



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: Clark JR, Buck J, Richards-Satour A, et al. Towards precision cancer medicine for Aboriginal and Torres Strait Islander cancer health equity. *Med J Aust* 2024; doi: 10.5694/mja2.52346.

CONSIDER Statement

Guest Editors of the 2024 *Indigenous Health Special Issue* acknowledge the Indigenous expertise that informed the establishment of the CONSolidated critERtia for strengthening the reporting of health research involving Indigenous Peoples (CONSIDER) statement.

Authors should indicate how they have supported ethical publishing and reporting practices by providing the details of the research practices aligned with this publication in accordance with the CONSIDER statement. The reporting should not exceed two pages. This reporting will be published as online supplementary information. Detailed items can be accessed in the publication:

<https://bmcmmedresmethodol.biomedcentral.com/articles/10.1186/s12874-019-0815-8>

Governance
This narrative review is not a research project and does not have formalised Aboriginal governance (although all authors were Aboriginal).
Prioritization
Aboriginal cancer control is a demonstrated priority for Aboriginal and Torres Strait Islander peoples at a national scale. This is particularly exemplified through the NACCHO Aboriginal and Torres Strait Islander Cancer Plan (2023), a document that represents the needs and goals of the Aboriginal Community Controlled sector as it responds to Aboriginal cancer disparities. This review in particular focusses on precision medicine and what is needed to ensure benefit and equity in this space for Aboriginal and Torres Strait Islander peoples affected by cancer.
Relationships (Indigenous stakeholders/participants and Research Team)
The lead author chose to engage with a group of Aboriginal staff and researchers to ensure the views presented within the paper were not only from perspectives of those with a high level of professional and/or technical understanding but, also were developed from an Aboriginal world view. Furthermore, authorship for Aboriginal staff that were part of conversations to develop initial ideas as well as critical review was a way to formally acknowledge the professional and cultural knowledge of each individual.
Methodologies
This review aimed to contextualise precision cancer medicine for Aboriginal and Torres Strait Islander health equity within a broader landscape including that of the social, political and historical context. This piece was intended to form a strengths-based discourse from analysis of previous literature to setting out the requirements for this research space from Aboriginal perspectives. Our writing calls out the racism and marginalisation that forms part of why cancer health disparities exist for Aboriginal peoples and then puts forward solutions designed for us, by us.

Participation

Given that this paper did not require research beyond a literature search, there was limited consideration for Indigenous participation. The burden of research from a cultural/intellectual perspective was recognised, all views and feedback from Aboriginal authors was valued and implemented, and contributions were recognised through authorship.

Capacity

This review paper is expected to be of great value to other Indigenous stakeholders outside of the author team. It is intended to explain how precision cancer medicine can contribute to Aboriginal and Torres Strait Islander cancer health equity, an emerging area of research and clinical care. Therefore, this paper will be useful in building knowledge got other Indigenous researchers and Indigenous health care workers.

Analysis and interpretation

As already stated, a strengths-based approach was central to the paper and having a solely Aboriginal author team was important for self-determination in defining what is required in this research space and what constitutes next steps.

Dissemination

Although there is not a plan to disseminate the principles of this paper to specific Indigenous audiences (e.g. participants in the case of a research project) there will be dissemination through our communication channels e.g. our website, Aboriginal staff networks, and through research presentations at conferences including Indigenous conferences and other research meetings.