

A Review of Cultural Safety Initiatives in Sports and Arts Activities

Research Article

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Abstract: Cultural safety has grown from an initial focus on Indigenous communities to encompass diverse social groups, including those defined by age, gender, sexual orientation, socioeconomic status, ethnicity, religion, and differing abilities. Work on cultural safety has also expanded from healthcare to other settings, including sports and arts activities. This rapid scoping review explores the impact of cultural safety initiatives in sports and arts activities across Australia, New Zealand, and Canada and analyses how included studies defined cultural safety. A comprehensive search of 9 academic databases identified 33 relevant articles, mostly focused on Indigenous populations. Results found that culturally safe sports programmes promoted empowerment, self-determination, and improved health outcomes, while culturally safe arts programmes fostered cultural reconnection and belonging. Key themes in cultural safety definitions encompassed recognising and respecting individual identities; the importance of shared knowledge and mutual understanding; acknowledging colonial histories and systemic discrimination; reducing power imbalances; and understanding cultural practices. Cultural safety is essential for reducing health and well-being inequities and requires ongoing reflection, partnership, and innovation. By aligning the findings of this review with their strategic priorities, public health and other organisations can play a pivotal role in fostering environments where all individuals feel valued and supported in their cultural identity, facilitating improved health and well-being outcomes.

Keywords: Community activities • Cultural safety • Health equity • Social inclusion

1. Introduction

1.1 What is Cultural Safety?

Cultural safety originated in nursing and midwifery practice in New Zealand in the 1980s. In response to the poor health status of the country's Māori people, Irihapeti Merenia Ramsden, ONZM conducted pioneering research in the area, which defined cultural safety as,

“The effective nursing of a person/family from another culture by a nurse who has undertaken a process of reflection on [their] own cultural identity and recognises the impact of the nurses' culture on [their] own nursing practice” (Papps & Ramsden, 1996, p. 491).

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This concept has attracted considerable attention worldwide and has grown to encompass a broader array of social groups, including those defined by age, gender, sexual orientation, socioeconomic status, ethnicity, religion, and differing abilities (De & Richardson, 2008).

In this evolution, considerable attention has been focused on the needs of Indigenous people. This reflects increased community advocacy and awareness regarding the complex and harmful impacts of colonisation, which is driving efforts to address the resulting intergenerational disadvantage. A report by the Lowitja Institute reflects this expansion in the concept and application of cultural safety concerning Aboriginal and Torres Strait Islander peoples (Mohamed et al., 2024).

Although the term “cultural safety” is used in this review, it is important to acknowledge that this is one of many inter-related terms such as “cultural competence,” “cultural

responsiveness,” and “cultural awareness.” Additionally, cultural safety is seen as conceptually aligned with social inclusion and health equity as its scope has moved beyond interpersonal elements of healthcare provision to encompass the creation of culturally safe environments and consideration of structural elements of service delivery (Thompson, 2022).

2. Cultural Safety in Sports and Arts Activities

The growth in cultural safety to multiple social groups parallels the growth in areas beyond health care, such as workplaces (Victorian Equal Opportunity and Human Rights Commission, 2024), human services (Mohamed *et al.*, 2024), and policy settings (Mackean *et al.*, 2020). Therefore, leaders and service deliverers in these sectors increasingly focus on creating culturally safe environments to optimise health and well-being, participation, and inclusiveness. This includes community-based sports and arts activities (Austin & Vadiveloo, 2023; Mansell *et al.*, 2024).

Cultural safety in sports/recreation, and arts settings is important for several reasons. First, community sports and arts activities, particularly in group settings, contribute to physical and psychological well-being and foster a sense of belonging (Austin & Vadiveloo, 2023; Mansell *et al.*, 2024; Miller & Walke, 2024; Storr *et al.*, 2024). Second, these benefits have not been equitably distributed; for example, immigrant women have low rates of physical activity (PA) (Gagliardi *et al.*, 2022), and participation in sports is much lower in Aboriginal and Torres Strait Islander children (44%) compared to non-Indigenous children (72%) in Australia (Mansell *et al.*, 2024).

Finally, these activities themselves, if carefully designed, can mitigate negative impacts on health and other domains that have arisen from lower rates of participation for some demographics. For example, PA can help to address higher rates of chronic disease in Aboriginal and Torres Strait Islanders (Mansell *et al.*, 2024; Miller & Walke, 2024); and participation in group art activities offers critical opportunities to acknowledge, process, and express the effects of intergenerational trauma arising from colonisation (Latimer *et al.*, 2018; Robbins *et al.*, 2017).

3. Local Communities as Hubs for Culturally Safe Activities

Local communities are frequent settings for group sports/recreation and arts activities as people build social

connections through shared recreational spaces, schools, and other environments close to where they live. Because neighbourhoods and built environments foster these activities, they are critical determinants of health.

With Australia experiencing rising rates of chronic disease (Australian Institute of Health and Welfare, 2021), associated economic and health burdens (Australian Institute of Health and Welfare, 2024), and health inequalities between population groups (Australian Institute of Health and Welfare, 2020), optimising the potential of place-based physical and art activities is a high priority.

This is reflected by the 10-year (2023–2033) strategy of the Victorian Health Promotion Foundation (VicHealth), which identifies neighbourhood and built systems as one of three foundational pillars for health, alongside commercial/economic and food systems (Victorian Health Promotion Foundation, 2023). VicHealth, a statutory authority established by the Victorian (Australia) Parliament in 1987, is a leader in health promotion – the process of enabling people to increase control over and improve their health. While its primary focus remains promoting good health and preventing chronic disease, its current strategy aims to reshape the systems that create barriers to Victorians’ health and wellbeing. By focusing on neighbourhood and built systems as a foundational pillar, VicHealth uses its expertise and research to transform the environments where Victorians “live, connect, play, travel, create, and work”.

4. Aim of the Review

This review serves as an evidence-based foundation for VicHealth’s strategic focus, specifically identifying how culturally safe sports and arts programmes can eliminate systemic discrimination and address the rising burden of chronic disease. The aim of this review is therefore to address the question: **What is known about the impact of cultural safety initiatives in sports and arts programmes in Australia, New Zealand, and Canada?** Given the breadth of the concept of cultural safety, a secondary aim of the review was to identify and describe how eligible research studies defined cultural safety.

5. Methods

A rapid review method was employed to address the aims of this review. Over the last decade, rapid reviews have enabled government and other actors to access review-level knowledge more quickly than “traditional”

systematic reviews (Khangura et al., 2012). For this study, we employed the Cochrane Collaboration definition of “rapid reviews”:

“...a type of evidence synthesis that brings together and summarises information from different research studies to produce evidence for people such as the public, healthcare providers, researchers, policy makers, and funders in a systematic, resource efficient manner. This is done by speeding up the ways we plan, do, and/or share the results of conventional structured (systematic) reviews, by simplifying or omitting a variety of methods that should be clearly defined by the authors.” (Garritty et al., 2024, p. 3)

This builds upon earlier definitions (Hamel et al., 2021; Speckemeier et al., 2022), with more recent methodological studies highlighting the need for thoughtful co-design of review parameters with knowledge users (Garritty et al., 2024), limiting data extraction to the most important fields relevant to the question (Garritty et al., 2024), and flexible approaches for searching that involve at least two databases and incorporate input from a specialist librarian (Klerings et al., 2023).

6. Key Definitions

As described above, cultural safety has evolved into numerous concepts and settings. For these reasons, cultural safety is a term that does not currently have a broadly agreed definition. For this review, given that describing definitions of cultural safety was an aim, all papers that self-identified as being focused on cultural safety were within scope. These encompassed papers using the specific phrase “cultural safety” or key synonyms including, but not limited to “cultural inclusion,” “anti-racism,” “equity,” and “inclusion.”

Similarly, the review employed broad and pragmatic definitions of “sports/recreation” and “arts.” For the purpose of this review, we define “sports” as organised PA involving physical exertion and skill as the primary focus, with elements of competition where rules and patterns of behaviour governing the activity exist formally through organisations (Department of Creative Industries, Tourism and Sport, 2017; Khasnabis et al., 2010) and “recreation” as activities that people choose to do for relaxation, health, and well-being, making their leisure time more interesting and enjoyable (Department of Creative Industries, Tourism and Sport, 2017; Khasnabis et al., 2010). Operationally, articles about sports/recreation activities (e.g. netball, walking) or arts (e.g. visual, performance, music) were included.

7. Search Strategy

We conducted a comprehensive literature search to identify peer-reviewed articles that described programmes to foster cultural safety via sports and arts in Australia, New Zealand, and Canada. These countries were selected to optimise transferability to the Victorian context, given that all have a history of colonisation and are high-income Commonwealth countries with comparable health system characteristics. While the USA shares features of colonial history, it was excluded because its health system and governance structures are too dissimilar to that of Victoria, Australia.

Search strategy development was informed by documentation provided by VicHealth and naïve searching by the review team members to identify “gold set” documents (documents that will very likely be included in the review that can validate the final search terms). The draft search terms and “gold set” documents were then discussed with VicHealth, and the search strategy was confirmed.

Nine electronic databases were searched – Scopus, ProQuest, Informit, Web of Science, Google Scholar, Medline, Global Health, Embase, and Emcare – using a combination of free-text and controlled vocabulary terms combined with truncation, proximity operators, and Boolean operators to combine the terms. All search strategies are presented in Appendix 1.

8. Study Selection and Data Extraction

Search results were imported and de-duplicated in Covidence, a web-based collaboration software platform used to manage the production of systematic reviews and other types of evidence synthesis (Veritas Health Innovation, 2023). Study titles and abstracts were independently screened against pre-defined eligibility criteria (Table 1) by two review team members. Any disagreements between the two screeners were resolved through discussion or by a third screener taking the final vote.

Following this, full texts of studies selected for inclusion during the title and abstract screening were screened in duplicate against the eligibility criteria. Reasons for excluding any records at the full-text stage were recorded. Disagreements between screeners were resolved via consensus or by a third screener.

Upon completion of the screening process, the following data elements were extracted from the included studies by two reviewers with a review of 50% of the content for quality assurance by a third reviewer:

	Include	Exclude
Publication type	• Peer-reviewed journal articles (primary research or reviews)	• Conference papers • Theses • Book chapters • Grey literature reports • Other languages • All other countries
Language	• English	
Country	• Australia • New Zealand • Canada	
Study focus	Eligible studies were those reporting on the impact of any form of cultural safety initiative associated with arts or sports programmes, with the primary focus of the article being cultural safety. Broadly, there were two possible categories of inclusion: • Cultural safety programmes as primary focus, with arts or sports as the setting/activity focus • Arts or sports settings as primary focus but with a substantial component (i.e. cultural safety being mentioned in the title/abstract) focused on developing knowledge, skills, attitudes, norms, behaviours pertaining to cultural safety	• Primary focus not cultural safety (e.g. passing mention of cultural safety as part of introduction or discussion, but the main focus of the article is not cultural safety. Operationally, this generally means that cultural safety is not a substantial part of the title/abstract • Cultural safety programmes not using arts or sports as a delivery mechanism • Arts or sports programmes in which cultural safety was not a major component • Descriptions of cultural safety programmes without evidence of implementation, including protocols • Recommendations for cultural safety
Outcomes	• All outcomes relating to the perceived impacts of cultural safety • Any quantitative, qualitative, or other measures of impact, including measures reflecting other conceptualisations of “knowledge” (e.g. indigenous perspectives)	• No exclusions
Date range	• 2015–2024	• Pre-2015

Table 1. Inclusion and exclusion criteria.

Source: Authors' contribution.

- Study aims
- Number of included studies (reviews)
- Definition of cultural safety
- Activity focus (sports/arts) and brief description
- Participant group and location (primary studies)
- Activity purpose (primary studies)
- Key findings and conclusions.

9. Findings

9.1 Study Selection

Following the removal of duplicates, 334 citations were identified. After dual independent screening of all 334

titles and abstracts, 62 full text articles were reviewed in duplicate, of which 33 studies were found to meet all inclusion criteria (See Appendix 2 for PRISMA diagram).

9.2 Study Characteristics

The 33 included studies comprised six systematic reviews (de Lannoy *et al.*, 2023; Gagliardi *et al.*, 2022; Mansell *et al.*, 2024; Miller & Walke, 2024; Pour *et al.*, 2023; Williams *et al.*, 2024), two narrative reviews (Austin & Vadiveloo, 2023; Frazer & Giles, 2023), and 25 primary studies.

