

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	Evidence about art-based interventions for Indigenous people: A scoping review protocol
AUTHORS	Motta-Ochoa, Rossio; Patenaude, David; Barbe-Welzel, Monika; Incio-Serra, Natalia; Audeoud, Esmé; Gómez-Rendón, Angélica; Flores-Aranda, Jorge

VERSION 1 – REVIEW

REVIEWER	Roy, Philippe Université de Sherbrooke
REVIEW RETURNED	14-Mar-2024

GENERAL COMMENTS	<p>The paper is innovative in many regards. Scoping review paper rarely have the space to describe the methodology in such details. The overall protocol is consistent with the guidelines provided by Arksey & Omalley and Levac. The objective is quite logical: art-based is widespread, but research-based knowledge has not been summarized yet. A question emerges from the databases mentioned. One is "Gender Studies Database", is gender will be a topic for analysis? It seems this review is done in Canada. Therefore, it raises some concerns that requires revisions:</p> <p>1) There are guidelines for research with Indigenous people / interventions. The review protocol should mention how it align with these guidelines. These guidelines are provided by funding agencies (such as Social Sciences and Humanities Research Council).</p> <p>2) The inclusion criteria raise concern about the language. If the research emerges from Canada, it is surprising French literature is not included in the protocol. There might be a relevant number of studies and grey literature in French. This exclusion or omission should be justified or changed to include French literature.</p> <p>While these revisions are not major, they are nevertheless essentials. Overall, the research protocol is well detailed and relevant for publishing.</p>
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REVIEWER	Okpalauwaekwe, U University of Saskatchewan, Medicine
REVIEW RETURNED	04-Apr-2024

GENERAL COMMENTS	<p>It was a pleasure reviewing your work which presents a protocol for a scoping review on art-based interventions for Indigenous peoples and their effects, in the context of health and wellness. This is a timely and important area of research, considering the unique health inequalities and social determinants that Indigenous</p>
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	<p>peoples face. The inclusion of an Indigenous research partner and other stakeholders in the review process is commendable, as it enriches the research with diverse perspectives and ensures cultural appropriateness.</p> <p>The study's comprehensive approach, with a search strategy including 19 databases and grey literature, and the commitment to disseminating findings through knowledge translation activities, displays thoroughness and an understanding of the importance of community engagement.</p> <p>Specific Comments</p> <ol style="list-style-type: none"> 1.While the authors have outlined a comprehensive search strategy, including the use of multiple databases and grey literature, it would be helpful to have more details about the inclusion and exclusion criteria. For example, specifying the types of art-based interventions considered could narrow the focus and strengthen the methodology. 2. The manuscript mentions the involvement of an Indigenous research partner and other stakeholders, which is a strength. However, elaborating on how these stakeholders will contribute throughout the study could add depth to the protocol. For instance, outlining the specific roles or inputs of the Indigenous research partner in the development of the research question would provide clarity on their influence on the study's direction. 3.Cultural Sensitivity: Given the subject matter, the protocol would benefit from a section detailing the measures taken to ensure cultural sensitivity in the collection, interpretation, and dissemination of data. This could include strategies for respectful engagement and the maintenance of cultural integrity during the research process per Tri-Council Policy Statements in Chapter 9. 4. The manuscript states that no ethics approval is required as it uses public sources. However, discussing the ethical considerations of working with Indigenous knowledge and data—even when publicly available—would be a meaningful addition. This could involve respecting Indigenous data sovereignty and ensuring that findings are returned to the communities in a beneficial manner. A mention of this would be respectful. 5. More detail on the Arksey and O'Malley framework and how the subsequent enhancements by Levac et al. will be integrated into the study could enhance the reader's understanding of the chosen methodology. Also PRISMA-SCr should be mentioned as a reporting guideline in addition to the JBI framework to enhance methodological rigor. 6. Addressing potential limitations of the study within the protocol can help readers understand the scope and boundaries of the research. For example, acknowledging that certain art-based interventions may not have been captured due to the specificity of search terms or the possibility of publication bias in available literature would provide a more balanced view.
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VERSION 1 – AUTHOR RESPONSE

