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Protocol

Health of women students in Indian higher education institutions: protocol for a scoping review of emerging issues, gaps and future research guidelines

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ABSTRACT

Background: Globally, women students in higher educational institutions (HEIs) face disproportionate health problems compared to men. Indian women, whose participation in HEIs has increased remarkably in recent years, endure major health burdens, stressors and challenges during this period. However, existing literature on their health is inadequate. This scoping review aims to systematically map and analyse the existing literature on the issues of women's health in Indian HEIs by, comprehensively focusing on physical, mental, social and sexual health, and identifying associated individual, interpersonal and environmental factors.
Methods: The research strategy will be informed by Joanna Briggs Institute methodology with the population, concept, and context (PCC) framework and reported using guidelines of PRISMA-ScR (Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews). After primary search on PubMed, SCOPUS, EMBASE, Web of Science and Google Scholar, study selection will be done by abstracts and full-text screening by two independent reviewers using Rayyan, and quality assessment by the mixed methods appraisal tool 2018 version, followed by data extraction using a standardised form, assessment and analysis. Main findings will be presented in tables and figures using descriptive statistics.
Conclusions: The scoping review will provide valuable insights on the health needs of women in HEIs in India, underscoring the emerging themes, identifying areas for future research and evidence-informed policy expansion for developing support systems to address diverse health needs of this population, thus expected to make a meaningful contribution to health of women in Indian higher education.

Keywords: Women students' health, Higher educational institutions, Scoping review protocol, University student, India

INTRODUCTION

Higher educational institutions (HEIs), which refers mainly to colleges and universities, host large numbers of students who are 'late adolescents' or 'emerging adults' and have little parental oversight over their actions.[1] Any adversity in this phase of life may initiate serious health issues leading to chronic morbidity and mortality risks in later life.[2] Almost 30-60% of chronic diseases in adulthood are reported to be caused by problematic health behaviours initiated during adolescence.[3] Globally, students of HEIs reportedly endure unique developmental, environmental, and behavioural risks as compared to those faced by the general population, and

these risks are reported to be so interrelated that it requires the promotion of a comprehensive approach to well-being for the entire campus community.[4,5] Consequently, in addition to being academic institutions, the HEIs are settings that offer significant opportunities for promoting students' health and wellbeing to maximise academic outcomes, career opportunities, and for combatting future health risks of the citizenry.

As per the World Health Organisation (WHO) definition, health is not just the absence of disease or illness but complete physical, mental, and social wellbeing.[6] WHO has also stressed upon the need to recognise the importance of sexual health and this is very important in the contexts of emerging adults. This can refer to knowledge about consent, sexual violence, abuse and sexually transmitted infections.[7-10] Hence, sexual health, along with mental, physical and social health & well-being, comprises an important area of focus for this age group.

The number of HEIs in India has increased rapidly in recent years and women's enrolment in HEIs has increased at a rate that is almost twice as that of males in recent years.[11,12] The All-India Survey on Higher Education (AISHE), conducted by Government of India showed that the total women student enrolment in higher education in the country reached nearly 20.1 million in 2021-22. These women endure diverse gender-specific health challenges, which often go unaddressed due to systemic and societal barriers and social stigma. Cultural expectations often emphasize traditional gender roles; hence female students face additional social and familial obligations in addition to academic pressure.

Thus, during their study period in HEIs Indian women have been reported to be struggling with academic pressure, difficulties in balancing academic workloads with managing various familial expectations, face economic barriers-especially in lower-income households, while migrating women students have reported experiencing high levels of social isolation and loneliness.[12-15] Furthermore, they experience a high risk of sexual harassment, have inadequate access to hygienic facilities or even, privacy during menstruation, suffer from malnutrition.[10,13,15-17]

Since the health issues faced by women students are specific, women students in HEIs necessitate a focused examination rather than a gender-neutral student health approach. Notably, current literature on the specific health issues and concerns of women in HEIs from India are fragmented. Most studies are concentrated on a particular region of the country or a specific issue or single health outcome like mental health or emphasised a particular community and are often focused mostly on medical students. This underscores the need for national-level studies with comprehensive synthesis of evidence base of women students' health in HEIs of all sorts, as a composite of physical, mental, social and sexual dimensions. Given the heterogeneous nature of the existing literature, which spans diverse study designs, populations and outcome measures, a scoping review, rather than a systematic review, is the most suitable approach for addressing this gap, as it allows for a broad mapping of the extent and nature of available evidence.[18] Therefore, the present scoping review is planned to comprehensively generate and synthesise good quality data by systematically mapping the existing literature on women students' health in HEIs across India with a view to chart the available evidences to underscore the research trends, to detect the knowledge gaps and limitations in the existing literature methodically and to perceive the most prevalent health issues on physical, mental, social and sexual health faced by women students of HEIs in India. This, in turn, will inform future research and help policy makers to design comprehensive, data driven and gender-sensitive interventions and support services.

