Supplementary Table 1: Overview of study characteristics

Author + Year	Setting & Population	Participants	Design	Intervention	Control Group	Evidence of Effectiveness *	Valid Resilience Scale	Quality Ax Score
Aikens et al., (2014) USA (42)	Full-time employees at The Dow Chemical Company	N = 66 Age range: (18 – 65) Intervention Group: (n=34) Control Group: (n=32)	RCT with pre/post evaluation + 6-month follow-up	7-week mindfulness based program combining live, weekly 1hr-long virtual class meetings with accompanying online applied training via program website and workbook. Intervention based on Mindfulness based Stress Reduction (MBSR) and involved mindfulness and focusing techniques, education material on mindfulness and daily at home practise.	Y: Wait List Received the equivalent mindfulness program immediately following intervention group completion.	Y	CD-RISC	**20 (Good)**
Cerezo et al., (2014) SPAIN (43)	Breast Cancer Patients	N= 175 Intervention Group: (n =87) (Mean age: 49.3 SD: 9.8) Control Group: (n=88) (Mean age: 50.7, SD: 9.4) 100% Female	RCT with pre/post evaluation	14 X 2hrs Group Sessions: 1 Session per week. Intervention based on positive psychology incorporating psychoeducation, emotional regulation training, coping strategies, cognitive restructuring role play, gratitude techniques, mindfulness strategies, relaxation, meditation and guided imagery techniques.	Y: Wait List	Y	CD-RISC	**20 (Good)**
Erogul et al., (2014) (30)	1st year Medical Students	Total N = 58 Intervention Group =(n= 28)Mean age: 23.6, SD: 1.9 Control Group = (n=30),Mean age: 23.3, SD: 1.4	RCT Baseline, post-treatment (8-weeks) & 6 month follow up.	8 week Mindfulness Intervention based on Mindfulness Based Stress Reduction (MBSR). 1 X 75 min session per week + 1 X 5 hrs Retreat	Y: Wait List	N	RS -14	**17 (Fair)**
Kahn et al.,(2016) USA (46)	USA Armed Services Veterans and their partners	Total N = 320 Intervention Group = (80) Attention Control	4-arm RCT Pre/Post: Baseline, half-way (8 weeks) and 16 weeks.	Mission Reconnect: 16-week self-directed online program involving mind and body based wellness skills. Founded on the biopsychosocial model of health, mindfulness based therapies; massage therapy, positive emotions and	Y: 1) Attention Control: (PREP) – widely used evidence	Y	RSES	**20 (Good)**

		Group = (80) Intervention + Attention Control Group = (80) Wait List Control Group = (80) 32% of veterans still in service 68% retired. Veterans had on average served 2 deployments.		caregiver education. Delivered via program website and utilises audio exercises, videos and written material.	based (CBT) post-deployment reintegration program for relationship enhanceme nt. Facilitated via weekend treatments by trained Army Chaplains. 2) Wait List Control Group.			
Loprinzi et al., (2011) USA (5)	Breast Cancer survivors and mentors at Mayo Clinic, USA	Total N = 24 Age range:(46-75) Intervention Group: (n=12) Control Group: (n=12)	RCT pilot study Pre/post evaluation	2 x 90-mins group training sessions, a brief individual session and 3 x follow-up telephone calls. (Based on Attention and Interpretation Therapy (AIT), relaxation, attention training, as well as skills cultivating compassion, gratitude, forgiveness, acceptance and purpose).	Y: Wait List	Y	CD-RISC	**16 (Fair)**
McGonagle et al., (2014) (47)	Full time workers with chronic illnesses	N = 59 Intervention Group:(n=30) (Mean age: 38.3, SD: 8.2) Control Group: (n=29) (Mean age:39.1 (SD: 7.8) 86% Female 14% Male	RCT with Pre/Post evaluation and 12 week follow-up	6 x 1hr phone-based coaching sessions delivered fortnightly over a 12 week period. Intervention based on stress theory and resource activation and the GROW model of coaching. Sessions aimed to help boost workers' level of internal resources to help manage stress related to working with chronic illness. Each session was tailored to the needs and goals of the individual.	Y: Waitlist Control	Y	CD-RISC10	**18 (Fair)**