Reviewer 1

Comment 1

The paper is innovative in many regards. Scoping review paper rarely have the space to describe the methodology in such details. The overall protocol is consistent with the guidelines provided by Arksey & O'Malley and Levac. The objective is quite logical: art-based is widespread, but research-based knowledge has not been summarized yet. A question emerges from the databases mentioned. One is "Gender Studies Database", is gender will be a topic for analysis? It seems this review is done in Canada. Therefore, it raises some concerns that requires revisions:

Authors' response

We thank the reviewer for his generous comment about our manuscript. It really motivates us to continue with our research work about the relevance of art-based interventions for Indigenous peoples. We would also like to point out that our intention in including the database "Gender Studies Database" is to use gender as topic of analysis as health inequalities and social determinants affect Indigenous women, Indigenous men, and gender diverse and two-spirit persons differently. To make our intention more explicit, on page 4, lines 35-37, we have added the following sentence:

"Our aim in searching such a wide range of databases is to include studies that cover art-based interventions with diverse Indigenous populations of varying genders, age groups and geographic locations."

Comment 2

There are guidelines for research with Indigenous people/interventions. The review protocol should mention how it align with these guidelines. These guidelines are provided by funding agencies (such as Social Sciences and Humanities Research Council).

Authors' response

We thank the reviewer for this very pertinent suggestion. On page 7, lines 9-20, we have included a section entitled "Cultural sensitivity", where we describe how our study aligns with the Tri-Council Policy Statement (Chapter 9):

"Cultural sensitivity

To ensure cultural sensitivity in the collection, interpretation, and dissemination of data, the study will align with the Tri-Council Policy Statement (Chapter 9) for the ethical conduct of research involving Indigenous peoples (46). The involvement of an Indigenous research partner throughout the scoping review process will foster respectful engagement and maintenance of cultural integrity. The knowledge dissemination activities (see "Ethics and dissemination," below) will promote reciprocity between the researchers and Indigenous stakeholders. Moreover, our interactions with Indigenous people and organizations will be guided by the core principles of respect for individuals, concern for welfare and justice. Note that we consider certain terms that have been included in our search strategies (e.g., Indian, Aboriginal, Native, Eskimo) to be inappropriate and potentially sensitive for Indigenous persons; unfortunately, most databases still use these terms to index the existing literature, leaving us with no choice but to include them."

Comment 3

The inclusion criteria raise concern about the language. If the research emerges from Canada, it is surprising French literature is not included in the protocol. There might be a relevant number of studies and grey literature in French. This exclusion or omission should be justified or changed to include French literature.

Authors' response

We apologize for omitting the information about language as one of our inclusion criteria. On page 5, lines 24-30, we have added all the inclusion criteria and among them language:

“For this protocol, the following preliminary inclusion criteria were identified: 1) studies about interventions based on one or more Western and/or Indigenous art forms (e.g., drawing, painting, sculpture, embroidering, music, dance, singing, storytelling, poetry, visual arts); 2) all types of studies (e.g., design, implementation, evaluation, comparison); 3) all types of study design (e.g., qualitative, quantitative, randomized control trials, case study, cohort study, quasi-experimental); 4) studies conducted in all languages; 5) studies conducted in all geographic locations; and 6) studies conducted in any time periods.”

In addition, to include French literature in the scoping review, we have conducted searches in French databases. Only Érudit has provided relevant results. We have included the search strategy for Érudit in the supplementary file entitled “Search_Strategies.”

Reviewer 2

Comment 1

It was a pleasure reviewing your work which presents a protocol for a scoping review on art-based interventions for Indigenous peoples and their effects, in the context of health and wellness. This is a timely and important area of research, considering the unique health inequalities and social determinants that Indigenous peoples face. The inclusion of an Indigenous research partner and other stakeholders in the review process is commendable, as it enriches the research with diverse perspectives and ensures cultural appropriateness.