Among the primary studies, nine focused on sports (Bennie *et al.*, 2021; Brooks-Cleator & Giles, 2016; English

et al., 2023; Gidgup et al., 2022; 2024; Rich & Breunig, 2022; Rich & Giles, 2015; Stronach et al., 2019; Whitau & Ockerby, 2019), 13 focused on the arts (Balla et al., 2022; Blanchet, 2024; Fanian et al., 2015; (Hadley et al., 2022); Latimer et al., 2018; (Lenette et al., 2022); Lines et al., 2021; Marchetti & Nicholson, 2020; Marchetti et al., 2022; Rieger et al., 2021; Robbins et al., 2017; (Whyte, 2020); Wilson et al., 2018), and three had a multifaceted focus (Doyle et al., 2016; (Flouris et al., 2016); Ollier et al., 2020). Fourteen of the primary studies were conducted in Australia and 11 were conducted in Canada.

The primary studies predominantly utilised qualitative methodologies, collecting data through yarning circles, semi-structured interviews, focus groups, and participatory workshops (Balla et al., 2022; Blanchet, 2024; Brooks-Cleator & Giles, 2016; English et al., 2023; Flouris et al., 2016; Gidgup et al., 2024; Hadley et al., 2022; Latimer et al., 2018; Lenette et al., 2022; Lines et al., 2021; Marchetti & Nicholson, 2020; Marchetti et al., 2022; Ollier et al., 2020; Rich & Breunig, 2022; Rich & Giles, 2015; Rieger et al., 2021; Robbins et al., 2017; Stronach et al., 2019; Whitau & Ockerby, 2019; Whyte, 2020; Wilson et al., 2018). Only four studies employed mixed-methods approaches (Bennie et al., 2021; Doyle et al., 2016; Fanian et al., 2015; Gidgup et al., 2022), and no purely quantitative studies were identified.

The participant groups across the primary studies reflect the origins of cultural safety in Indigenous health-care, with 19 studies focused on Indigenous people. Several of these studies also specify the age and gender of participants, with six studies focused on Indigenous women (Balla et al., 2022; Bennie et al., 2021; Blanchet, 2024; Marchetti et al., 2022; Rieger et al., 2021; Stronach et al., 2019), four studies focused on Indigenous youth (Fanian et al., 2015; Latimer et al., 2018; Lines et al., 2021; Robbins et al., 2017), two studies focused on Indigenous men (Marchetti & Nicholson, 2020; Whyte, 2020), and one study focused on Indigenous girls/youth (Whitau & Ockerby, 2019). Six studies were focused on Indigenous people of multiple ages and genders (Brooks-Cleator & Giles, 2016; Doyle et al., 2016; Flouris et al., 2016; Gidgup et al., 2022; Ollier et al., 2020; Wilson et al., 2018). One primary study focused on people with disabilities (Hadley et al., 2022), another primary study focused on people from ethnic backgrounds (Lenette et al., 2022), and four primary studies focused on mixed groups (English et al., 2023; Gidgup et al., 2024; Rich & Breunig, 2022; Rich & Giles, 2015).

Further details about the study characteristics, as well as short summaries of some key findings, are presented in Tables 2–4.

9.3 Definitions of Cultural Safety

The results from the definition-focused portion of the review are presented first to give context to the other findings. Table 5 provides an overview of the most cited cultural safety definitions and concepts. The full list of the definitions used, and the definitions of related terms, is provided in Appendix 3.

Of the 33 included studies, 16 provided an explicit definition of cultural safety (Austin & Vadiveloo, 2023; Balla et al., 2022; Brooks-Cleator & Giles, 2016; Frazer & Giles, 2023; Gagliardi et al., 2022; Lenette et al., 2022; Marchetti & Nicholson, 2020; Marchetti et al., 2022; Miller & Walke, 2024; Ollier et al., 2020; Pour et al., 2023; Rich & Breunig, 2022; Rich & Giles, 2015; Rieger et al., 2021; Robbins et al., 2017; Wilson et al., 2018). Additionally, four studies provided definitions of related terms, such as cultural sensitivity, cultural competence, cultural humility, culturally appropriate programmes, and strengths-based approaches (Gidgup et al., 2024; Lines et al., 2021; Rich & Breunig, 2022; Rieger et al., 2021).

9.4 Common Elements Used When Defining Cultural Safety

Among the definitions of cultural safety used, the most frequently occurring themes were:

- Ensuring that there is no assault, denial, or challenge to individuals' identity (including, but not limited to, age or generation, gender, sexual orientation, occupation, socioeconomic status, ethnic origin, migrant experience, religious/spiritual beliefs or disability) (Austin & Vadiveloo, 2023; Balla et al., 2022; Brooks-Cleator & Giles, 2016; Gagliardi et al., 2022; Lenette et al., 2022; Ollier et al., 2020).
- Shared knowledge and experiences of learning, reflexivity, dialogue, and intentional listening (Balla et al., 2022; Marchetti & Nicholson, 2020; Marchetti et al., 2022; Miller & Walke, 2024; Robbins et al., 2017)
- Recognising and addressing inequities rooted in colonial histories and institutional discrimination (Austin & Vadiveloo, 2023; Marchetti et al., 2022; Ollier et al., 2020; Pour et al., 2023; Rich & Breunig, 2022; Rieger et al., 2021).
- Acknowledging and reducing power imbalances (Brooks-Cleator & Giles, 2016; Lenette et al., 2022; Marchetti et al., 2022; Ollier et al., 2020; Rich & Breunig, 2022; Rieger et al., 2021).
- Creating a safe environment that is spiritually, socially, and emotionally supportive for people to share their

Citation	Review focus	N (studies)	Key findings/conclusion
de Lannoy et al. (2023)	Adult-oriented outdoor play in Canada	224	- The most common priority was outdoor play environments ($n = 165$); indigenous peoples and land-based outdoor play priority continue to be among the least common ($n = 16$) - Identified knowledge gaps included relationship between outdoor play and adult mental/emotional development and connections between environmental health and Indigenous cultures and traditions
Gagliardi et al. (2022)	Culturally safe community-based PA promotion strategies for immigrant women	13	- Common cultural safety features included language of choice; being based in community settings or organisations, leadership by lay health workers; reflective of ethno-cultural linguistic expressions and PA norms; and addressing barriers of PA - In-person educational settings are preferable to online as this is more appealing and reduces socio-economic inequities in access to health information
Mansell et al. (2024)	Experiences of sport and recreation amongst Indigenous peoples in Australia, New Zealand, the United States, and Canada	27	- Five themes were described: barriers and facilitators to engagement; physical health benefits; racism and discrimination; social and emotional well-being; and community spirit - Racism and discrimination need to be addressed at every level of sport and recreation; Indigenous leadership and reference groups should be developed and nurtured
Miller and Walke (2024)	The role of community events in increasing the uptake of Indigenous-specific health examinations	18	- Community events are a promising approach to increase uptake of Indigenous-specific health assessments – three key themes were identified: adapting programme to the community; providing a culturally safe participant experience; and prioritising community engagement - Aboriginal-controlled community health services may be best placed to have responsibility for programme design and implementation
Pour et al. (2023)	Effectiveness of culturally safe mental health interventions (including sport/physical activity) in improving the well-being of First Nations youth	4	- Programmes centred around sport and PA for Aboriginal and Torres Strait Islander youth were shown to enhance cultural connections, self-esteem, and confidence - Studies often lacked Aboriginal and Torres Strait Islander leadership and governance - Authors recommended removing the “colonial lens” and embedding culturally safe practices in program development and evaluation
Williams et al. (2024)	Youth perceptions of what is important to their mental health and well-being and how approaches address their needs in Canadian youth-led mental	294	Three key themes in youth-led initiatives were identified: “facilitating education, capacity building, and resource access; ensuring inclusive spaces for healing and social support; and fostering diversity and pride.” (p. 5–6)

(Continued)

Table 2: *Continued*

Citation	Review focus	N (studies)	Key findings/conclusion
	health and well-being initiatives (including arts and music programmes)		The importance of a values-based approach and involving youth in programme design to ensure cultural safety and responsiveness was emphasised

Table 2. Overview of systematic reviews ($n = 6$).
Source: Authors' contribution.

- stories and receive care (Austin & Vadiveloo, 2023; Balla et al., 2022; Frazer & Giles, 2023; Ollier et al., 2020; Rieger et al., 2021; Wilson et al., 2018)
- Ensuring that the recipient, and their communities, determine what works and what is respectful and inclusive of their culture (Brooks-Cleator & Giles, 2016; Gagliardi et al., 2022; Miller & Walke, 2024; Ollier et al., 2020; Rich & Breunig, 2022)
 - Ensuring that healthcare providers and facilitators have knowledge and understanding about other cultures and cultural protocols (Frazer & Giles, 2023; Marchetti & Nicholson, 2020; Marchetti et al., 2022; Pour et al., 2023; Rich & Breunig, 2022; Robbins et al., 2017; Wilson et al., 2018)
- Other mentioned elements included achieving social justice outcomes (Lenette et al., 2022) and health professionals' responsibility to protect clients from risks or harm (Ollier et al., 2020).

Citation	Review focus	Key findings/conclusion
Austin and Vadiveloo (2023)	To explore cultural safety in the arts using "practical features of a consent-based practice originating in the field of Intimacy Direction, and Brave Space methodologies developed through social justice facilitation," (p. 49–50) using the example of a "Let's Take Over" youth arts programme in Darebin, Australia. The programme was designed to be inclusive of various cultural, social, and socio-economic backgrounds.	- The need for active engagement of First Nations artists in leadership and facilitator roles was highlighted. - By committing to ongoing boundary negotiations, marginalised artists can bring their full identities into the creative space, without feeling pressured to self-manage a lack of cultural safety. - Frameworks centred around consent and collaboration, informed by culturally safe principles, can disrupt traditional systems and processes (e.g. those from a "white, Western, heteronormative, ableist viewpoint").
Frazer and Giles (2023)	"To examine if and how sport and Inuit traditional games are identified as meaningful tools in these Inuit suicide prevention strategies." (Frazer and Giles 2023, p. 1)	- Indigenous youth from North America, Australia, and New Zealand highlighted the holistic benefits of traditional physical activities, noting their spiritual, emotional, mental, and some physical advantages - Culturally safe approaches are essential to avoid any harm from participation. Sports programmes designed in non-Inuit contexts cannot be simply transferred to Inuit settings without careful consideration. - As sports and traditional games have been underutilised as protective factors in Inuit suicide prevention strategies, more funding is required for evidence-based, community-driven, and culturally safe Inuit mental health intervention models.

Table 3. Overview of narrative reviews ($n = 2$).
Source: Authors' contribution.

Citation, Country	Participant group, <i>N</i>	Intervention description	Key findings/conclusion
Bennie et al. (2021) Australia	Aboriginal women (<i>n</i> = 20)	Sports focus (<i>n</i> = 9) Coaching Unlimited is a collaborative coach education and health promotion programme tailored for Aboriginal Australian peoples. Key aim was to build a supportive network of coaches from different regions.	• Building a programme with continuous input from Aboriginal communities led coaches to view it positively. • Emphasising relationships and cross-sector support contributed to a sense of cultural safety in the workshops. • Consequently, Coaching Unlimited offered a culturally respectful, impactful, and beneficial workshop series for Aboriginal peoples.
Brooks-Cleator and Giles (2016) Canada	Elders in Motion (EIM) programme leaders across the Northwest Territories (NWT) (<i>n</i> = 7)	EIM had three main objectives – improve access to PA opportunities for elders living in the NWT; develop a training manual for programme leaders and accompanying video for EIM; and deliver training of EIM to various health and recreational leaders, and students.	• Two main themes regarding the cultural relevance of EIM for participants were identified as: “(1) adaptations were made to EIM, but more can be done, and (2) more engagement with and focus on Elders are needed.” (p. 459) • Certain practices within EIM could inadvertently support the colonial process, such as using a standardised Western-based programme; failing to offer culturally relevant activities; excluding elders and programme leaders from discussions about programme content; and not acknowledging the diversity within Aboriginal communities.
English et al. (2023) Australia	Health promotion stakeholders (<i>n</i> = 11)	Interviews with key stakeholders were conducted to explore “...best practice approaches for developing and implementing holistic (i.e. physical, social, emotional spiritual & cultural) health promotion programmes for young Aboriginal and Torres Strait Islander girls.” (p. 1142)	• The need for culturally safe, youth-friendly health services was highlighted, with PA and sport seen as effective entry points for health promotion. • Cultural elements such as yarning circles help connect participants to culture; communal activities like sport support relationship-building. • Key challenges to best practice included insufficient appropriate staff and unstable funding, leading to poor programme design.
Gidgup et al. (2024) Australia	Aboriginal and non-Aboriginal workers who assisted with programme delivery, and family	The Ironbark PA programme for older Aboriginal and Torres Strait Islander people, a falls prevention programme	• Both local community members and Aboriginal and non-Aboriginal workers observed that the Ironbark programme helped build strong relationships and