Objectives

The proposed scoping review will have the following objectives: to map and summarize the available research evidence on women's health issues in HEIs in India, specifically focusing on their physical, mental, social and sexual health; to identify the individual, interpersonal and environmental factors (e.g., stress, social barriers, institutional resources) associated with the health of women studying in HEIs in India.

METHODS

As per our objectives, this study will identify the extent, range, gaps and nature of research on women students' health in HEIs in India. This study was planned as no scoping reviews were found by searching online databases and protocol registration websites like Open Science Framework (OSF) for the presence of any scoping review on the state of health of women in universities/colleges in India.

The proposed scoping review (registered on OSF https://doi.org/10.17605/OSF.IO/CS8XF) will be undertaken following the five-stages of the Arksey and O'Malley framework, and the recommendations in the Joanna Briggs Institute Reviewers' Manual.[19]

The population, concept, and context (PCC) strategy, proposed by the JBI Manual for Evidence Synthesis have been followed to form the research questions, search strategy and eligibility criteria.[19]

Quality assessment of studies will be done using The Mixed Methods Appraisal Tool (MMAT), Version-2018.[20] Reporting will follow the Preferred Reporting Items for Systematic Review and Meta-analysis Extension for Scoping Reviews (PRISMA-ScR).[21] The PRISMA-ScR checklist is given in S1 File.

Identifying the research questions

The following research questions have been informed by the objectives of this scoping review:

What are the research evidences relating to women's health in Indian HEIs, specifically their physical, mental, social and sexual health issues?

What individual, interpersonal, and environmental factors (e.g., stress, social barriers, institutional resources) are associated with the health of women enrolled in HEIs in India?

Identifying relevant studies

A comprehensive literature search using specific keywords, inclusion and exclusion criteria will be conducted on the databases: PubMed, SCOPUS, EMBASE, Web of Science and Google Scholar for identifying the relevant publications from 2015 onwards with a view to focus on recent literature.

The search strategy will comprise four concept blocks combined using the AND Boolean operator: women/female students, university/higher education setting, India, and health-related terms. Within each concept block, related keywords and MeSH terms are connected using the OR Boolean operator. A draft version of the search strategy for PubMed is detailed in Table 1. This will be adapted for use in other identified databases. Final search strategies for each selected database will be given as supplementary material with the finished review. All the grey literature, Govt. reports, short communication, and editorial letters that do not have empirical data, will be excluded from the proposed review. In addition to database searches, the reference lists of the included publications will also be searched to identify additional relevant articles.

Table 1: Search strategy to be used for PubMed online database.

Search #	Search terms
#1	("Women"[MeSH Terms] OR "Female"[MeSH Terms] OR "Women"[Title/Abstract] OR "Female"[Title/Abstract] OR "girl*"[Title/Abstract]) AND ("Students"[MeSH Terms] OR "students, health occupations"[MeSH Terms] OR "student*"[Title/Abstract] OR "undergraduate*"[Title/Abstract] OR "higher education"[Title/Abstract] OR "college student*"[Title/Abstract] OR "university student*"[Title/Abstract])
#2	"Education"[MeSH Terms] OR "education, graduate"[MeSH Terms] OR "Universities"[MeSH Terms] OR "univers*"[Title/Abstract] OR "college*"[Title/Abstract] OR "higher education"[Title/Abstract] OR "postgraduate"[Title/Abstract] OR "graduate student*"[Title/Abstract]
#3	"India"[MeSH Terms] OR "India"[Title/Abstract]
#4	"Women's Health"[MeSH Terms] OR "Health Status"[MeSH Terms] OR "Mental Health"[MeSH Terms] OR "Reproductive Health Services"[MeSH Terms] OR "health*"[Title/Abstract] OR "Mental Health"[Title/Abstract] OR "stress"[Title/Abstract] OR "depression"[Title/Abstract] OR "anxiety"[Title/Abstract] OR "nutrition"[Title/Abstract] OR "menstrual"[Title/Abstract] OR "sexual health"[Title/Abstract] OR "harassment"[Title/Abstract] OR "violence"[Title/Abstract] OR "discrimination"[Title/Abstract] OR "loneliness"[Title/Abstract] OR "social isolation"[Title/Abstract]
#5	#1 AND #2 AND #3 AND #4

Eligibility criteria

The inclusion and exclusion criteria of the planned scoping review will be based on the PCC strategy.

Inclusion criteria

Population

The review will only include studies which were undertaken among Indian women students in HEIs-between the age group of 18-25 years. Only studies on women students enrolled in campus-based, in-person undergraduate or postgraduate programmes will be included. Studies that include both men and women students, will be considered only if they include distinct data on women's health. For such mixed-sex studies, only the sex-disaggregated data pertaining to women will be extracted for charting and synthesis.