The study's comprehensive approach, with a search strategy including 19 databases and grey literature, and the commitment to disseminating findings through knowledge translation activities, displays thoroughness and an understanding of the importance of community engagement.

Authors' response

We thank the reviewer's nice words about our work. We agree with him that this is a relevant topic that we attempt to research in a way that is rigorous and in dialogue with Indigenous peoples. We would like to point out that while developing the search strategies for each of the 19 databases we initially proposed, we found one additional database that is relevant for this scoping review. The strategies for each of the 20 databases are in the supplementary file entitled “Search_Strategies.”

Comment 2

While the authors have outlined a comprehensive search strategy, including the use of multiple databases and grey literature, it would be helpful to have more details about the inclusion and

exclusion criteria. For example, specifying the types of art-based interventions considered could narrow the focus and strengthen the methodology.

Authors' response

We thank the reviewer for this relevant suggestion. On page 5, lines 24-35 we have added information about the exclusion and inclusion criteria and specified the types of art-based interventions that will be considered:

"For this protocol, the following preliminary inclusion criteria were identified: 1) studies about interventions based on one or more Western and/or Indigenous art forms (e.g., drawing, painting, sculpture, broadening, music, dance, singing, storytelling, poetry, visual arts); 2) all types of studies (e.g., design, implementation, evaluation, comparison); 3) all types of study design (e.g., qualitative, quantitative, randomized control trials, case study, cohort study, quasi-experimental); 4) studies conducted in all languages; 5) studies conducted in all geographic locations; and 6) studies conducted in any time periods. In addition, the following preliminary exclusion criteria were identified: 1) studies that do not involve interventions based on one or more Western and/or Indigenous art forms; 2) studies that target only non-Indigenous people; 3) studies about interventions that use art as a method of data collection; and 4) studies about antiretroviral therapy, which is often referred to by the acronym ART."

Comment 3

The manuscript mentions the involvement of an Indigenous research partner and other stakeholders, which is a strength. However, elaborating on how these stakeholders will contribute throughout the study could add depth to the protocol. For instance, outlining the specific roles or inputs of the Indigenous research partner in the development of the research question would provide clarity on their influence on the study's direction.

Authors' response

We consider the reviewer's suggestion extremely relevant. On page 6, lines 31-37 and page 7, lines 1-8, we have added a section entitled "Patient and public involvement" in which we describe in detail the involvement of our Indigenous research partner and the stakeholders:

"Patient and public involvement"

As previously mentioned, our Indigenous research partner will be involved in all stages of the scoping review process. He will review the research question and research strategy (Stage 1), help define the search terms and strategy (Stage 2) as well as the inclusion and exclusion criteria (Stage 3), provide input on the data charting instrument (Stage 4), proofread the scoping review manuscript (Stage 5), and help with bringing relevant stakeholders on board for consultation (Stage 6). He has already collaborated with the first author (RMO) on knowledge dissemination activities. He will be engaged as a consultant and receive an honorarium. Furthermore, he will be a co-author of the final article and will also be involved in the dissemination of the scoping review results (see "Ethics and dissemination," below). Furthermore, we will consult Indigenous stakeholders with whom some of the authors (RMO, MBW, NIS and EA) have previously established collaborative relationships. We will meet with them at key moments of the scoping review process to share and get feedback about the study design and search strategy, selected studies, the charting instruments, study results and knowledge dissemination strategies. These Indigenous stakeholders will be provided with monetary compensation for their time and expertise."

Comment 4

Cultural Sensitivity: Given the subject matter, the protocol would benefit from a section detailing the measures taken to ensure cultural sensitivity in the collection, interpretation, and dissemination of data. This could include strategies for respectful engagement and the maintenance of cultural integrity during the research process per Tri-Council Policy Statements in Chapter 9.