(Continued)

Table 4: Continued

Citation, Country	Participant group, <i>N</i>	Intervention description	Key findings/conclusion
Gidgup et al. (2022) Australia	and local members of the communities (<i>n</i> = 17)	originally developed in New South Wales (NSW).	foster a sense of belonging for elders within a supportive programme framework, with positive effects on elders and their communities.
	Aboriginal elders (<i>n</i> = 23)	Ironbark falls prevention exercise programme, including PA (exercises with a strong balance and functional component) and yarning, along with morning tea. Original material was adapted to suit the preferences of Aboriginal elders residing on Noongar Country and referenced a holistic, decolonising approach to implementation.	• The programme's perceived cultural safety and security were seen as critical factors in this success. • The programme offered older Aboriginal people a rare opportunity to engage in physical activity. • Elders provided highly positive feedback praising its cultural appropriateness and expressing that it helped boost their confidence. • A key factor in the success of the Ironbark programme was its development based on Aboriginal research methodology principles. • A significant strength of the programme was the involvement of a predominantly Aboriginal team, which made the programme culturally acceptable.
	Canadian Red Cross (CRC) Swim Programme instructors (<i>n</i> = 36)	The CRC's Water Safety Instructor Development Programme involved participant reflection on their own cultures; discussions about the various forms of inclusion and exclusion that can occur in swimming and water safety programmes; and how instructors and organisations can prevent such exclusionary practices.	• The two main themes identified were: "[1]...inclusion is valued and important for aquatics programming but conversely,[2] adapting programming to accommodate cultural and ethnic diversity is perceived by instructors as difficult and, in most cases, as not being supported by organisational culture and employers' expectations." (p. 311) • Discussions on inclusive programming and its successful implementation would be beneficial not only for academics but also for sport managers looking to enhance programming for diverse communities.
Rich and Breunig (2022) Canada	Various participants of various leisure programmes (<i>n</i> = not stated)	Various programmes, e.g. <i>The Pizza Game</i> involved teaching safe entries and exits by calling out toppings that would go on a	• Cultural safety offers a crucial perspective for professionals in the leisure sector to consider diversity within

(Continued)

Table 4: *Continued*

Citation, Country	Participant group, <i>N</i>	Intervention description	Key findings/conclusion
		pizza; <i>Pow Wows</i>, an annual week-long competition between four teams that each represented an Indigenous tribe; <i>Community Cup</i>, a soccer tournament; and <i>National Outdoor Leadership School</i>.	their practice. Through a cultural safety lens, even those outside a community can understand the importance of providing spaces where participants feel comfortable, respected, and safe. • It is important to consider “not only explicit aspects of culture (e.g. food, clothing, language, etc.) but also deeper, tacit aspects of how we experience and make sense of the world around us.” (p. 375) • Challenging gender binaries and heteronormative views in leisure pedagogy can foster a stronger social justice orientation, which in turn strengthens cultural safety.
Stronach et al. (2019) Australia	Indigenous women (<i>n</i> = 22)	Various programmes mentioned include <i>The Onkaparinga Women’s Rugby Club</i>; <i>The Indigenous Softball Programme</i>; <i>Women’s Sport Leadership Programme</i>; <i>The Deadly Sistas Girlz Programme</i> to empower Aboriginal girls aged 8–17 years; <i>Gwabba Yorga, Gabba Warra (GYGW)</i> for Indigenous teenage girls, which focuses on increasing awareness about the effects of binge drinking; <i>Moorditj Mums</i>, a pilot programme aimed at young mums to encourage better parenting and pathways to education and employment; <i>Surfing Victoria’s Indigenous Surfing Programme</i>; and <i>Fitzroy Stars Football and Netball Club</i>.	• Participating in sport helps Indigenous women feel empowered, boosting their self-esteem by building strength and confidence, overcoming shame, and resisting manipulation and discrimination. • Positive effects on physical and mental health and to the well-being of participants’ families and communities were reported.
Whitau and Ockerby (2019) Australia	Girls and young women from Year 3 to 12 (<i>n</i> = not stated)	The Yarning with the Stars project employed both Western and Indigenous research methods to qualitatively evaluate the Shooting Stars programme, which uses netball and other incentives to engage Aboriginal and Torres Strait Islander girls in their education, while promoting their health and well-being.	• Yarning circles are not just culturally responsive tools for evaluating programme success or adapting programmes like Sport for Development and Peace to local contexts; they also provide a space for student voice and self-determination.

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Table 4: Continued

Citation, Country	Participant group, <i>N</i>	Intervention description	Key findings/conclusion
			For the Shooting Stars programme, a key element was the relationship built between facilitator and participant, before, during, and after the yarning circle takes place.
Balla et al. (2022) Australia	Indigenous women (<i>n</i> = 14)	Arts focus (<i>n</i> = 13) Ten Wayapa Wuurrk (connect to the earth) workshops focusing on connecting to earth and nature for well-being and four bush-dyeing workshops	The key theme was “growing strength in relationship” and three subthemes were: “creating a safe place together in challenging times” (capturing impact of lockdown); dialogs of vulnerability and identity; and dialogs about Country.
Blanchet (2024) Canada	Indigenous women students (<i>n</i> = 8)	Theatricalisation of life stories of Indigenous women students aiming to strengthen the narrative sovereignty of Indigenous women and provide recommendations for culturally safe artistic educational initiatives for Indigenous youth and adults.	- Preliminary findings highlight the benefits of the project’s creative approach, which contributed to the intellectual, physical, emotional, and spiritual dimensions of the participants’ wellness. - The theatricalisation of life stories allowed the voices of Indigenous young women, contributing to their narrative sovereignty.
Fanian et al. (2015) Canada	Indigenous youth (<i>n</i> = 9)	Five-day pilot creative arts and music workshop for youth with the aim of empowering youth to explore critical issues facing their community and their lives and find solutions together through the arts.	- All youth participants reported gaining new artistic skills and expressed a desire to continue developing their artistic abilities. - Participants’ confidence grew throughout the workshop, with many shifting from being very shy to more confident by the end of the week. - Positive interactions and relationships formed among the youth, and between the youth and facilitators.
Hadley et al. (2022) Australia	Local d/Deaf, disabled, and neurodiverse artists (<i>n</i> = not stated)	The Last Avant-Garde project at six sites around Australia invited artists identifying as d/Deaf, disabled, neurodiverse, having lived experience of a medical or mental health condition, or otherwise being part of the disability arts	Three main components of access in disability arts practice were identified – Logistical access (ramps, interpreters); Ideological access (inclusive language, awareness of disability discourse); and Methodological access (models of disability arts training and associated

(Continued)

Table 4: *Continued*

Citation, Country	Participant group, <i>N</i>	Intervention description	Key findings/conclusion
		community to participate in inclusive arts workshops.	modes of collaboration that incorporate disability culture including “crip” culture). • Incorporating disability culture (including “crip” culture) as well as ramps and inclusive language, into theatre practices embraces the preferred collaboration methods of disabled artists.
Latimer et al. (2018) Canada	Indigenous youth (<i>n</i> = 42)	Talking Circle focus group, followed by an art workshop. Talking Circles were used to gather narratives from youth about their experiences, expressions, and management of pain.	• In the Talking Circle sessions, physical pain emerged as the predominant theme; in art activities (painting with an Indigenous artist in a culturally safe environment) emotional pain, overlapping with physical, mental, and spiritual pain perspectives, became more evident. • The importance of Indigenous holistic approaches to health in contrast with Western medicine’s tendency to address individual health aspects separately was also identified.
Lenette et al. (2022) Australia	Residents of diverse ethnic backgrounds (<i>n</i> = 52)	Involved completing a story from an opening hypothetical scenario related to the COVID-19 pandemic with the aim of capturing how participants made sense of new circumstances and coped with daily life using digital story completion.	• Using story completion within a social health context identified some intersectional markers of identity like gender and age. However, lack of ethnic diversity highlighted limitations of using western constructions of storytelling. • Practical strategies for addressing this include “embracing messy stories; exploring diverse notions of storytelling; favouring story fragments (rather than stems) and story assemblage (rather than completion); co-designing story fragments with target groups; and collaborating with local communities to co-design culturally appropriate and sensitive recruitment strategies and projects.” (p. 1)
Lines et al. (2021) Canada	Indigenous youth, elders, families, teachers, adult learners, and parents (<i>n</i> = approx. 45)	Forum Theatre facilitator training sessions over 2 years. The training process involved four stages: building community;	• A strength-based Indigenous approach reframed the challenging topic of suicide

(Continued)

Table 4: Continued

Citation, Country	Participant group, <i>N</i>	Intervention description	Key findings/conclusion
Marchetti and Nicholson (2020) Australia	Incarcerated Indigenous men in prison (<i>n</i> = 30)	sharing stories; creating a forum; and inviting community. The “Dreaming Inside” programme used creative writing (poetry, stories) to help participants reconnect with their culture and rebuild self-confidence and self-esteem. Elders and Aboriginal tutors supported participants.	prevention into an actionable mental wellness intervention. • This approach must incorporate leadership, input, and guidance from Indigenous community members • Collaborating with community partners helped emphasise Indigenous strengths such as traditional knowledge, values, relational connections, community assets, protocols, responsibilities, and goals. • Participation in the programme improved well-being for 33% of interviewees, who reported increased feelings of self-worth, confidence, empowerment, and belonging. • For most men interviewed (70%), the main benefit of the Dreaming Inside programme was the opportunity to share their stories – 63% of the men expressed and processed emotions they would otherwise suppress. • Writing and publishing their work allowed them to be understood by others, both inside and outside of prison.
Marchetti et al. (2022) Australia	Incarcerated Indigenous women (<i>n</i> = up to 12; 3 were interviewed)	An Indigenous-led, arts-based pilot project in Brisbane Women’s Correctional Centre that used deep active listening, inspired by Dadirri, to help Aboriginal and Torres Strait Islander women on remand reconnect with culture.	• Reconnecting or reinforcing the women’s ties to culture and Country during the workshops and while listening to the final audio product was beneficial for their well-being, helping them to relax and de-stress while providing “acoustical agency.” • Participants gained opportunities to strengthen their connection to Country and place. • Measuring the impact on recidivism remains challenging due to data quality and accessibility issues within corrections.
Rieger et al. (2021) Canada		A 2-day digital story-telling workshop, and three Talking Circles throughout the	• A culturally safe and ethical space enabled “deep introspection, personal

(Continued)

Table 4: *Continued*

Citation, Country	Participant group, <i>N</i>	Intervention description	Key findings/conclusion
Robbins et al. (2017) Canada	Indigenous women who experienced breast cancer (<i>n</i> = not specified)	digital storytelling workshop to discuss First Nations women's experiences of breast cancer, perceptions of what knowledge needs to be developed to improve services, and feedback on the digital storytelling workshop.	interpretation, and group sharing and bearing witness" (p. 2169), resulting in deep insights about how First Nations women experience cancer. • Knowledge of local First Nations culture was critical for navigating relationships in the workshops, reinforcing the value of having Indigenous scholars and community members in the team, (p. 2171). • "The digital storytelling workshop facilitated a Debwewin journey, which is an ancient Anishinabe way of knowing that connects one's heart knowledge and mind knowledge..." (p. 2163)
	Indigenous youth (<i>n</i> = not specified)	A grassroots film creation and production programme in a major urban centre in Saskatchewan that aimed to "enable youth to become creative through the arts in an environment supported by an intergenerational network of Nêhiyaw (Plains Cree) kinship relationships called wâhkôtowin." (p. 161)	• "Two factors at play were observed in the programme: first, the context of the arts clearly lends itself to the creation of culturally safe spaces for Indigenous youth, and, second, wâhkôtowin or kinship among people within the programme, including participants, the manager, the facilitator, the Elder, and the researchers, helped to further facilitate the effectiveness of this culturally safe space." (p. 165) • "Youth emerged as peers and role models for each other." (p. 165)
Whyte (2020) Canada	Incarcerated Indigenous men (<i>n</i> = 32)	Involved two mural making projects that aimed to "address the over-representation [of Indigenous people] within correctional systems and the potential impacts of colonisation on crime, including addiction, trauma and other mental health conditions." (p. 55)	• The author observed that "For some of these men, the correctional system was their first exposure to cultural access, which speaks to the greater dialogue regarding the impact of colonisation on community health as a whole." (p. 59) • The importance of setting a therapeutic frame for mural making as well as considering the benefit of cultural access, symbolism and community building for Indigenous men was emphasised