Concept

Studies which focus on the health issues of women in HEIs in India, specifically their physical, mental, social and sexual health issues, will be included. Studies focusing on individual, interpersonal, and environmental factors associated with the health of women students of HEIs in India will be included.

Context

Only studies based on women of HEIs in India will be included. Only studies published in English language will be selected. Studies published from 2015 onward will be included to focus on the recent literature.

Exclusion criteria

Studies which focus exclusively on men students in HEIs. Studies conducted outside India; Papers with no original empirical data like commentaries, editorials etc. Secondary sources like meta-analysis and systematic reviews and grey literature like conference presentations. Data from any non-conventional educational settings such as vocational schools or fully online/distance-education programmes will be excluded.

Identification and screening of the studies

Selection of articles appropriate for the proposed scoping review will be done following keywords search and the inclusion and exclusion criteria stated above. Initially pilot study will be done to confirm clarity of the eligibility criteria. Two reviewers will independently screen subsets of 10 citations and any disagreement among them will be resolved by mutual discussion. This pilot screening of 10 citations will continue till full agreement between the reviewers is achieved. After that the study selection will start and the selected articles will be imported into EndNote for duplicate removal, followed by cross checking done by both the reviewers.[22] Following this, the citations will be imported into Rayyan, a web-based collaborative software that assist in knowledge synthesis, to remove any remaining duplicates.[23] Articles selected will be subjected to title and abstract screening by the authors independently to identify articles relevant to the research questions based on the eligibility criteria. Next, a more detailed examination of the full text of the selected studies will be undertaken before inclusion in the scoping review. The study selection process will follow the PRISMA-ScR guidelines, as has been presented in the PRISMA-ScR flow diagram (Figure 1).

Charting the data

The relevant data from the literature will be extracted using a structured charting form aimed at capturing the key information from the selected studies. Extracted data will be summarized in Table 2, which will include the title of the article, author's information, name of the journal, year of the study, regions, age group, sample size, sampling methods, study design, method of data collection, and specific information on the state of health of women in HEIs in India, specifically focusing on their physical, mental, social and sexual health issues and the factors influencing women's health and well-being. The investigators will independently perform data extraction and resolve discrepancies through discussion to ensure accuracy and consistency.

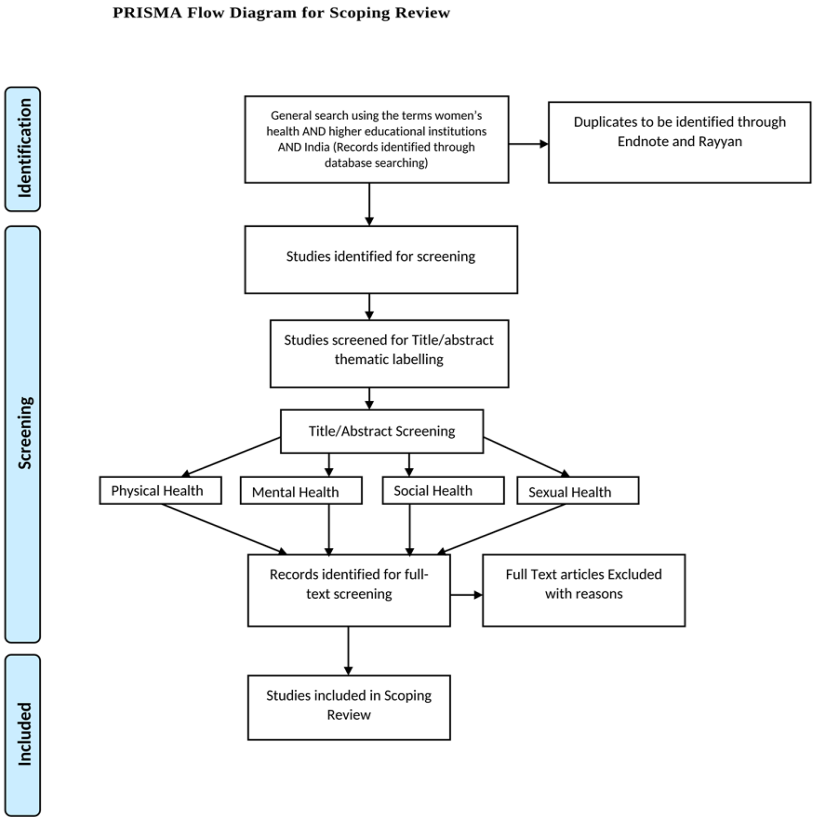


Figure 1: PRISMA- ScR flow diagram for study selection process.

Table 2: Data charting form.