Authors' response

We thank the reviewer for this excellent suggestion. On page 7, lines 9-20, we have added a section entitled "Culturally sensitivity" that describes the measures we have taken to ensure cultural sensitivity:

"Cultural sensitivity

To ensure cultural sensitivity in the collection, interpretation, and dissemination of data, the study will align with the Tri-Council Policy Statement (Chapter 9) for the ethical conduct of research involving Indigenous peoples (46). The involvement of an Indigenous research partner throughout the scoping review process will foster respectful engagement and maintenance of cultural integrity. The knowledge dissemination activities (see "Ethics and dissemination," below) will promote reciprocity between the researchers and Indigenous stakeholders. Moreover, our interactions with Indigenous people and organizations will be guided by the core principles of respect for individuals, concern for welfare and justice. Note that we consider certain terms that have been included in our search strategies (e.g., Indian, Aboriginal, Native, Eskimo) to be inappropriate and potentially sensitive for Indigenous persons; unfortunately, most databases still use these terms to index the existing literature, leaving us with no choice but to include them."

Comment 5

The manuscript states that no ethics approval is required as it uses public sources. However, discussing the ethical considerations of working with Indigenous knowledge and data—even when publicly available—would be a meaningful addition. This could involve respecting Indigenous data sovereignty and ensuring that findings are returned to the communities in a beneficial manner. A mention of this would be respectful.

Authors' response

We appreciate the reviewer's pertinent comment and have integrated the required information into the manuscript, on page 7, lines 29-36:

"However, since this scoping review is specific to Indigenous people, we will consider data sovereignty and ethics in our analysis and interpretation of the results. We will also ensure that the study findings return to Indigenous people in a way that benefits them. This will involve setting up knowledge translation activities with Indigenous artists, Indigenous organizations and art therapy groups. Furthermore, our Indigenous research partner will also put us in touch with Indigenous networks with whom we can share the scoping review article and a results summary. Lastly, this study will be published in an open-access journal to secure wider dissemination."

Comment 6

More detail on the Arksey and O'Malley framework and how the subsequent enhancements by Levac et al. will be integrated into the study could enhance the reader's understanding of the chosen

methodology. Also, PRISMA-SCr should be mentioned as a reporting guideline in addition to the JBI framework to enhance methodological rigor.

Authors' response

We thank the reviewer suggestion to incorporate more details on how we use Arksey and O'Malley framework and the subsequent enhancements by Levac et al. We have done this in several parts of the manuscript:

In the section "Stage 1: Identifying the research question," page 4, lines 11-12:

"We have also maintained a wide approach to the question in order to generate breadth of coverage as suggested by Arksey and O'Malley (40)."

In the section "Stage 1: Identifying the research question," page 4, lines 20-21:

"Both definitions have helped us clarify our focus so as to establish an effective search strategy as suggested Levac et al. (41)."

In the section "Stage 2: Searching relevant studies," page 5, lines 1-3:

"To conduct the search, a team with appropriate content and methodological expertise comprised of researchers in the social & health sciences, a research librarian and an Indigenous research partner will be assembled (41)."

In the section "Stage 3: Selecting the studies," page 5, lines 17-19:

"Reviewers will meet at the beginning, midpoint and final stages of the title and abstract review process to discuss challenges related to study selection and refine the search strategy as needed (41)."

In the section "Stage 4: Charting data," page 6, lines 5-7:

"Two researchers will independently extract data from the first five to ten included studies and meet to determine if the data charting instrument is consistent with the research question (41)."

In the section "Stage 5: Collating, summarizing and reporting the results," page 6, lines 12-13:

"Descriptive numerical summary analysis and qualitative thematic analysis of the extracted data will be conducted (41)."

In the section "Stage 5: Collating, summarizing and reporting the results," page 6, lines 19:

"Implications for future research, practice and policy will be discussed."

In the section "Stage 6: Consulting with stakeholders," page 6, lines 27-30:

"We will reach out to Indigenous stakeholders from diverse cultural backgrounds (including artists, organizations and art therapy groups) who can inform the research. Working with them, we will organize with them activities of knowledge translation and exchange activities (e.g., the world café method, discussion groups)."