(Continued)

Table 4: Continued

Citation, Country	Participant group, <i>N</i>	Intervention description	Key findings/conclusion
Wilson et al. (2018) Australia	Indigenous people (<i>n</i> = not stated)	Involved the creation of “an Indigenous Community Engagement Coordinator initiative, through which presenters, audiences and communities could develop their knowledge, understanding and respect for Indigenous culture and peoples, and for Indigenous communities to connect with their local performing arts centres.” (p. 76)	• The author concluded that the project demonstrated “the flexibility and malleability of art therapy to create cultural safety in the prison system” as well as “its healing power beyond the cell block by modelling restorative spaces of reconciliation and healing in isolated places” (p. 60) • The initiative created a “strong and diplomatic communication bridge between non-Indigenous and Indigenous stakeholders.” (p. 93) • “Many [participants] recognised the potential value of extending Indigenous community engagement across their annual programmes, including with non-Indigenous productions, as well as potential ways to encourage greater use of their venues by Indigenous community members outside of any performance/season framework.” (p. 99) • Investment is required to enable performing arts centres to deliver community engagement programmes on an ongoing basis.
Doyle et al. (2016) Australia	Indigenous people (<i>n</i> = 850+)	Multifaceted (<i>n</i> = 3) Investigated the aims and purpose of 12 health promotion programmes (encompassing 88 activities) run by Aboriginal Community Controlled Organisations.	• Social connectedness was the most common focus of the activities; PA was represented in two thirds of the activities, and nutrition, weight loss, and culture were each a focus of about half of the activities. • Most activities were designed within a local Aboriginal cultural framework with minimal Western influence – therefore these Aboriginal organisations are providing culturally relevant and innovative health activities that address community needs.

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Table 4: *Continued*

Citation, Country	Participant group, <i>N</i>	Intervention description	Key findings/conclusion
Flouris et al. (2016) Australia	Aboriginal community members or service providers (either non-Aboriginal or Aboriginal) (<i>n</i> = 60)	Youth programmes in three remote Indigenous communities in Central Australia.	• Culturally safe service planning and delivery require youth development programmes that are inclusive of the community. • “Youth-centred, context-specific” approaches provide a positive framework for delivering youth programmes in remote settlements. • Remote Australian Aboriginal communities preferred to have intergenerational, culturally oriented activities accessible to all ages. Programmes designed for the youth’s benefit, yet open to and inclusive of all ages, generated greater engagement and ownership
Ollier et al. (2020) Canada	Indigenous people (<i>n</i> = not stated)	Project Jewel, an “on-the-land” wellness programme run by the Inuvialuit Regional Corporation comprising 3-day to 10-day on-the-land wellness programmes (“camps”) six times per year.	• Indigenous communities take ownership of the project through defining the standards of evaluation so that they do not convey judgement but are perceived as an opportunity for learning and self-determination. • The inclusion of storytelling and oral histories are important elements of Indigenous approaches to evaluation research. • A key challenge was the view that Indigenous ways of knowing and data collection methods are “less valid than those from Western paradigms.” • The four themes that comprise an evaluation framework that promotes cultural safety included: centring the land, building relationships, working with words and pictures, and promoting benefits by minimising harms through aftercare.

Table 4. Overview of primary studies – sports (*n* = 9), arts (*n* = 13), and multifaceted (*n* = 3).
Source: Authors’ contribution.

Citation	No. of times cited in included studies	Cultural safety definition
Williams (1999)	4	<i>“...an environment which is safe for people; where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience, of learning together with dignity, and truly listening...”</i> (Williams, 1999, p. 213)
Brascoupé and Waters (2009)	2	<i>“...the reversal of cultural danger or peril, where individuals and communities may be at risk or in crisis...entails not just the agreement and understanding that cultural differences matter in social and health policy delivery, but also the need to make a real difference in methods of delivery and the ultimate effectiveness of the policies...Cultural safety is not just a process of improving program delivery; it is also part of the outcome.”</i> (Brascoupé & Waters, 2009, p. 11) Note: The authors highlight the need for program leaders/healthcare professionals to reflect on their own culture and position of power.
Browne et al. (2009)	2	<i>“Cultural safety aims to counter tendencies in health care that create cultural risk (or unsafety) – those situations that arise when people from one ethnocultural group believe they are demeaned, diminished or disempowered by the actions and the delivery systems of people from another culture ... compatible with critical theoretical perspectives that foster a focus on power imbalances and inequitable social relationships in health care; the interrelated problems of culturalism and racialisation; and a commitment to social justice as central to the social mandate of nursing.”</i> (Browne et al., 2009, p. 169)
Curtis et al. (2019)	2	<i>“Cultural safety requires healthcare professionals and their associated healthcare organisations to examine themselves and the potential impact of their own culture on clinical interactions and healthcare service delivery ... to acknowledge and address their own biases, attitudes, assumptions, stereotypes, prejudices, structures and characteristics that may affect the quality of care provided. In doing so, cultural safety encompasses a critical consciousness where healthcare professionals and healthcare organisations engage in ongoing self-reflection and self-awareness and hold themselves accountable for providing culturally safe care, as defined by the patient and their communities, and as measured through progress towards achieving health equity. Cultural safety requires healthcare professionals and their associated healthcare organisations to influence healthcare to reduce bias and achieve equity within the workforce and working environment...”</i> (Curtis et al., 2019, p. 13)

Table 5. Most frequently cited definitions of cultural safety within included studies.
Source: Authors' contribution.

9.5 Key Features of Culturally Safe Practices

Drawing upon the key principles outlined above, culturally safe programmes share several important features. Successful initiatives were designed with strong community involvement, making them relevant and inclusive (Bennie et al., 2021; Gagliardi et al., 2022). Common features included using participants' preferred languages, hosting activities in community-based settings, and involving facilitators who reflected participants' cultural and

social norms (Gagliardi et al., 2022). These programmes also worked to remove barriers to participation (Bennie et al., 2021; Gagliardi et al., 2022). Flexibility and respect for local cultures were essential, for example the Ironbark programme successfully established a supportive programme framework for both the Elders who participated and their communities (Gidgup et al., 2022).

Leadership of Indigenous people and the role of Elders were particularly significant in creating culturally safe spaces (Whyte, 2020). Elders provided cultural guidance,

shared traditional knowledge, and strengthened programme relationships (Brooks-Cleator & Giles, 2016; Whyte, 2020). Programmes that addressed intergenerational trauma, grief, and systemic inequities were especially effective (Marchetti & Nicholson, 2020; Pour *et al.*, 2023).

9.6 Challenges and Areas for Improvement

While most programmes captured in the review showed promise, some also faced challenges. Insufficient funding and staffing made maintaining programme quality and adapting to participants' needs difficult (English *et al.*, 2023). Standardised Western frameworks often failed to meet the cultural needs of Indigenous communities, highlighting the need for culturally relevant content and greater involvement of local leaders (Brooks-Cleator & Giles, 2016; Frazer & Giles, 2023). Efforts to promote inclusivity were sometimes hindered by resistance within organisations, particularly in areas like sports/recreation (Rich & Giles, 2015). To overcome these barriers, programmes demonstrated the importance of working closely with Indigenous communities throughout programme lifecycles (Miller & Walke, 2024). Co-design approaches prioritising community leadership and respecting cultural protocols were shown to improve outcomes and foster cultural safety (English *et al.*, 2023; Lines *et al.*, 2021).

9.7 Impact of Cultural Safety Programmes: Sports Programmes

Culturally safe sports programmes created environments that promoted self-determination, empowerment, and cultural connections. Participation in sports improved physical and mental health, self-esteem, and confidence among Indigenous women, enabling them to assume leadership roles within their communities (Stronach *et al.*, 2019). For youth, sports programmes reinforced cultural ties and supported holistic well-being by addressing spiritual, emotional, mental, and physical health while strengthening connections to ancestry and the wider community (Frazer & Giles, 2023; Pour *et al.*, 2023).

Programmes for older adults, such as Ironbark, a PA initiative targeting Aboriginal and Torres Strait Islander people aged 45 and over to improve their health and well-being, have been positively received for their cultural relevance, emphasis on relationship-building, and PA promotion (Gidgup *et al.*, 2022, 2024). Community events integrating cultural celebrations have further supported

health promotion and increased participation in these programmes (Miller & Walke, 2024). Moreover, addressing racism at all levels of competition, and fostering leadership of Indigenous people within community clubs, were found to be essential for supporting Indigenous athletes and strengthening community spirit (Mansell *et al.*, 2024).

9.8 Impact of Cultural Safety Programmes: Arts Programmes

Culturally safe arts programmes have reported benefits for participants, particularly within Indigenous communities. By creating supportive spaces for self-reflection, emotional expression, and personal growth, these initiatives address the holistic needs of individuals while promoting cultural reconnection and belonging (Blanchet, 2024; Marchetti & Nicholson, 2020; Robbins *et al.*, 2017; Whyte, 2020). For instance, the Dreaming Inside programme, an arts-based programme for incarcerated Aboriginal and Torres Strait Islander men in NSW, utilised creative writing to facilitate cultural reconnection and enhance well-being. Participants reported improved self-worth, confidence, a sense of belonging, and emotional well-being through the opportunity to express and process emotions in a culturally safe space (Marchetti & Nicholson, 2020).

Similarly, the Forum Theatre programme was an arts programme that used games and image work to create a short play reflecting an oppressive situation. It employed an Indigenous strengths-based approach to reframe complex topics (e.g. suicide prevention) into actionable wellness interventions, through collaboration with community partners and ongoing leadership and guidance from Indigenous community members (Lines *et al.*, 2021). For young people, arts programmes offered opportunities to develop skills in areas like music production, visual arts, and spoken word (Fanian *et al.*, 2015). These activities fostered strong relationships with peers, facilitators, and their communities, which, in turn, contributed to a sense of extended family and cultural belonging (Fanian *et al.*, 2015; Robbins *et al.*, 2017).

Overall, employing strengths-based approaches fostered resilience, self-determination, and identity exploration through artistic expression. Creating culturally safe spaces further enabled participants to navigate the interconnected physical, emotional, and spiritual dimensions of well-being (Austin & Vadiveloo, 2023; Hadley *et al.*, 2022; Latimer *et al.*, 2018; Williams *et al.*, 2024). These findings underline the importance of trust and collaboration for success.

Two arts-focused initiatives surfaced unexpected insights. In the Talking Circle sessions, physical pain emerged as the predominant theme, aligning with the types of physical discomforts that youth commonly report in

national surveys. However, when participants had the opportunity to express their pain through painting with an Indigenous artist in a culturally safe environment, emotional pain became more evident. Emotional pain often overlapped with aspects of physical, spiritual, and mental pain (Latimer et al., 2018). For some of the incarcerated men in the study by Whyte (2020), the correctional system was their first exposure to cultural access, which the author reflected “*speaks to the greater dialogue regarding the impact of colonisation on community health as a whole*” (Whyte, 2020, p. 59).

10. Discussion

10.1 Statement of Key Findings

This rapid scoping review aimed to synthesise knowledge about the impact of cultural safety initiatives in sports and arts programmes in Australia, New Zealand, and Canada and to identify and describe how studies defined cultural safety. A comprehensive literature search identified 33 relevant articles comprising 8 reviews and 25 primary studies. Most primary studies ($n = 19$) focused on Indigenous people.

Of the 16 studies providing an explicit definition of cultural safety, key themes from the definitions encompassed recognising and respecting individual identities, including age, gender, culture, and life experiences (Balla et al., 2022; Marchetti & Nicholson, 2020); the importance of shared knowledge, open discussions, and mutual understanding (Balla et al., 2022; Lines et al., 2021); acknowledging colonial histories and systemic discrimination as barriers to equity, including through Indigenous-led programmes (Mansell et al., 2024; Rieger et al., 2021); reducing power imbalances and allowing communities to shape programmes (Gidgup et al., 2022; Miller & Walke, 2024); and understanding cultural practices, including adherence to cultural protocols and involving Indigenous facilitators (Marchetti & Nicholson, 2020; Whyte, 2020).