Author, name of the journal, publication year
Study title
Regions, (in which part of India was the study conducted)
Aim of study
Age group (years)
Sample size
Sampling methods
Study design
Method of data collection
Most relevant findings on the state of health of women in HEIs in India focusing on their
1. Mental, health issues
2. Physical health issues
3. Social health issues
4. Sexual health issues
5. The factors influencing women's health and well-being health

Collating, summarizing and reporting the results

The extracted data will be summarized and presented in tabular form to present an overview of the health status of women in HEIs in India. The findings from the included studies will be analysed using descriptive statistics (e.g., frequencies and percentages). All the evidence will be organized, summarized, and reported for manuscript preparation with a focus on the overall objectives of the study.

The results reported in the included studies will also be analysed to identify gaps in the existing research. During the data extraction process, any patterns or associations that emerge for example, if anxiety is more frequently reported by women of a particular community or if students from rural or urban background differ in utilization of university resources will be identified and reported.

Dissemination plan

The research findings from this scoping review will be important for policy design and implementation. Hence, the study outcomes, methodological approaches and research gaps will be communicated to university bodies, University Grants Commission (UGC), student groups, health departments, and other relevant groups for discussions by presentations at conferences and seminars. Publication in peer-reviewed journals and also to popular media to ensure wide stakeholder reach and engagement.

DISCUSSION

This protocol outlines the comprehensive methodology for conducting a structured scoping review, following the Arksey and O'Malley framework, on women students' health in Indian HEIs.[19] Majority of the existing literature on this subject has often focused narrowly on a single health outcome like mental health, physical health, menstrual health or a specific institution or community such as medical colleges, the ensuing scoping review will adopt a broader, more integrative approach to women students' health.[24-31] To our knowledge, the resulting review will be the first to comprehensively synthesise evidence across the physical, mental, social and sexual health domains for this population at a national level. By also mapping the individual, interpersonal and environmental factors associated with these health outcomes, the review aims to provide a nuanced, multi-dimensional understanding of the health landscape facing women in Indian HEIs than that currently exists.

Accuracy by use of the JBI methodology for scoping reviews and the PRISMA-ScR checklist to enhance transparency and reporting quality is a key strength of the proposed review.[32,33] Although the limitations of not using the grey literature, unpublished studies and conference abstracts etc are important, but this has been done as there is concern that these sources are not peer-reviewed and may contain preliminary results that might vary from the final published results.[34] But due to this exclusion, some pertinent studies could possibly be excluded, leading to an incomplete representation of literature and might result in loss of emerging ideas that are not yet included in peer-reviewed journals. However, this omission is to ensure that the review focuses on high-quality, peer-reviewed evidences.

Majority of research studies in India are published in English; hence the proposed review is restricted to studies published in English.[35] Therefore, relevant evidence published in regional Indian languages will be excluded. This introduces a potential language bias that may underrepresent locally-specific health issues or region-specific findings not published in English-language journals. In addition to overview of important concepts, this review will also help to systematically highlight the emerging themes, the areas where research has succeeded, and more importantly, what research gaps and limitations exist including conceptual and methodological gaps, under-researched populations, geographic areas and limitations in study design, like the lack of longitudinal studies.

Thereby the planned review will provide valuable insights into future research priorities in this field with a view to address these gaps and build upon the extant knowledge to warrant more comprehensive evidences in this field. Furthermore, findings from this review will be particularly relevant for intersectoral collaboration between the health and educational domains. Moreover, this study will also contribute to UGC-mandated health and wellness initiatives, and the student support components of National Education Policy-NEP 2020. Recently, the draft for the 'Uniform Policy on Mental Health and Well-being in HEIs' has been circulated by

the UGC and scoping reviews like this will be highly beneficial in contributing to the development of a gender-specific approach to students' health and well-being.[36]

Limitations

This review has the following limitations: only data from recent studies- from 2015 onwards will be included, hence only recent data will be considered. The review will be limited to studies published in English. Non-inclusion of relevant evidence published in regional Indian languages might reduce locally-specific or region-specific findings not published in English-language. Any studies which are not in the public domain and grey literature will also be excluded.

CONCLUSION

In conclusion, this protocol presents methodologically sound, evidence-based approach to understanding comprehensively the health status of women in Indian HEIs. The resultant scoping review, by mapping the spectrum of available evidences, will provide a wholistic insight on the challenges of health status of women in HEIs of India at the systemic, institutional, and individual level. Thus, this will be extremely important in categorizing challenges of women's health status in HEIs of India and identifying the gaps where future research is still needed. Additionally, this will inform priority areas for institutional capacity building, and influence institutional practices, and thereby aim to improve the health status of women in HEIs of India. Thus, this scoping review will make a meaningful contribution to the field of higher education in India.

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