In addition, on page 6, lines 18-21, we have mentioned PRISMA-ScR as a reporting guideline of the scoping review:

"The 20 essential and two optional reporting items in the PRISMA-ScR (Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews) checklist (45) will be used to enhance reporting in the scoping review manuscript,"

Comment 7

Addressing potential limitations of the study within the protocol can help readers understand the scope and boundaries of the research. For example, acknowledging that certain art-based interventions may not have been captured due to the specificity of search terms or the possibility of publication bias in available literature would provide a more balanced view.

Authors' Response

We thank the reviewer for this crucial suggestion and apologize for omitting the information about potential limitations of our study. On the section "Study strengths and limitations," page 2, lines 3-6, we have added the following bullet points:

- "Due to the subject of this scoping review, search term operationalization may not capture certain art-based interventions.
- Certain studies about art-based interventions might not be available through the databases included in this scoping review."

VERSION 2 – REVIEW

REVIEWER	Okpalauwaekwe, U University of Saskatchewan, Medicine
REVIEW RETURNED	04-May-2024

GENERAL COMMENTS	<p>The manuscript titled "Evidence about Art-Based Interventions for Indigenous People: A Scoping Review Protocol" provides a structured and comprehensive plan to explore the existing literature on art-based interventions aimed at improving the health and wellness of Indigenous populations. It follows the Arksey and O'Malley framework, enhanced by Levac et al., for conducting a scoping review, which is a suitable choice for this research area. The manuscript is clear and well-organized, systematically laying out the steps for conducting the review, which ensures reproducibility and transparency.</p> <ul style="list-style-type: none"> - The introduction successfully outlines the health disparities faced by Indigenous communities and sets a strong foundation for the necessity of culturally sensitive interventions. Including more specific statistics or recent studies could strengthen the argument and provide a more compelling rationale for the review. - The methodology is robust, with a detailed description of the databases to be used and the screening process. However, the manuscript could benefit from more specifics on the criteria for selecting studies and any potential bias mitigation strategies during study selection and data extraction.
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	- The ethical considerations and dissemination plan are appropriately detailed, reflecting a commitment to respecting Indigenous knowledge and contributing back to the community. Well done!
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VERSION 2 – AUTHOR RESPONSE

Reviewer Comments:

Comment 1

The manuscript titled "Evidence about Art-Based Interventions for Indigenous People: A Scoping Review Protocol" provides a structured and comprehensive plan to explore the existing literature on art-based interventions aimed at improving the health and wellness of Indigenous populations. It follows the Arksey and O'Malley framework, enhanced by Levac et al., for conducting a scoping review, which is a suitable choice for this research area. The manuscript is clear and well-organized, systematically laying out the steps for conducting the review, which ensures reproducibility and transparency.

Authors' response

We thank the reviewer for this generous comment. We are pleased to learn that we were able to address most of his insightful suggestions.

Comment 2

The introduction successfully outlines the health disparities faced by Indigenous communities and sets a strong foundation for the necessity of culturally sensitive interventions. Including more specific statistics or recent studies could strengthen the argument and provide a more compelling rationale for the review.

Authors' response

We thank the reviewer for this suggestion. We have done our best to include more specific statistics and recent studies. On page 2, lines 8-30, we have rewritten parts of the first paragraph of the manuscript according to this new information:

"Indigenous people experience a unique set of social, political, and economic inequalities that negatively affect their physical health, mental health and wellness (1)(2)(3)(4). In Canada, the colonial structures aimed at assimilating them into dominant European cultures continue to impact the lives of Indigenous individuals and communities to this day (5)(6). The ancestral land appropriation and the forced displacement, the devastating legacy of the residential schools, the removal of children by child welfare services, the high rates of poverty, and the systemic racism in the health and social services detrimentally affect Indigenous health and wellness to this date (7)(8)(9). Thus, Indigenous Canadians face disproportionate rates of diabetes type II (e.g., 17.2% among First Nations individuals living on-reserve compared to 5% in the general population), cardiovascular diseases (11.5% among Indigenous people compared to 5.5% among non-Indigenous people), mental health issues (e.g., 38% of fair/poor mental health among Indigenous people compare to 23% among non-Indigenous, during the pandemic of COVID 19), substance abuse (e.g., 35% of abusive alcohol use among