Positive impacts of arts-based initiatives centred on addressing holistic needs and promoting cultural reconnection and belonging. Similarly, sports-based programmes promoted self-determination, empowerment, and cultural connections. Furthermore, sports participation improved physical and mental health, self-esteem, and confidence, particularly among Indigenous women. Key challenges for initiatives and programmes included insufficient funding and staffing, inappropriate use of standardised Western frameworks, and organisational resistance.

10.2 Comparison of Findings with Related Research

The definitions of cultural safety drawn from the included studies show that considering the critical nuances of the definitions may have important implications. For example, Austin and Vadiveloo (2023) describe the duality of cultural safety as both an ethical framework and an intended outcome, emphasising the need to be mindful of its overarching intent and conscious that in making spaces safer, it is important to be cognisant of imposing the organiser’s values and beliefs on the activity, which can result in participants losing agency and power. Such situations can reinforce, rather than diminish, power structures inherent in colonisation (Frazer & Giles, 2023). This underlines the importance of thoughtful self-reflection and reflexivity in reference to one’s positionality in guiding cultural safety planning and practice, as highlighted in Ramsden’s seminal definition (Papps & Ramsden, 1996). Relatedly, a recommendation of multiple studies in this review was the need to ensure that sports and arts activities are co-designed with, and, where able, delivered by representatives of the groups they seek to include. This appears critical in addressing hidden biases of those outside of these groups.

Two studies offered powerful manifestations of this concept. First, Latimer et al. (2018) used artistic expression to explore how Indigenous children and youth express pain, and concluded that “*Indigenous cultures often conceptualise health issues very differently from Western medicine...Youth reported high rates of physical pain and missed school due to pain, but primarily shared emotional and mental pain experiences in their artwork*” (Latimer et al., 2018, p. 11). Second, the study by Lines et al. (2021), which examined strength-based approaches to wellness aimed at youth, included elders, families, adult learners, and toddlers. This underlined the importance of community connections and relational accountability, suggesting that more limited approaches, for example those where only youth are included, may inadvertently neglect this key ingredient.

Notably, 19 of the 25 primary studies focused on Indigenous people, including 6 on Indigenous women and 5 on Indigenous youth. In contrast, few of the included studies focused on other groups who may also benefit from cultural safety practices, for instance people with disability and from non-majority ethnic backgrounds. Although one review focusing on PA promotion for immigrant women reported positive findings, there were relatively few studies within this review (Gagliardi et al., 2022). Furthermore, no studies were identified addressing the needs of other groups like LGBTQIA+, gender-diverse

individuals, and/or those from minority religious groups. Explanations for this could include limitations in the review scope, disruptions to programmes arising from the COVID-19 pandemic, and publication lag. Further exploration of cultural safety initiatives addressing the needs of these groups is warranted.

However, a relatively large volume of research on Indigenous people does not obviate the need for further research focused on this group. The review of Pour *et al.* (2023) concluded that *“mainstream psychological wellbeing methods, Rules, dos and don’ts continue to operate using colonial ideologies when providing services to First Nations youth...It is imperative that the “colonial lens” is removed and culturally safe practices are embedded...”* (Pour *et al.*, 2023, p. 406). The study of an arts programme in Victoria, Australia by Austin and Vadiveloo (2023) emphasised the importance of engaging Indigenous people in facilitator and leadership positions: *“the basic principle of ensuring that there is a Welcome and then ongoing Acknowledgement of Country is useful but ultimately insufficient in cultivating culturally safe collaborative space for First Nations young people working with a white facilitator on stolen land”* (Austin & Vadiveloo, 2023, p. 66).

Future avenues of research could include, but are not limited to, exploring how cultural safety definitions and terminology vary across target populations (e.g. culturally and linguistically diverse (CALD) communities, people with disability and LGBTQIA+); examining how cultural safety is approached theoretically by different academic disciplines; focusing on activities beyond sports and arts; and more targeted primary and review research examining specific groups or disciplinary perspectives.

10.3 Strengths and Limitations of the Review

This is the first known review focusing on cultural safety in sports and arts settings. The review applied robust dual independent study selection methods using explicit and pre-determined criteria; comprehensive searching of nine databases by a specialist librarian; and collaboration with the review commissioners on review approach and interpretation, reflected by co-authorship. Given the breadth of the concept of cultural safety, an in-depth exploration of how cultural safety was defined and operationalised across the included studies was another strength of the review.

Review limitations are primarily related to adjustments in the scope of the review to accommodate a rapid review time frame: limitations to the English language, a

small number of countries with shared characteristics, and a 10-year time frame. While some relevant evidence may have been found in earlier years, the review focused on more recent evidence to identify current trends and due to limited resource availability. In addition to different sectoral approaches to “cultural safety” across populations, there are also many ways to view cultural safety from various academic disciplines; this aspect was beyond the scope of the present work.

Furthermore, quality appraisal was not undertaken – noting this is not routine in scoping reviews (Munn *et al.*, 2018). In addition to considerable variation in study design across the included literature, various underlying research paradigms were represented owing to the nature of the topic, and differing study designs led to the inclusion of very large and very small sample sizes. In this context, it can be argued that quality appraisal was unlikely to add value to the interpretation of review findings.

11. Implications for Policy and Practice

11.1 Definitional Themes and Their Application

For organisations in a position to implement insights from this review, the findings can provide a foundation for advancing cultural safety as a core element of health promotion and community well-being strategies. The review highlights critical definitional elements of cultural safety, including the importance of shared knowledge, reflexivity, and dialogue, addressing systemic inequities rooted in colonial histories, and fostering environments free from identity-based assault or denial. These elements can be used to develop and refine organisational definitions of cultural safety. For instance, VicHealth used the findings of this review to refine its current definition to “cultivating an environment where individuals feel respected, valued, and supported in their cultural identity, with systems fostering equity by actively addressing power imbalances and embracing cultural differences to minimise harm and racism within Victoria.”

Policy implications include embedding these themes into organisational frameworks, co-designing programmes with communities to reflect their lived experiences and cultural protocols, and, where possible, employing staff or programme leaders who share participants’ cultural backgrounds. The findings underscore the importance of integrating shared learning and dialogue mechanisms into

partnerships with local government, sports and arts organisations, and community groups. Such approaches reflect organisations' commitment to fostering equity, trust, and mutual respect among diverse stakeholders. Finally, the review's emphasis on reducing power imbalances and acknowledging colonial histories reinforces the need for policies and practice that promote self-determination and equity.

11.2 Opportunities for Operationalising Cultural Safety Principles

There are several ways to operationalise cultural safety principles identified in the review for organisations. Practical steps may include:

- **Resource allocation:** Providing targeted funding to support community-led programmes that prioritise cultural inclusion and connectedness. These programmes can improve mental health, social cohesion, and overall well-being by addressing barriers to participation for marginalised groups.
- **Capacity building:** Offering training, resources, and networking support for stakeholders to develop cultural competence; understanding of cultural protocols; and skills for self-reflection. This aligns with the review's finding that knowledge and reflexivity are key to fostering culturally safe environments.
- **Community engagement:** Enhancing identification and relationships with underrepresented community groups, ensuring that programmes address their needs and priorities. This engagement needs to be more than "one off" projects. Rather, work needs to be ongoing and undertaken with intentional consideration of long-standing forms of oppression and the need for iterative, reflexive approaches.

11.3 Addressing Barriers and Facilitators

The review identifies several barriers to implementing cultural safety, such as resistance within organisations, insufficient funding, and reliance on Western frameworks. Overcoming these barriers involves adopting a strengths-based co-design approach that prioritises community leadership and cultural relevance. Facilitators such as Indigenous leadership, relational accountability, and recognition of intergenerational trauma are essential for creating sustainable and impactful initiatives. We acknowledge that cultural safety is a complex phenomenon with individual and system-level characteristics

and drivers. This review focused on the practical manifestations of cultural safety practices. While the wider system and other dynamics are critical for building and scaling cultural safety practices, exploration of this aspect was beyond the scope of the present work. Of note, the context of this review was to inform a long-term strategy based around system transformation (Victorian Health Promotion Foundation, 2023). Therefore, deeper exploration of system implications of this review is an important next step for both policy and research.

12. Conclusion

The identification of 33 relevant studies reflects growing interest in this topic. These studies describe considerable benefits of cultural safety initiatives, but also important reflections that can enable practitioners and researchers to build upon and refine cultural safety research and practice. The findings of this review show that cultural safety can be viewed as an essential practice in addressing health and well-being inequities.

As the evidence base remains largely focused on Indigenous populations, expanding research to include CALD communities, people with disability, LGBTQIA+ individuals, and other marginalised groups is an important next step. Public health and other organisations can use these insights by aligning them with their strategic priorities, which can help foster environments where all individuals feel valued in their cultural identity.

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Diki Tsering: Conception and design of the study, analysis and interpretation of data, and manuscript preparation; Veronica Delafosse: Conception and design of the study, acquisition of data, and manuscript preparation; Paul Kellner: Conception and design of the study, acquisition of data, analysis and interpretation of data, and manuscript preparation; Kevin Kapeke: Conception and design of the study, acquisition of data, analysis and interpretation of data, manuscript preparation, and obtaining funding; Susan Maury: Conception and design of the study, acquisition of data, analysis and interpretation of data, manuscript preparation, and obtaining funding; Xavier Walsh: Conception and design of the study, acquisition of data, analysis and

interpretation of data, manuscript preparation, and obtaining funding; Alessandro Demaio: Conception and design of the study, manuscript preparation, and obtaining funding; and Peter Bragge: Conception and design of the study, acquisition of data, analysis and interpretation of data, manuscript preparation, and obtaining funding.

Conflict of interest statement

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References

- Austin, S., & Vadiveloo, I. (2023). "Brave space": Investigating consent and boundaries as a framework for culturally safe collaborative arts practice. *Australasian Drama Studies*, 82, 48–76.
- Australian Institute of Health and Welfare. (2020). Australia's health 2020: Data insights. Australian Institute of Health and Welfare. <https://www.aihw.gov.au/reports/australias-health/australias-health-2020-data-insights/summary>
- Australian Institute of Health and Welfare. (2021). Chronic condition multimorbidity. Australian Institute of Health and Welfare. <https://www.aihw.gov.au/reports/chronic-disease/chronic-condition-multimorbidity/contents/chronic-conditions-and-multimorbidity>
- Australian Institute of Health and Welfare. (2024). Chronic disease. Australian Institute of Health and Welfare. <https://www.aihw.gov.au/reports-data/health-conditions-disability-deaths/chronic-disease/overview>
- Balla, P., Jackson, K., Quayle, A. F., Sonn, C. C., & Price, R. K. (2022). "Don't let anybody ever put you down culturally.... it's not good...": Creating spaces for Blak women's healing. *American Journal of Community Psychology*, 70(3–4), 352–364.
- Bennie, A., Marlin, D., Apoifis, N., & White, R. L. (2021). 'We were made to feel comfortable and... safe': Co-creating, delivering, and evaluating coach education and health promotion workshops with Aboriginal Australian peoples. *Annals of Leisure Research*, 24(1), 168–188.
- Blanchet, P.-A. (2024). Ashtam Ntotacinan/Come listen to Us: Theatricalization of life stories for the holistic wellness of Indigenous women students. *Theatre Research in Canada*, 45(1), 56–79.
- Brascoupé, S. & Waters, C. (2009). Cultural safety exploring the applicability of the concept of cultural safety to aboriginal health and community wellness. *International Journal of Indigenous Health*, 5(2), 6–41.
- Brooks-Cleator, L. A., & Giles, A. R. (2016). Culturally relevant physical activity through Elders in Motion: Physical activity programming for older Aboriginal adults in the Northwest Territories, Canada. *Journal of Cross-Cultural Gerontology*, 31, 449–470.
- Browne, A. J., Varcoe, C., Smye, V., Reimer-Kirkham, S., Lynam, M. J., & Wong, S. (2009). Cultural safety and the challenges of translating critically oriented knowledge in practice. *Nursing Philosophy*, 10(3), 167–179.
- Curtis, E., Jones, R., Tipene-Leach, D., Walker, C., Loring, B., Paine, S.-J., et al. (2019). Why cultural safety rather than cultural competency is required to achieve health equity: A literature review and recommended definition. *International Journal for Equity in Health*, 18, 1–17.
- De, D., & Richardson, J. (2008). Cultural safety: An introduction. *Nursing Children and Young People*, 20(2), 39–44.
- de Lannoy, L., Barbeau, K., Seguin, N., & Tremblay, M. S. (2023). Evidence synthesis-Scoping review of adult-oriented outdoor play publications in Canada. *Health Promotion and Chronic Disease Prevention in Canada: Research, Policy and Practice*, 43(3), 139.
- Department of Creative Industries, Tourism and Sport. (2017). Definition of sport and active recreation. Creative Industries, Tourism and Sport. <https://www.cits.wa.gov.au/department/publications/publication/definition-of-sport-and-active-recreation>
- Doyle, J., Atkinson-Briggs, S., Atkinson, P., Firebrace, B., Calleja, J., Reilly, R., et al. (2016). A prospective evaluation of first people's health promotion program design in the Goulburn-Murray rivers region. *BMC Health Services Research*, 16, 1–13.
- English, M., Wallace, L., Caperchione, C. M., & Williams, P.-J. (2023). Exploring the voices of health promotion stakeholders concerning the implementation of physical activity programs for the social and emotional wellbeing of young Aboriginal and Torres Strait Islander girls. *Sport in Society*, 26(7), 1139–1160.
- Fanian, S., Young, S. K., Mantla, M., Daniels, A., & Chatwood, S. (2015). Evaluation of the K ts' iihltla ("We Light the Fire") Project: Building resiliency and connections through strengths-based creative arts programming for Indigenous youth. *International Journal of Circumpolar Health*, 74(1), 27672.

