

BMJ Open Process of youth engagement in school health promotion: a scoping review protocol

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ABSTRACT

Introduction School environments are an essential setting to shape and influence the health and well-being of students. Health promoting school (HPS) is a whole-school approach that strengthens and builds a safe and healthy school environment for students to learn and develop. A core component of HPS is the meaningful participation of youth. Despite promising outcomes arising from youth engagement in school health promotion, there is less known on the process of how students are involved in school health promotion and in what form. This scoping review will explore and map the different components of the student engagement process in school health promotion with specific focus on whole-school approaches like HPS.

Methods and analysis We will follow scoping review guidelines employed by the Joanna Briggs Institute and Arksey and O'Malley's framework. We will use the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for scoping reviews to guide reporting. We will follow the PCC mnemonic (participant, concept and context) to develop eligibility criteria. Both published and unpublished literature will be included. Databases to be searched include: CINAHL, ERIC, MEDLINE, Scopus, ProQuest Dissertations & Theses Global databases and Google Scholar. Relevant organisational websites and sources identified by experts will also be reviewed. Two reviewers will screen the title, abstract and full text of the sourced articles. Data from included articles will be charted using a data charting tool. The socioecological model and Hart's Ladder of Participation will be used to guide charting. Descriptive analysis will be conducted for quantitative data, and thematic analysis will be employed for qualitative data. Data will be displayed through tables and narrative descriptions.

Ethics and dissemination No ethical approval is required for this study. To disseminate our work, we plan to develop an open-access publication, accompanied by a conference presentation and other knowledge translation products.

INTRODUCTION

School environments have long been identified as an essential setting that can influence students health and well-being.^{1–3} Since 1986, when the Ottawa Charter for Health Promotion described that the settings where people live, work and learn significantly impact their health, schools have been viewed as a place where students can develop, form and adopt health behaviours.⁴ Health promoting school

STRENGTHS AND LIMITATIONS OF THIS STUDY

- ⇒ Established methodology guidelines using the Joanna Briggs Institute methodology for scoping reviews, Arksey and O'Malley five-stage methodological framework for conducting scoping reviews and the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for scoping reviews will be followed to guide the search and reporting of the review.
- ⇒ The search strategy will be reviewed by a medical librarian to help with comprehension, and two independent reviewers will review and chart the data to minimise bias.
- ⇒ Despite a comprehensive plan, the search will be limited to the databases included, and English as full-text articles.
- ⇒ Although various search terms and adaptation of syntax for databases will be conducted, there are various terms used to describe school health promotion and health promoting school across disciplines; therefore, there is a chance some publications may not be identified.
- ⇒ While we will place focus on identifying unpublished/grey literature for the review, there is risk we may not capture all reports, and dissertations aligned with the topic.

(HPS), also referred to as Comprehensive School Health, is a globally recognised whole-school approach that aims to strengthen and build a safe and healthy school setting for teaching and learning.⁵ Aligning with the United Nations Convention on the Rights of the Child in 1989,⁶ a crucial component of a HPS approach is ensuring the engagement of youth is at the forefront of school health decision-making.⁷ Youth participation in schools can be considered a partnership or collaboration between students and diverse adult stakeholders.⁸ In the context of an HPS approach, youth engagement is viewed in reference to supportive school health environments including participation in developing inclusive structures, positive relationships, opportunities for physical activity and healthy food options, and



improving skills and competencies related to health and well-being.⁹ Hart's Ladder of Participation¹⁰ first outlined youth engagement on a spectrum representing degrees of engagement from nonparticipation (ie, manipulation, decoration and tokenism) and extending through five degrees of involvement (ie, shared decision-making). Many adaptation of this spectrum have been developed overtime, including Simovaska's definition of 'genuine' and 'tokenistic' student participation in the context of HPS.¹¹ Simovaska's definition places emphasis on the form of participation in school health promotion, with genuine participation focusing more on engaging youth in the process of knowing, meaningful learning and own reflection in relation to the social and environmental context of health, while tokenistic participation refers to a more traditional, individualised focus on behaviour modification.¹¹

A recent systematic review outlined positive effects of student participation in school health promotion including an increase in motivation, satisfaction, personal development, health-related effects and an influence on students perspectives related to health promotion.⁸ Consistent findings were found in Beck and Reilly's scoping review on secondary students involvement in school health promotion, which further acknowledged the importance of a HPS approach.¹² This review outlined four main themes of programmes that support student engagement including providing a sense of belonging, encouraging meaningful involvement, giving a voice to student concerns and advancing supportive and dynamic relationships.¹² Further, benefits of youth engagement have been observed for adult supporters and at the system level. Adult supporters report improvements in their understanding of youth and the quality of their relationships with young people,^{8 13} while organisations and institutions are shown to be more responsive to youth needs through more relevant policies, programmes and initiatives.⁸ Despite promising outcomes of youth engagement in school health promotion, there is limited understanding of the process of how youth are involved in school health promotion and in what form.^{12 14 15} This is of specific interest for a HPS approach where youth engagement is considered a key implementer for success.^{7 16}