Indigenous compare to 23% among non-Indigenous), mortality as well as significantly reduced life expectancy (e.g., First Nations live an average of 9.3 years less than the general population) (10)(11)(12)(13)(14)(15)(16). The effects of colonialism and structural disparities had particularly salient consequences for certain vulnerable groups. For example, compared to the general population, suicide rates among First Nation youth are five to six times higher and eleven times among Inuit youth (17)(18)(19). Similarly, Indigenous women and girls, a group disproportionately affected by violence, abuse, and trauma (20)(21), are roughly between 4.5 and 7 times more likely to be the victims of homicide than non-Indigenous women and girls, depending on the year (22)(23). The limited availability of culturally appropriate services and interventions with which to address these issues remains a pressing concern for Indigenous people (24)(25)."

In the References section, we have added the following sources:

2. Boksa P, Joober R, Kirmayer LJ. Mental wellness in Canada's Aboriginal communities: striving toward reconciliation. *J Psychiatry Neurosci JPN*. nov 2015;40(6):363-5.
3. Wilk P, Cooke M, Stranges S, Maltby A. Reducing health disparities among indigenous populations: the role of collaborative approaches to improve public health systems. *Int J Public Health*. 1 janv 2018;63(1):1-2.
4. World Health Organization. Historic resolution calls for action to improve the health of Indigenous Peoples [Internet]. 2023 [cité 20 mai 2024]. Disponible sur: <https://www.who.int/news/item/29-05-2023-historic-resolution-calls-for-action-to-improve-the-health-of-indigenous-peoples>
7. Browne AJ, Varcoe C, Lavoie J, Smye V, Wong ST, Krause M, et al. Enhancing health care equity with Indigenous populations: evidence-based strategies from an ethnographic study. *BMC Health Serv Res*. 4 oct 2016;16(1):544.
8. Kim PJ. Social Determinants of Health Inequities in Indigenous Canadians Through a Life Course Approach to Colonialism and the Residential School System. *Health Equity*. juill 2019;3(1):378-81.
9. Sehgal A, Henderson R, Murry A, Crowshoe L (Lindsay), Barnabe C. Advancing health equity for Indigenous peoples in Canada: development of a patient complexity assessment framework. *BMC Prim Care*. 29 avr 2024;25(1):144.
10. Crowshoe L, Dannenbaum D, Green M, Henderson R, Hayward MN, Toth E. Type 2 Diabetes and Indigenous Peoples. *Can J Diabetes*. avr 2018;42 Suppl 1:S296-306.
11. Schultz A, Nguyen T, Sinclair M, Fransoo R, McGibbon E. Historical and Continued Colonial Impacts on Heart Health of Indigenous Peoples in Canada: What's Reconciliation Got to Do With It? *CJC Open*. 24 sept 2021;3(12 Suppl):S149-64.
12. Fontaine LS, Wood S, Forbes L, Schultz ASH. Listening to First Nations women's expressions of heart health: mite achimowin digital storytelling study. *Int J Circumpolar Health*. 2019;78(1):1630233.
13. Arriagada P, Hahmann T, O'Donnell V. Indigenous people and mental health during the COVID-19 pandemic [Internet]. Statistics Canada; 2020 [cité 20 mai 2024]. Disponible sur: <https://www150.statcan.gc.ca/n1/pub/45-28-0001/2020001/article/00035-eng.htm>
14. Statistique Canada. Les peuples autochtones : Feuille d'information du Canada [Internet]. 2015 [cité 4 déc 2023]. Disponible sur: <https://www150.statcan.gc.ca/n1/pub/89-656-x/89-656-x2015001-fra.htm>
15. Pak J. Mortality among First Nations people, 2006 to 2016. [Internet]. 2021 [cité 20 mai 2024]. Disponible sur: <https://www150.statcan.gc.ca/n1/pub/82-003-x/2021010/article/00001-eng.pdf>
16. Tjepkema M, Bushnik T, Bougie E. Life expectancy of First Nations, Métis and Inuit household populations in Canada [Internet]. 2019 [cité 20 mai 2024]. Disponible sur: <https://www150.statcan.gc.ca/n1/pub/82-003-x/2019012/article/00001-eng.pdf>
17. Government of Canada; Indigenous Services. Suicide prevention [Internet]. 2018 [cité 20 mai 2024]. Disponible sur: <https://www.sac-isc.gc.ca/eng/1576089685593/1576089741803>
19. Government of Canada. GAC. 2024 [cité 20 mai 2024]. Indigenous health and well-being: Youth lead call for change. Disponible sur: <https://www.international.gc.ca/world-monde/stories-histoires/2019/australia-australie-indigenous-autochtones.aspx?lang=eng>