- Flouris, A., Crane, P., & Lindeman, M. A. (2016). Youth programmes in remote Indigenous communities: Context matters. *Rural Society*, 25(1), 37–54.
- Frazer, H., & Giles, A. R. (2023). Are sport and traditional Inuit games identified as tools in current Inuit suicide prevention strategies?: A content analysis. *International Journal of Circumpolar Health*, 82(1), 2276983.
- Gagliardi, A. R., Morrison, C., & Anderson, N. N. (2022). The design and impact of culturally-safe community-based physical activity promotion for immigrant women: Descriptive review. *BMC Public Health*, 22(1), 430.
- Garritty, C., Hamel, C., Trivella, M., Gartlehner, G., Nussbaumer-Streit, B., Devane, D., et al. (2024). Updated recommendations for the Cochrane rapid review methods guidance for rapid reviews of effectiveness. *BMJ*, 384, e076335.
- Gidgup, M. J., Kickett, M., Francis-Coad, J., Hill, K., Umbella, J., Coombes, J., et al. (2024). ‘Nih Waangkiny Kaadatjiny’: ‘Listening, learning and knowing’: Stakeholders’ perspectives about barriers and enablers to delivering a successful physical activity program for older Aboriginal people. *Health Promotion Journal of Australia*, 35(2), 444–456.
- Gidgup, M. J., Kickett, M., Jacques, A., Weselman, T., Hill, K. D., Coombes, J., et al. (2022). Translating and evaluating a physical activity program for Aboriginal Elders on Noongar Boodjar (Country)—A longitudinal study. *Frontiers in Public Health*, 10, 904158.
- Hadley, B., Paterson, E., & Little, M. (2022). Quick Trust and Slow Time: Relational Innovations in Disability Performing Arts Practice. *The International Journal of Disability and Social Justice*, 2(1), 74–94. JSTOR.
- Hamel, C., Michaud, A., Thuku, M., Skidmore, B., Stevens, A., Nussbaumer-Streit, B., et al. (2021). Defining rapid reviews: A systematic scoping review and thematic analysis of definitions and defining characteristics of rapid reviews. *Journal of Clinical Epidemiology*, 129, 74–85.
- Khangura, S., Konnyu, K., Cushman, R., Grimshaw, J., & Moher, D. (2012). Evidence summaries: The evolution of a rapid review approach. *Systematic Reviews*, 1, 1–9.
- Khasnabis, C., Heinicke Motsch, K., Achu, K., Al Jubah, K., Brodtkorb, S., Chervin, P., Coleridge, P., Davies, M., Deepak, S., Eklinth, K., Goerdt, A., Greer, C., Heinicke-Motsch, K., Hooper, D., Ilagan, V. B., Jessup, N., Khasnabis, C., Mulligan, D., Murray, B., Officer, A., Ortali, F., Ransom, B., Robert, A., Stubbs, S., Thomas, M., Balakrishna, V., Wabuge-Mwangi, R., Mattock, N., Lander, T., editors. (2010). Recreation, leisure and sports. In *Community-Based Rehabilitation: CBR Guidelines*. World Health Organization. <https://www.ncbi.nlm.nih.gov/books/NBK310922/>
- Klerings, I., Robalino, S., Booth, A., Escobar-Liquitay, C. M., Sommer, I., Gartlehner, G., et al. (2023). Rapid reviews methods series: Guidance on literature search. *BMJ Evidence-Based Medicine*, 28(6), 412–417.
- Latimer, M., Sylliboy, J. R., MacLeod, E., Rudderham, S., Francis, J., Hutt-MacLeod, D., et al. (2018). Creating a safe space for First Nations youth to share their pain. *Pain Reports*, 3(7), e682.
- Lenette, C., Vaughan, P., & Boydell, K. (2022). How can story completion be used in culturally safe ways? *International Journal of Qualitative Methods*, 21, 16094069221077764.
- Lines, L.-A., Marty, C., Anderson, S., Stanley, P., Stanley, K., & Jardine, C. (2021). Indigenizing Forum Theatre through a strength-based approach. *AlterNative: An International Journal of Indigenous Peoples*, 17(4), 504–513.
- Mackean, T., Fisher, M., Friel, S., & Baum, F. (2020). A framework to assess cultural safety in Australian public policy. *Health Promotion International*, 35(2), 340–351.
- Mansell, E., Turnbull, D., Yung, A., Crumpen, S., Winkenweder, H., Reilly, R., et al. (2024). How community sport and recreation affect the health and well-being of Indigenous people: A qualitative systematic review and meta-aggregation. *Mental Health & Prevention*, 200336.
- Marchetti, E., & Nicholson, B. (2020). Using a culturally safe creative writing Programme to empower and heal Aboriginal and Torres Strait Islander men in prison. *The Howard Journal of Crime and Justice*, 59(4), 423–441.
- Marchetti, E., Woodland, S., Saunders, V., Barclay, L., & Beetson, B. (2022). Listening to Country: A prison pilot project that connects Aboriginal and Torres Strait Islander women on remand to Country. *Current Issues in Criminal Justice*, 34(2), 155–170.
- Miller, J., & Walke, E. (2024). Community events to increase uptake of Indigenous-specific health assessments: A scoping review. *Rural and Remote Health*, 24(3), 1–11.
- Mohamed, J., Stacey, K., Chamberlain, C., & Priest, N. (2024). Cultural safety in Australia. Lowitja Institute. <https://www.lowitja.org.au/news/discussion-paper-cultural-safety-in-australia/>
- Munn, Z., Peters, M. D., Stern, C., Tufanaru, C., McArthur, A., & Aromataris, E. (2018). Systematic review or scoping review? Guidance for authors when choosing between a systematic or scoping

- review approach. *BMC Medical Research Methodology*, 18, 1–7.
- Ollier, M., Giles, A. R., Etter, M., Ruttan, J., Elanik, N., Goose, R., et al. (2020). Promoting a culturally safe evaluation of an on-the-land wellness program in the Inuvialuit Settlement Region. *Arctic*, 73(3), 312–325.
- Papps, E., & Ramsden, I. (1996). Cultural safety in nursing: The New Zealand experience. *International Journal for Quality in Health Care*, 8(5), 491–497.
- Pour, S. A., Liddle, M., & Kamath, R. (2023). Examining the effectiveness of culturally safe mental health interventions on the wellbeing of first nations youth: A systematic literature review. *Journal for ReAttach Therapy and Developmental Diversities*, 6(5s), Article 5s.
- Rich, K., & Breunig, M. (2022). Cultural safety: A lens to consider leisure provision in cross-cultural contexts. *Managing Sport and Leisure*, 27(4), 366–380.
- Rich, K., & Giles, A. R. (2015). Managing diversity to provide culturally safe sport programming: A case study of the Canadian Red Cross's swim program. *Journal of Sport Management*, 29(3), 305–317.
- Rieger, K. L., Bennett, M., Martin, D., Hack, T. F., Cook, L., & Hornan, B. (2021). Digital storytelling as a patient engagement and research approach with first nations women: How the medicine wheel guided our Debwewin journey. *Qualitative Health Research*, 31(12), 2163–2175.
- Robbins, J., Linds, W., Ironstand, B., & Goodpipe, E. (2017). Generating and sustaining positive spaces: Reflections on an Indigenous youth urban arts program. *AlterNative: An International Journal of Indigenous Peoples*, 13(3), 161–169.
- Speckemeier, C., Niemann, A., Wasem, J., Buchberger, B., & Neusser, S. (2022). Methodological guidance for rapid reviews in healthcare: A scoping review. *Research Synthesis Methods*, 13(4), 394–404.
- Storr, R., Yeomans, C., Albury, K., Ridgers, N., & Sherry, E. (2024). Free to exist: Documenting participation data on LGBTIQ+ young people in sport and physical activity. Swinburne Sport Innovation Research Group.
- Stronach, M., Maxwell, H., & Pearce, S. (2019). Indigenous Australian women promoting health through sport. *Sport Management Review*, 22(1), 5–20.
- Thompson, P. B. (2022). Cultural safety and social inclusion. *Handbook of Social Inclusion: Research and Practices in Health and Social Sciences*, 251–263.
- Veritas Health Innovation. (2023). Covidence systematic review software [Computer software]. Veritas Health Innovation. <https://www.covidence.org/>
- Victorian Equal Opportunity and Human Rights Commission. (2024). Guideline: Race discrimination in the workplace. Victorian Equal Opportunity and Human Rights Commission. <https://www.humanrights.vic.gov.au/resources/guideline-workplace-race-discrimination/>
- Victorian Health Promotion Foundation. (2023). The next 10 Years 2023-2033: Reshaping Systems Together for a Healthier, Fairer Victoria. Victorian Health Promotion Foundation.
- Whitau, R., & Ockerby, H. (2019). Yarning with the Stars Project: An Indigenous evaluation protocol for a sport for development and peace program. *Journal of Sport for Development*, 7(13), 46–54.
- Whyte, M. K. W. (2020). Cell Block Brushes: Art Therapy-Based Murals for Indigenous and Incarcerated Men in Federal Correctional Services (Pinceaux de bloc cellulaire: Peintures murales fondées sur l'art-thérapie avec des hommes autochtones incarcérés dans les services correctionnels fédéraux). *Canadian Journal of Art Therapy*, 33(2), 54–61.
- Williams, K. K. A., Evans, C., Mazaniello-Chézol, M., & Adams, A. M. (2024). Mitigating mental health and wellbeing challenges among young populations: A scan of youth-led initiatives across Canada to inform psychosocial program development. *Children and Youth Services Review*, 156, 107323.
- Williams, R. (1999). Cultural safety—What does it mean for our work practice? *Australian and New Zealand Journal of Public Health*, 23(2), 213–214.
- Wilson, D., Williams, T. P., Brown, K., & Syron, L.-M. (2018). Engaging with local first nations communities through the performing arts. *Australasian Drama Studies*, 73, 69–100.