To provide clarity around the concept and process of youth engagement, The Centre of Excellence for Youth Engagement (CEYE) developed a youth engagement framework.¹⁷ Areas of focus include: (1) Initiators and barriers to youth engagement, (2) Form of the youth engagement activity, (3) Sustainers and hinderances to youth engagement and (4) Positive outcomes. Some research on these areas of process have been explored within school health promotion in different contexts including the United States,¹⁸ Japan¹⁹ and Europe.^{9 20 21} Of note, is an approach entitled Young Minds, supported and embedded in the European Network of Health Promoting Schools, that focused on the genuine involvement of youth in projects related to the health and the environment.²⁰ This project was foundational in

exploring the participation of youth in HPS initiatives by providing practical examples of the form of engagement, as well as distinguishing between genuine vs tokenistic participation.^{21 22} The importance of establishing consistency between the theoretical components of youth engagement and practical implementation is reiterated by a scoping review by Larsson *et al* on youth participation on interventions related to health and well-being.¹⁴ Research by Tomokawa *et al*¹⁹ examined the factors that enable participation of youth in school health promotion initiatives in Japan, including a national obligation for participatory activities, clear processes at the municipal level, supportive systems for teachers to provide youth participation activities and a shared understanding of the pedagogical importance of youth participation in school health. Beck and Reilly's¹² scoping review also touched on the enablers to engagement including a long-term vision, youth ownership of a project, opportunity to express their voice and supportive relationships.

As outlined, there are various elements that contribute to the process of youth engagement, yet to our knowledge there has not been a thorough review conducted that has mapped and characterised the available evidence to date. A scoping review is ideal for the purpose of this work as the main aim of this form of review is to explore the breadth of the literature on a specific topic of inquiry, synthesise and map the evidence and inform future research on the topic.²³ Therefore, this scoping review will comprehensively synthesise the evidence on the process of youth engagement in school health promotion, with a focus on whole-school health promotion models such as HPS. This knowledge, understanding and contribution to the evidence base will inform the development and implementation of youth engagement strategies in school health promotion.

A preliminary search of CINAHL, ERIC, Scopus and the JBI Evidence Synthesis was conducted and no current or in-progress scoping reviews on the topic were identified. Though the recent review by Beck and Rielly¹² in 2017 did outline factors that promote student engagement, they did not comprehensively focus on the process of youth engagement, therefore, there was a dearth of information related to the barriers, or form of the engagement activities being conducted. This also may be due to their eligibility criteria including programmes that were determined as meaningful engagement, and excluding lower levels of engagement activities (ie, tokenism). This review also had a time limitation of 2000–2013, and only included secondary students. Our scoping review aims to have a broader inclusion criterion to capture various components of the youth engagement process in school health promotion.

METHODS AND ANALYSIS

The proposed scoping review will be conducted in accordance with the Joanna Briggs Institute (JBI) methodology for scoping reviews,²⁴ as well as the Arskey and O'Malley five-stage methodological framework for conducting

scoping reviews.²⁵ We will use the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews (PRISMA-ScR) to guide the reporting of our scoping review.²⁶

Stage 1: identifying the research question

We aim to conduct a scoping review to map the available evidence related to the process of engaging youth in school health promotion, with specific focus on whole-school health promotion approaches by exploring the following review question:

- I. What is known from the existing literature about the process of engaging youth in school health promotion with specific focus on whole-school health promotion approaches? Additional subquestions include:
 - I. What are the facilitators and/or barriers to engagement of youth in school health promotion with specific focus on whole-school health promotion approaches?
 - II. What are the activities for engagement of youth in school health promotion with specific focus on whole-school health promotion approaches?
 - III. What are the forms of youth engagement activities in school health promotion with specific focus on whole-school health promotion approaches?

Stage 2: identifying relevant studies

We will follow the population/PCC mnemonic suggested by JBI to develop our inclusion and exclusion criteria for the scoping review. For the purposes of this research, [table 1](#) outlines working definitions for the terms used in the study.