23. State of the Criminal Justice System. Understanding Indigenous Women and Girls' Experiences with Victimization and Violence [Internet]. 2023 [cité 20 mai 2024]. Disponible sur: <https://www.justice.gc.ca/socjs-esjp/en/women-femmes/wgv-ffv>
24. Yangzom K, Masoud H, Hahmann T. Primary health care access among First Nations people living off reserve, Métis and Inuit, 2017 to 2020 [Internet]. 2023 [cité 19 mai 2024]. Disponible sur: <https://www150.statcan.gc.ca/n1/pub/41-20-0002/412000022023005-eng.htm>

Comment 3

The methodology is robust, with a detailed description of the databases to be used and the screening process. However, the manuscript could benefit from more specifics on the criteria for selecting studies and any potential bias mitigation strategies during study selection and data extraction.

Authors' response

On page 6, lines 5-16, we have included more specifics on the study selection criteria:

"For this protocol, the following preliminary inclusion criteria were identified: 1) studies about interventions based on one or more Western and/or Indigenous art forms (e.g., drawing, painting, sculpture, embroidering, music, dance, singing, storytelling, poetry, visual arts); 2) studies that focus on people who self-identified or are identified as Indigenous (e.g., Indigenous people, First Peoples, First Nations, Metis, Inuit, Native American People, Alaska Natives; Maori, Pacific Islander, Native Hawaiian, Torres Strait Islander People, Quechua, Aymara, Maya); 3) all types of studies (e.g., design, implementation, evaluation, comparison); 4) all types of study design (e.g., qualitative, quantitative, randomized control trials, case study, cohort study, quasi-experimental); 5) all sources of evidence (e.g., primary research studies, letters, guidelines); 6) studies conducted in all languages; 7) studies conducted in all geographic locations; 8) studies conducted in any time periods; 9) all sources of academic publications and grey literature."

In addition, we have included information about potential bias mitigation strategies to be used during study selection and data extraction in three parts of the manuscript.

On page 5, lines 32-35:

"The two reviewers will meet at the beginning, midpoint and final stages of the title and abstract review process to discuss challenges related to study selection and refine the search strategy as needed (58). This dual review will also help to reduce bias in applying inclusion and exclusion criteria."

On page 6, lines 4-5:

"To avoid bias during the selection of the studies, we have described in detail the inclusion and exclusion criteria."

On page 6, lines 29-32:

"The data will be compiled in a customized data extraction template of Covidence for coding and validation. Although scoping reviews do not typically include a risk of bias assessment (62), we will also customize the quality assessment tool of Covidence (Cochrane Risk of Bias) to appraise the included studies."

Comment 4

The ethical considerations and dissemination plan are appropriately detailed, reflecting a commitment to respecting Indigenous knowledge and contributing back to the community. Well done!

Authors' response

We thank the reviewer's thoughtful comments that have allowed us to express our respect and commitment to the global Indigenous community through this manuscript. Most of the research team members have Indigenous and/or mestizo backgrounds and come from South American countries. Our overall goal is that our research contributes to improving the lives of Indigenous people.