Appendices

Appendix 1: Search strategies

Database: Scopus

Date searched: October 4, 2024

Number of citations: 142

(TITLE-ABS-KEY("cultural safety" OR "culturally safe" OR "culturally unsafe" OR "multicultural safety" OR "multiculturally safe" OR "multiculturally unsafe")

OR

TITLE-ABS-KEY(("cultural responsiveness" OR "cultural awareness" OR "cultural practice*" OR "cultural protocol*" OR "cultural classroom" OR "culturally appropriate" OR "culturally aware" OR "culturally inappropriate" OR "culturally responsive" OR "culturally sensitive" OR "culturally insensitive" OR "cultural inclusion" OR "culturally included" OR "cultural exclusion" OR "culturally excluded" OR "cultural identit*" OR "anti-racism" OR "racism" OR "discrimination" OR "racialisation" OR "minorit*" OR "ethnic*" OR "equity" OR "equal opportunit*" OR "shared respect" OR "shared meaning" OR "shared knowledge" OR "shared experience" OR "inter-generational") W/9 (safe OR safety OR unsafe OR security))

AND

TITLE-ABS-KEY("art" OR "arts" OR "artistic" OR "creativ*" OR "sport" OR "sports" OR "recreation*" OR "physical activit*" OR "physical education" OR "traditional W/3 games" OR "aboriginal W/3 games" OR "play" OR "outdoor*" OR "exercise*")

AND

TITLE-ABS-KEY(intervention* OR impact* OR implement* OR initiative* OR engagement* OR partnership* OR evaluation* OR trial* OR pilot* OR program* OR strateg* OR activit* OR incentiv* OR campaign* OR promote* OR promotion)

AND

TITLE-ABS-KEY(Australia* OR "New South Wales" OR Victoria OR Tasmania OR Queensland OR "Northern Territory" OR "South Australia" OR "Western Australia" OR "Australian Capital Territory" OR aborigin* OR "First Nation*" OR "First People*" OR "traditional owner*" OR "indigenous" OR "Torres Strait Islander*" OR "New Zealand" OR "aotearoa" OR "maori" OR "canada" OR "canadian" OR "metis" OR "cree" OR "inuit")

AND PUBYEAR > 2014 AND PUBYEAR < 2025 AND (LIMIT-TO (DOCTYPE,"ar") OR LIMIT-TO (DOCTYPE,"re")) AND (LIMIT-TO (LANGUAGE,"English"))

Database: PROQUEST – Seven databases

- Arts & Humanities Database
- Australia & New Zealand Database
- Canadian Business & Current Affairs Database
- Health & Medical Collection
- Performing Arts Periodicals Database
- Public Health Database
- Social Science Database

Date searched: October 7, 2024

Number of citations: 65

noft("cultural safety" OR "culturally safe" OR "culturally unsafe" OR "multicultural safety" OR "multiculturally safe" OR "multiculturally unsafe")

AND

noft(art OR arts OR artistic OR creativ* OR sport OR sports OR recreation OR leisure OR "physical activit*" OR "physical education" OR games OR play OR outdoor* OR exercise*) AND

noft(intervention* OR impact* OR implement* OR initiative* OR engagement* OR partnership* OR evaluation* OR trial* OR pilot* OR program* OR activit* OR incentiv* OR campaign* OR promote* OR promotion)

AND

noft(Australia* OR "New South Wales" OR Victoria OR Tasmania OR Queensland OR "Northern Territory" OR "South Australia" OR "Western Australia" OR "Australian Capital Territory" OR aborigin* OR "First Nations" OR "First Peoples" OR "traditional owner" OR "indigenous" OR "Torres Strait Islander" OR "New Zealand" OR "aotearoa" OR "maori" OR "canada" OR "canadian" OR "metis" OR "cree" OR "inuit")

AND

stpe.exact("Scholarly Journals") AND la.exact("English")

Additional limits – Date: From 2015 to 2024; Source type: Scholarly Journals; Language: English

Filter – article

Database: INFORMIT – Nine databases

- Australian Family & Society Abstracts (FAMILY)
- Australian Public Affairs Full Text (APAFIT)
- Business Collection
- Families & Society Collection
- Health Collection
- Humanities & Social Sciences Collection
- Indigenous Collection

- Indigenous Studies Bibliography (AIATSIS)
- Literature & Culture Collection

Date searched: October 7, 2024
Number of citations: 40

“cultural safety” AND [art OR arts OR artistic OR creativ* OR sport OR sports OR recreation OR leisure OR “physical activit*” OR “physical education” OR games OR play OR outdoor* OR exercise*] AND Resource Type: Journal Article AND Publication Date: (01/01/2015 TO 31/12/2024)

Database: Web of Science – Two databases

- Arts & Humanities Citation Index
- Social Sciences Citation Index

Date searched: October 11, 2024
Number of citations: 69

(TS = (“cultural safety” OR “culturally safe” OR “culturally unsafe” OR “multicultural safety” OR “multiculturally safe” OR “multiculturally unsafe”)) OR (TS = (“cultural awareness” NEAR/9 safe)) OR (TS = (“cultural awareness” NEAR/9 safety)) OR (TS = (“cultural awareness” NEAR/9 unsafe)) OR (TS = (“cultural awareness” NEAR/9 security))

AND

TS = (“art” OR “arts” OR “artistic” OR “creativ*” OR “sport” OR “sports” OR “recreation*” OR “physical activit*” OR “physical education” OR “traditional NEAR/3 games” OR “aboriginal NEAR/3 games” OR “play” OR “outdoor*” OR “exercise*”)

AND

TS = (intervention* OR impact* OR implement* OR initiative* OR engagement* OR partnership* OR

evaluation* OR trial* OR pilot* OR program* OR strateg* OR activit* OR incentiv* OR campaign* OR promote* OR promotion)

AND

TS = (Australia* OR “New South Wales” OR Victoria OR Tasmania OR Queensland OR “Northern Territory” OR “South Australia” OR “Western Australia” OR “Australian Capital Territory” OR aborigin* OR “First Nation*” OR “First People*” OR “traditional owner*” OR “indigenous” OR “Torres Strait Islander*” OR “New Zealand” OR “aotearoa” OR “maori” OR “canada” OR “canadian” OR “metis” OR “cree” OR “inuit”)

AND

(DT = (“ARTICLE” OR “REVIEW”))

AND

PY = (“2015” OR “2016” OR “2017” OR “2018” OR “2019” OR “2020” OR “2021” OR “2022” OR “2023” OR “2024”))

and Social Sciences Citation Index (SSCI) or Arts & Humanities Citation Index (A&HCI) (Web of Science Index)

Database: Google Scholar

Date searched: October 11, 2024

Number of citations: 100 (first 100 by relevance selected)

“cultural safety” | “culturally safe” | “culturally unsafe”
art | sport | leisure | creative | recreation | games | play | inter-
vention | impact | initiative | evaluation | program | australia |
“new zealand” | canada

Sorted by relevance, 2015–2024

Database: Medline

Date searched: October 11, 2024

Number of citations: 68

#	Query	Results
1	(“cultural safety” or “culturally safe” or “culturally unsafe” or “multicultural safety” or “multiculturally safe” or “multiculturally unsafe”).ti,ab.	1,227
2	((“cultural responsiveness” or “cultural awareness” or “cultural practice*” or “cultural protocol*” or “cultural classroom” or “culturally appropriate” or “culturally aware” or “culturally inappropriate” or “culturally responsive” or “culturally sensitive” or “culturally insensitive” or “cultural inclusion” or “culturally included” or “cultural exclusion” or “culturally excluded” or “cultural identit*” or “anti*racism” or “racism” or “discrimination” or “racialisation” or “minorit*” or “ethnic*” or “equity” or “equal opportunit*” or “shared respect” or “shared meaning” or “shared knowledge” or “shared experience” or “intergenerational”) adj9 (safe or safety or unsafe or security)).ti,ab.	2,524
3	1 or 2	3,617
4	(“art” or “arts” or “artistic” or “creativ*” or “sport” or “sports” or “recreation*” or “physical activit*” or “physical education” or “traditional adj3 games” or “aboriginal adj3 games” or “play” or “outdoor*” or “exercise*”).ti,ab.	1,399,933
5	3 and 4	270

6	(intervention* or impact* or implement* or initiative* or engagement* or partnership* or evaluation* or trial* or pilot* or program* or strateg* or activit* or incentiv* or campaign* or promote* or promotion).ti,ab.	9,505,203
7	5 and 6	209
8	(Australia* or "New South Wales" or Victoria or Tasmania or Queensland or "Northern Territory" or "South Australia" or "Western Australia" or "Australian Capital Territory" or aborigin* or "First Nation*" or "First People*" or "traditional owner*" or "indigenous" or "Torres Strait Islander*" or "New Zealand" or "aotearoa" or "maori" or "canada" or "canadian" or "metis" or "cree" or "inuit").ti,ab.	388,566
9	7 and 8	77
10	limit 9 to yr = "2015 – 2024"	68

Database: Global health

Date searched: October 11, 2024

Number of citations: 39

#	Query	Results
1	("cultural safety" or "culturally safe" or "culturally unsafe" or "multicultural safety" or "multiculturally safe" or "multiculturally unsafe").ti,ab.	435
2	((("cultural responsiveness" or "cultural awareness" or "cultural practice*" or "cultural protocol*" or "cultural classroom" or "culturally appropriate" or "culturally aware" or "culturally inappropriate" or "culturally responsive" or "culturally sensitive" or "culturally insensitive" or "cultural inclusion" or "culturally included" or "cultural exclusion" or "culturally excluded" or "cultural identit*" or "anti*racism" or "racism" or "discrimination" or "racialisation" or "minorit*" or "ethnic*" or "equity" or "equal opportunit*" or "shared respect" or "shared meaning" or "shared knowledge" or "shared experience" or "intergenerational") adj9 (safe or safety or unsafe or security)).ti,ab.	1,072
3	1 or 2	1,457
4	("art" or "arts" or "artistic" or "creativ*" or "sport" or "sports" or "recreation*" or "physical activit*" or "physical education" or "traditional adj3 games" or "aboriginal adj3 games" or "play" or "outdoor*" or "exercise*").ti,ab.	308,286
5	3 and 4	149
6	(intervention* or impact* or implement* or initiative* or engagement* or partnership* or evaluation* or trial* or pilot* or program* or strateg* or activit* or incentiv* or campaign* or promote* or promotion).ti,ab.	2,100,442
7	5 and 6	118
8	(Australia* or "New South Wales" or Victoria or Tasmania or Queensland or "Northern Territory" or "South Australia" or "Western Australia" or "Australian Capital Territory" or aborigin* or "First Nation*" or "First People*" or "traditional owner*" or "indigenous" or "Torres Strait Islander*" or "New Zealand" or "aotearoa" or "maori" or "canada" or "canadian" or "metis" or "cree" or "inuit").ti,ab.	156,308
9	7 and 8	45
10	limit 9 to yr = "2015 – 2024"	39

Database: Embase

Date searched: October 11, 2024

Number of citations: 101

#	Query	Results
1	("cultural safety" or "culturally safe" or "culturally unsafe" or "multicultural safety" or "multiculturally safe" or "multiculturally unsafe").ti,ab.	1,713
2	((("cultural responsiveness" or "cultural awareness" or "cultural practice*" or "cultural protocol*" or "cultural classroom" or "culturally appropriate" or "culturally aware" or "culturally inappropriate" or "culturally responsive" or "culturally sensitive" or "culturally insensitive" or "cultural inclusion" or "culturally included" or "cultural exclusion" or "culturally excluded" or "cultural identit*" or "anti-racism" or "racism" or "discrimination" or "racialisation" or "minorit*" or "ethnic*" or "equity" or "equal opportunit*" or "shared respect" or "shared meaning" or "shared knowledge" or "shared experience" or "intergenerational") adj9 (safe or safety or unsafe or security)).ti,ab.	4,016
3	1 or 2	5,547
4	("art" or "arts" or "artistic" or "creativ*" or "sport" or "sports" or "recreation*" or "physical activit*" or "physical education" or "traditional adj3 games" or "aboriginal adj3 games" or "play" or "outdoor*" or "exercise*").ti,ab.	2,203,421
5	3 and 4	406
6	(intervention* or impact* or implement* or initiative* or engagement* or partnership* or evaluation* or trial* or pilot* or program* or strateg* or activit* or incentiv* or campaign* or promote* or promotion).ti,ab.	15,064,004
7	5 and 6	316
8	(Australia* or "New South Wales" or Victoria or Tasmania or Queensland or "Northern Territory" or "South Australia" or "Western Australia" or "Australian Capital Territory" or aborigin* or "First Nation*" or "First People*" or "traditional owner*" or "indigenous" or "Torres Strait Islander*" or "New Zealand" or "aotearoa" or "maori" or "canada" or "canadian" or "metis" or "cree" or "inuit").ti,ab.	613,083
9	7 and 8	115
10	limit 9 to yr = "2015 – 2024"	102
11	limit 10 to english language	101

Database: Emcare

Date searched: October 11, 2024

Number of citations: 64

#	Query	Results
1	("cultural safety" or "culturally safe" or "culturally unsafe" or "multicultural safety" or "multiculturally safe" or "multiculturally unsafe").ti,ab.	1,225
2	((("cultural responsiveness" or "cultural awareness" or "cultural practice*" or "cultural protocol*" or "cultural classroom" or "culturally appropriate" or "culturally aware" or "culturally inappropriate" or "culturally responsive" or "culturally sensitive" or "culturally insensitive" or "cultural inclusion" or "culturally included" or "cultural exclusion" or "culturally excluded" or "cultural identit*" or "anti-racism" or "racism" or "discrimination" or "racialisation" or "minorit*" or "ethnic*" or "equity" or "equal opportunit*" or "shared respect" or "shared meaning" or "shared knowledge" or "shared experience" or "intergenerational") adj9 (safe or safety or unsafe or security)).ti,ab.	1,977
3	1 or 2	3,054
4	("art" or "arts" or "artistic" or "creativ*" or "sport" or "sports" or "recreation*" or "physical activit*" or "physical education" or "traditional adj3 games" or "aboriginal adj3 games" or "play" or "outdoor*" or "exercise*").ti,ab.	598,240
5	3 and 4	249

