

Supporting Information

Supplementary material

This appendix was part of the submitted manuscript and has been peer reviewed. It is posted as supplied by the authors.

Appendix to: Truong A, Williams-Tucker K, Narkle A, et al. Current gaps in knowledge and future research directions for Aboriginal and Torres Strait Islander children with cancer. *Med J Aust* 2025; doi: 10.5694/mja2.52650.

CONSolldated critERia for strengthening the reporting of health research involving Indigenous Peoples (CONSIDER) statement

Governance

1. Describe partnership agreements between the research institution and Indigenous-governing organization for the research, (e.g., Informal agreements through to MOU (Memorandum of Understanding) or MOA (Memorandum of Agreement)).

As this manuscript is a narrative review, there are no partnership agreements involved.

2. Describe accountability and review mechanisms within the partnership agreement that addresses harm minimization.

Not applicable.

3. Specify how the research partnership agreement includes protection of Indigenous intellectual property and knowledge arising from the research, including financial and intellectual benefits generated (e.g., development of traditional medicines for commercial purposes or supporting the Indigenous community to develop commercialization proposals generated from the research).

Not applicable.

Prioritization

4. Explain how the research aims emerged from priorities identified by either Indigenous stakeholders, governing bodies, funders, non-government organization(s), stakeholders, consumers, and empirical evidence

This research emerged from a recognition by Aboriginal families with lived experience of childhood cancer, Aboriginal research staff and oncologists that Indigenous children are under-represented in childhood cancer research.

Relationships (Indigenous stakeholders/participants and Research team)

5. Specify measures that adhere and honor Indigenous ethical guidelines, processes, and approvals for all relevant Indigenous stakeholders, recognizing that multiple Indigenous partners may be involved, e.g., Indigenous ethics committee approval, regional/national ethics approval processes.

As this manuscript is a narrative review, no ethics approvals are required.

6. Report how Indigenous stakeholders were involved in the research processes (i.e., research design, funding, implementation, analysis, dissemination/recruitment).

The manuscript was developed with input from the First Nations Childhood Cancer Community Advisory Group at The Kids Research Institute Australia. The community advisory group will also assist in the dissemination of this review to interested parties, and designing future research to address the gaps highlighted in this manuscript.

7. Describe the expertise of the research team in Indigenous health and research.

The research team includes Aboriginal experts in cancer biology (Dr Jessica Buck – Kamilaroi, Dr Justine Clark – Adnyamathanha), genomics (Prof Alex Brown – Yuin), and Aboriginal medical students (Kayla Williams-Tucker – Ngarluma, Wongutha and Wudjari Noongar, Eden Slicer – Gundungurra, Jessica-Elise Chapman – Kamilaroi and

Bundjalung, Ahmi Narkle – Whadjuk Goreng Noongar). Methodologies 8. Describe the methodological approach of the research including a rationale of methods used and implication for Indigenous stakeholders, e.g., privacy and confidentiality (individual and collective) As this manuscript is a narrative review, the literature search included scientific papers alongside specialist publications and reports from Indigenous health organisations. 9. Describe how the research methodology incorporated consideration of the physical, social, economic and cultural environment of the participants and prospective participants. (e.g., impacts of colonization, racism, and social justice). As well as Indigenous worldviews. This review manuscript has included considerations of Indigenous worldviews, culture and customs, alongside the impacts of racism in the health care system. **Participation** Specify how individual and collective consent was sought to conduct future analysis on collected samples and 10. data (e.g., additional secondary analyses; third-parties accessing samples (genetic, tissue, blood) for further analyses). Not applicable. Described how the resource demands (current and future) placed on Indigenous participants and communities involved in the research were identified and agreed upon including any resourcing for participation, knowledge, and expertise Not applicable. 12. Specify how biological tissue and other samples including data were stored, explaining the processes of removal from traditional lands, if done, and of disposal. Not applicable. Capacity Explain how the research supported the development and maintenance of Indigenous research capacity (e.g., 13. specific funding of Indigenous researchers). This manuscript contributed to the training of 4 Aboriginal students in research methods. Discuss how the research team undertook professional development opportunities to develop the capacity to partner with Indigenous stakeholders? As this manuscript is a narrative review, there were no partnerships with Indigenous stakeholders, however all non-Indigenous team members have completed cultural awareness training.

Analysis and interpretation

15. Specify how the research analysis and reporting supported critical inquiry and a strength-based approach that

was inclusive of Indigenous values.

This manuscript aimed to take a strengths-based approach to the analysis of the literature.

Dissemination

16. Describe the dissemination of the research findings to relevant Indigenous governing bodies and peoples.

This manuscript will be disseminated to interested community members through the National Aboriginal Community Controlled Health Organisation, alongside the First Nations Childhood Cancer Community Advisory Group

17. Discuss the process for knowledge translation and implementation to support Indigenous advancement (e.g., research capacity, policy, investment).

We aim to address the gaps in knowledge identified in this review with the creation of a dedicated First Nations Childhood Cancer research team, with approaches for knowledge translation and implementation to be identified in the future.