

## Peer Review File

Article information: <https://dx.doi.org/10.21037/apm-23-382>

### Reviewer Comments

#### Reviewer A

First, thank you for the opportunity to review this very interesting article. The paper is well written and clear and very interesting to read

Reply: Thank you for your supportive comments

Given that is a background paper I would have liked to see more references to that work that has been done in cancer nursing and cancer nurses. For example when you say (line 100) “Given that nurses work throughout the cancer care continuum, from health promotion...” there is a very interesting paper by Young et al referencing the role of cancer nurses through all stages. But there are other parts where I wonder why there are not more references.

Reply: This research-focused paper is part of a special issue and nursing work (or practice) is covered in another article in the special issue. Our objective was to focus on research for, and by, oncology nursing. For this background paper, a PubMed literature review on oncology nursing research was carried out by MF and added to by AY and given the flow of the document, we included pertinent research references. However, the point is taken that readers may wish to know about the Young et al article. We have added continuum of cancer care reference (line 98) at this pertinent point.

Regarding tables. I would suggest (referencing to table 2) either do one for all or not do just one for one of the organisations. The priorities from the Indian society could very well be integrated in the text as with the other organisations so the table would not be necessary. The other tables are pertinent and clear.

Reply: We are deleting Table 2. The references for Indian Oncology Nursing Society are already in the text and we have added the illustration of the priorities in the text.

As the only figure in the article, I find that the figure 1 is a bit too scarce as mentions just some of the societies and I would either eliminate them all or try to write more societies (in Europe there is one Croatian, Spanish...)

Reply: Figure 1 Focus on WHO regions – for Regional and Large Country Oncology Nursing Societies

We have revised Figure 1. Our intention with this figure was to illustrate the spread or distribution of oncology nursing professional associations at the level of the World Health Organization Regions. These regions are very large, and some have many countries within them. We have listed examples of the member organizations in each region (where such a organization exists). It is not meant to be an exhaustive listing. We have added wording to the figure to reflect our thinking.

They are all suggestions. Overall is a very interesting paper that I hope it drives to more research in cancer nursing.

Thank you

### **Reviewer B**

Well written.

Add a small section with historical support for nursing research and recommendations for obtaining future funding/support for HIC as well as LMIC.

Reply: We have added wording about the funding support historically and added a recommendation about seeking funding in the future.

### **Reviewer C**

Thank you for the opportunity to review this manuscript.

Aside from minor proofreading edits the reviewer has no suggested revisions to the manuscript.

Reply: Thank you for your feedback and support.

### **Reviewer D**

This is an interesting and thorough review of the global literature on oncology nursing research. This reviewer is not sure of the value of Table 1. It might be more helpful for the authors to include a timeline showing how oncology nursing research as transformed over the years from descriptive to using more rigorous research designs and methods. The authors discuss interventions, but it is not clear what type of research designs were employed. Were they randomized? Observational? Two-group comparisons? Then the authors move on to meta-analyses and mixed methods. However, it is not clear if the mixed methods employed mixed methods were still descriptive or if the quantitative part of the mixed methods employed something other than cross-sectional data. The authors state that there is a need for more than just the traditional randomized trial, but it really is not clear that nursing, even in HIC has fully embraced randomized trials. If they have been embraced, a timeline showing when they started to proliferate and what the intervention and control groups received would be very enlightening. It would also be a strong contribution to the literature. This would help illustrate the area of future challenges specifically identified in Table 3 under "building research mindedness."

Reply: The purpose of Table 1 was to show the progression of research priorities from the one oncology nursing organization which has been conducting surveys routinely. With this information, one can appreciate how the topics have changed. This was not about the evolution of designs. We added a footnote to explain our intention.

The idea of illustrating the transformation of research designs is an interesting comment. However, in our opinion this would not be a linear timeline and would be vastly different from region to region. Creating such a illustration would require a different approach regarding searching the literature and analysis.

We appreciate the observations made by the reviewer. However, we did not anticipate delving into details about specific designs; rather we wanted to provide an overview of the trends. Such a detailed approach would be an excellent approach for another paper.