6	(intervention* or impact* or implement* or initiative* or engagement* or partnership* or evaluation* or trial* or pilot* or program* or strateg* or activit* or incentiv* or campaign* or promote* or promotion).ti,ab.	3,513,733
7	5 and 6	194
8	(Australia* or "New South Wales" or Victoria or Tasmania or Queensland or "Northern Territory" or "South Australia" or "Western Australia" or "Australian Capital Territory" or aborigin* or "First Nation*" or "First People*" or "traditional owner*" or "indigenous" or "Torres Strait Islander*" or "New Zealand" or "aotearoa" or "maori" or "canada" or "canadian" or "metis" or "cree" or "inuit").ti,ab.	222,019
9	7 and 8	73
10	limit 9 to yr = "2015 – 2024"	66
11	limit 10 to english language	64

Appendix 2: Results of study selection (PRISMA)

(Figure A1)

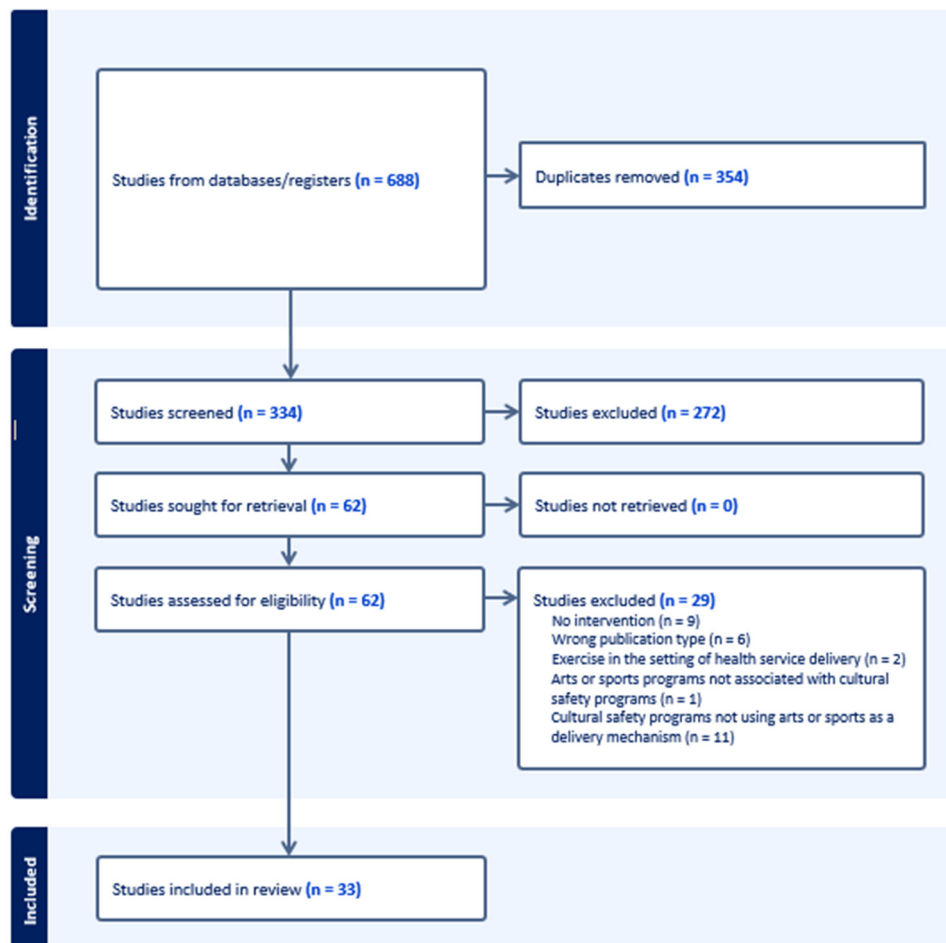


Figure A1. PRISMA flowchart for the study selection process.

Source: Authors' contribution

Appendix 3: Definitions of cultural safety across included studies

Citation	Cultural safety definition <i>Other related terms/concepts where relevant (italics)</i>
Austin and Vadiveloo (2023)	<i>“Cultural safety is understood as an empowering and transformative process for interrogating the architecture of systems that have been structured by white supremacist, cis-hetero, patriarchal and ableist paradigms” (p. 48)</i> <i>“Cultural safety is therefore, in part, a strategy to dismantle existing structures and support the provision of environments that are spiritually, socially and emotionally, as well as physically, safe for people, ‘where there is no assault or challenge or denial of their identity, of who they are or what they need’ (Williams 1999)” (p. 49)</i>
Balla et al. (2022)	<i>“[A]n environment that is safe for people: where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience of learning, living and working together with dignity and truly listening (Williams, 1999)” (p. 353)</i>
Brooks-Cleator and Giles (2016)	<i>“Cultural relevancy and cultural appropriateness are a part of cultural safety; however, cultural safety goes beyond cultural relevancy and other concepts in that it 1) transfers the power to define the quality of the program to the participant and 2) focuses on how the program leader needs to reflect on his/her own culture and position of power (Brascoupé & Waters 2009).” (p. 454)</i> <i>“In culturally relevant and culturally appropriate approaches, the onus is on the provider to meet the participants’ cultural needs. In their discussion on how to provide culturally appropriate – and we suggest culturally relevant as well – programs and materials, Kreuter et al. (2003) emphasized that Bhealth [promoters/providers/educators] must be able to identify and describe cultures and/or subcultures within a given population, understand how each relates to health behavior, and apply this knowledge in planning and development activities” (p. 134).”(p. 454)</i>
Frazer and Giles (2023)	<i>“Cultural safety is a term that challenges other approaches – cultural sensitivity, cultural relevancy, and cultural competency – to understanding culture in Indigenous communities by “focusing less on sensitivity and awareness and more on safety and the risk of failing to provide a safe environment” (Giles & Darroch 2014).” (p. 4)</i>
Gagliardi et al. (2022)	<i>“Cultural safety has been defined as effective care of a person from another culture as determined by that person, where culture includes but is not limited to: age or generation, gender, sexual orientation, occupation, socioeconomic status, ethnic origin, migrant experience, religious/spiritual beliefs or disability (Curtis et al., 2019; Mackean et al., 2020).” (p. 2)</i>
Gidgup et al. (2024)	<i>“Culturally appropriate programs are about building strong relationships at places that Elders feel comfortable to attend, with like minded fellow countrymen and women who are seeking the same social and emotional connections” (p. 448)</i>
Lenette et al. (2022)	<i>“Cultural safety means that ‘there is no assault on a person’s identity’ (Williams, 1999).” (p. 3)</i> <i>In a research context, “cultural safety aligns with research seeking to redress power imbalances and achieve social justice outcomes (Browne et al., 2009).” (p. 3)</i>
Lines et al. (2021)	<i>“Strength-based approaches are premised on applicable ideas that have worked well or are currently working for a community (Tsey et al., 2007). Utilizing a strength-based approach supports community decision-making power in research (Smith 2012),</i>

	<i>empowerment of participants and partners, and social change (Anderson et al., 2011)."</i> (p. 505)
Marchetti and Nicholson 2020	<i>"When it comes to Aboriginal and Torres Strait Islander prisoners, however, programmes also need to be culturally safe, meaning the development and delivery of programmes by relevant Aboriginal and Torres Strait Islander organisations and local communities with a focus on connection to culture and collective experiences (Australian Law Reform Commission 2017; Cunneen & Tauri 2016)."</i> (p. 424)
Marchetti et al. (2022)	Based around the concept that culturally safe prison interventions should "employ 'culturally sensitive practices', 'an awareness of cultural protocols' and be 'delivered or supported by Indigenous facilitators'" [Perdacher et al., 2019]." (p. 156) "A culturally safe framework—defined by Mackean et al. [2020] as consisting of reflexivity, dialogue, a reduction of power differentials, decolonising practices and 'regardful care'" (p. 159)
Miller and Walke (2024)	<i>"Cultural safety can be defined as requiring health professionals and their associated healthcare organisations to engage in ongoing self-reflection to reduce bias and achieve equity, as defined by the patients and their communities (Curtis et al. 2019)"</i> (p. 7)
Ollier et al., (2020)	<i>"Cultural safety means that when cultural differences exist between a healthcare service provider and the client, the client determines if the services are respectful and inclusive of their culture (Gerlach, 2007)."</i> (p. 312) <i>"Cultural safety is defined by Williams (1999) as a spiritually, socially, and emotionally safe environment in which there is no assault, challenge, or denial of someone's identity and needs."</i> (p. 313) <i>"Gerlach (2007:2) explained: 'in cultural safety terms 'culture' is defined in its broadest sense and 'safety' is defined in relation to the responsibility of health professionals to protect their clients from anything which may risk or endanger their health and well-being.'" (p. 313)</i> <i>"Cultural safety "moves beyond the concept of cultural sensitivity to analyzing power imbalances, institutional discrimination, colonization and colonial relationships as they apply to healthcare" [Baba 2013]"</i> (p. 313) <i>"Bin-Sallik (2003:27) argued that cultural safety is a crucial concept that must be emphasized when addressing issues like designated Indigenous spaces and culturally appropriate curricula and behaviours because "it does not imply special treatment like the terms 'positive discrimination,' 'equal opportunity,' and 'culturally appropriate.'" When applied to evaluation research, cultural safety promotes the consideration of the historical, economic, and social contexts that affect an individual's experience."</i> (p. 313)
Pour et al. (2023)	<i>"To be culturally safe and responsive is to demonstrate an understanding of how the history of trauma experienced by First Nations people has led to social, emotional and financial disadvantage. (Tujague & Ryan 2021)"</i> (p. 412)
Rich and Giles (2015)	<i>"A culturally safe approach does not simply involve being knowledgeable about other cultures; instead, it is "a journey of self awareness" (Brascoupé & Waters, 2009) where providers must acknowledge and reflect upon the "power inherent in their professional position" and the onus is on recipients to determine whether the approach is effective."</i> (p. 309)
Rich and Breunig (2022)	<i>"A culturally safe approach is concerned with understanding the experiences of different people, particularly as a result of dominant practices within a specific (e.g., leisure, health, etc.) context (Smye & Browne, 2002)."</i> (p. 369)

	<i>“Cultural sensitivity involves the ability of an individual to identify and understand sociocultural differences and ethical issues, in order to contextualize experiences of others (Ryba & Schinke, 2009; Schinke et al., 2012).” (p. 373)</i> <i>“Cultural competence, on the other hand, incorporates the skills and knowledge to build relationships and work with peoples of diverse cultural backgrounds (Blair & Coyle, 2005; Stone, 2003), particularly in the context of service provision.” (p. 373)</i> <i>“Cultural humility expands upon this further, emphasizing that no individual can fully understand another’s worldview and therefore people must adopt a respectful, other-oriented engagement in relation to another person’s cultural background and experiences (Hook & Davis, 2019).” (p. 373)</i>
Rieger et al. (2021)	<i>“A cultural safety lens acknowledges that the current health care inequities among Indigenous peoples are rooted in a colonial history and shaped by power imbalances (Browne et al., 2009; Horrill et al., 2018). This perspective calls settlers to enact cultural humility to foster transformed environments where people feel safe receiving care and sharing their stories (Browne et al., 2009; First Nations Health Authority 2020; Horrill et al., 2018).” (p. 2164)</i> <i>“Cultural humility is “a process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust” and “involves humbly acknowledging oneself as a learner when it comes to understanding another’s experience” (First Nations Health Authority 2020).” (p. 2164)</i>
Robbins et al. (2017)	<i>“Cultural safety was originally a concept developed in New Zealand within the context of the nursing profession and it continues to be applied within Maori healthcare (Wepa, 2005). It asserts that to provide quality care for people from different ethnicities, nurses must provide care within a context of cultural values and norms of the patient.” (p. 162)</i>
Wilson et al. (2018)	<i>“There is a need to ensure that venues are culturally safe places which are informed and respectful of their local Indigenous peoples, history and culture, knowledgeable of and implementing cultural protocol, and that they create an environment of trust and welcome.” (p. 75)</i>