Songprakun & McCann (2012) THAILAND (50)	Outpatients with a diagnosis of moderate depression attending clinics at Suan Prung Psychiatric Hospital, Chiang Mai Province.	N = 54 Intervention Group: (n = 26) Control Group: (n= 28) (Mean age: 42.1, SD:9.7) 73% Female 27% Male	RCT with pre-post evaluation (8 weeks) + 3 month follow-up	8 week bibliotherapy intervention incorporating a self-help manual and workbook developed by Lifeline South Coast, Australia (Good Mood Guide: A self-help manual for depression). Participants competed 1 module per week over 2 month period. Involved between session activities including reading, questionnaires, and homework exercises. The manual was based on established principles of cognitive behavioural therapy (CBT) and self-help techniques and practises.	Y: Standard care and treatment + 1 weekly 5 minute phone call from the researcher to answer questions and provide brief support	Y	RS	**21 (Good)**
Sood et al., (2011) USA (19)	Physicians at Mayo Clinic, USA	N = 32 Intervention group: (n=20) (Mean age: 46.8 SD: 8.3) 55%male, 45%female Control Group: (n=12), (Mean age: 50.2 SD: 5.7) 50% male, 50% female	RCT pilot study Pre/post evaluation	Single 90 minute training session covering a range of resilience enhancing approaches. Based on Attention and Interpretation Therapy (AIT), relaxation, attention training, as well as skills cultivating compassion, gratitude, forgiveness, acceptance and purpose. Also included brief training in a daily meditation practise.Optional 30-60 follow-up session depending on individual needs.	Y: Wait List	Y	CD-RISC	**17** **(Fair)**
Sood et al., (2014) USA (7)	Radiologists, Department of Radiology Mayo Clinic, USA	N = 26 Intervention group: (n=13) (Mean age: 47.4, SD: 8.8) 55%male, 45%female Control group: (n=13) (Mean age: 48.1, SD: 5.2), 50% male, 50% female	RCT pilot study Pre/post Evaluation	Single 90 minute session aimed at decreasing personal stress and enhancing resiliency. Based on Attention and Interpretation Therapy (AIT), relaxation, attention training, as well as skills cultivating compassion, gratitude, forgiveness, acceptance and purpose. Also included brief training in a daily meditation practise. optional 30-60 follow-up session depending on individual needs.	Y: Wait List	N	CD-RISC	**17** **(Fair)**
Steinhardt & Dolbier (2008)	Students enrolled at	N= 57	RCT pilot study	4 X 2 hour weekly sessions intervention to improve resilience, coping strategies	Y: Wait List	Y	CD-RISC &	**17**

USA (20)	University *(during a period of high academic stress)*	Intervention group: (n= 30) Control group: (n= 27), 82% female 18% male median age: 21 years	Pre/post evaluation	and protective factors by focusing on cognitive behavioural strategies, social support and psychoeducation.			DRS	**(Fair)**
Yu et al., (2013) CHINA (52)	New immigrants relocating to Hong Kong (China)	N=183 Intervention group: (n= 58) (95% female. Mean age: 32.9, SD: 4.4) Comparison group: (n= 83) (97% female. Mean age: 31.9, SD: 4.6) Control group = 70 (95% female, Mean age: 33.8, SD: 5.5)	RCT pilot Pre/post evaluation + 3 month follow-up	Program involved 4 x 2.5hrs weekly sessions over 4 consecutive weeks. Aimed to build personal resiliency and reduce adaptation difficulties. Skills: developing self-efficacy, positive thinking, positive reframing, and altruistic behavior and goal setting. Based on intervention and local evidence about positive characteristics that promote successful immigration.	Y: Control received 16-page informational booklet relevant to education, medical care, housing, employment and community resources.	Y	CD-RISC	**22** **(Good)**

RCT = Randomised Controlled Trial, CT = Controlled Trial, CD-RISC = Connors Davidson Resilience Scale, DRS = Dispositional Resilience Scale, RSES= Response to Stressful Experiences Scale, RS-14 = The Resilience Scale

* Evidence of effectiveness operationalized as the intervention condition being associated with a significant improvement in the measure of resilience compared to the control condition with an alpha value of 0.05