Physical fitness	Chair standing test (CST)	Significant improvement: After 17 weeks interventions showed significant in physical function in CBR group compared with control groups (post-intervention)	CBR group: 11.2 (10.4) <sup>§</sup> ; Control group: 13.5 (5.4) <sup>§</sup> , p<0.028 <sup>a)</sup>
Ru et al., 2017	Physical fitness	FMA	Significant improvement: After 3 months, the CBR group found a significant improvement in the FMA and BI score compared to baseline within both the 60–69 years and 70–75 years age groups (p<0.001 in both age groups)	60–69 yr: CBR group: 65.6 (27.7) <sup>§</sup> , p<0.001 <sup>b)</sup> ; 70–75 yr: CBR group: 62.2 (29.9) <sup>  </sup> , p<0.001 <sup>b)</sup>
	ADL	BI		60–69 yr: CBR group: 77.4 (24.8) <sup>§</sup> , p<0.001 <sup>b)</sup> ; 70–75 yr: CBR group: 75.8 (22.9) <sup>  </sup> , p<0.001 <sup>b)</sup>

Values are presented as <sup>‡</sup>median (interquartile range), <sup>§</sup>mean (standard deviation), or <sup>||</sup>mean (95% confidence interval).

ADL, activity of daily living; QoL, quality of life; TUG, Timed Up and Go; CBR, community-based rehabilitation; FIM, Functional Independence Measure; RNLI, Reintegration to Normal Living Index; WMFT, Wolf Motor Function Test; MAL, Motor Activity Log; OR, odds ratio; MET, Metabolic Equivalent of Task; 6MWT, 6-Minute Walk Test; HBR, Home-based Rehabilitation; HRQoL, health-related quality of life; SF-12, Short Form-12; FMA, Fugl-Meyer Assessment; BI, Barthel Index.

<sup>a)</sup>Comparison between groups.

<sup>b)</sup>Comparison within groups.