Participants

Participants will be children and youth in any country, aged 5–19, who attend a primary, middle and/or high

school in private or public schools. Publications describing participation of other populations (university or college students, kindergarten children, teachers, principals, parents, community, etc) will be excluded.

Concept

All sources that describe the process of youth engagement in school health promotion such as the type of engagement activities, the form of engagement, barriers and facilitators to engagement. Sources that only describe the outcome and/or effectiveness of youth engagement will be excluded.

Context

All sources that describe youth engagement in school health promotion in the school types outlined will be included.

Types of sources

This scoping review will consider studies employing quantitative, qualitative and mixed-methods methodologies, as well as different forms of reviews. The scoping review will also include grey literature including dissertations and policy reports. As HPS is a globally recognised model, the scoping review will aim to capture evidence nationally and internationally and will not limit the search to English languages. Studies published or available in all languages will be included if an English language abstract is available. Full-text data extraction will only occur if an English translated source is available. All efforts will be made to locate English versions of articles, including contacting authors of the studies. Studies published from 1986 to 2022 will be included as 1986 marks the publication of the Ottawa Charter for Health Promotion.⁴

Terms	Definitions
Youth engagement	There is no consensus on the definition of youth engagement. For the purposes of this study, we will adopt the definition used by the Centre of Excellence for Youth Engagement, that defines youth engagement as the meaningful participation and sustained involvement of a young person in an activity, with a focus outside of themselves. ²⁹
School health promotion	The WHO defines health promotion as the process of enabling people to increase control over, and to improve, their health. ³⁰ A key component of health promotion is that it takes the focus of individual behaviour and places effort onto the social and environmental factors that influence health and well-being. The activities related are often multidimensional and complex and in the form of prevention strategies for a group, community or population. ³⁰ In the case of school health promotion, this can be defined as any activity, project, programme or initiative that aims to promote health, or other social and environmental determinants that impact the health of students or other school-community members. ⁸
Whole-school health promotion approaches	Whole-school health promotion approaches can be considered integrated and holistic models to school health promotion that embody student health and well-being throughout every aspect and function of the school system. ^{30 31} Whole-school health promotion approaches use various terms and may differ based on the context including health promoting schools (HPS), Comprehensive School Health, coordinated school health, and holistic school health. For the purposes of this study, we will use the term HPS when referring to whole-school health promotion approaches which is defined by the WHO as a school that consistently strengthens its capacity as a safe and healthy setting for teaching, learning and working. ³⁰
Facilitator	'A person or thing which facilitates an action, process, result, etc.' ³²
Barrier	'A circumstance or obstacle that keeps people or things apart or prevents communication or progress' ³³ This term will be used to understand the barriers to implementation of youth engagement in school health promotion.
Outcome	'A state of affairs resulting from some process; the way something turns out; a result, a consequence; a conclusion or verdict.' ³⁴

Search strategy

Aligning with JBI recommendations, a three-step approach will be taken to the search strategy. An initial search strategy will be developed by the lead researcher (JCK) and peer-reviewed by a medical librarian using the Peer Review of Electronic Search Strategies guidelines²⁷ as well as reviewed by the research team. The first step will be an initial limited search of CINAHL on the topic. The text words in the titles and abstracts of relevant articles, as well as the key words and index terms used to describe the articles will be used to develop a more comprehensive search strategy to be used for all databases included. The search strategy, including all identified key words and index terms will be adapted for each of the included database. The reference list of all full-text sources included in the review will be screened for additional studies. The initial search strategy for CINHAL can be found in online supplemental file 1. We plan to search the following databases: CINAHL (EBSCO), ERIC (ProQuest), MEDLINE (Ovid), Sociological Abstracts (EBSCO) and Scopus (Elsevier). We plan to also search unpublished studies/grey literature including ProQuest Dissertations & Theses Global databases, the first 50 pages of Google Scholar and relevant organisations that align with the topic of study including the Pan-Canadian Joint Consortium of Health, WHO, Physical Health Education Canada, and Canadian Healthy Schools Alliance. We will also contact experts in the field for additional sources and include if fit associated inclusion criteria.

Stage 3: study selection

Following the search, all identified citations will be collated and uploaded into Covidence (Veritas Health Innovation, Melbourne, Australia) and duplicates removed. Titles and abstracts will then be screened by two independent reviewers for assessment against the inclusion/exclusion criteria for the review. Articles will be excluded if the full text is not available in English. The full text of selected citations will be assessed in detail against the inclusion criteria by two independent reviewers. Reasons for exclusion of full-text studies that do not meet the inclusion criteria will be recorded and reported in the scoping review and presented in the PRISMA-ScR flow diagram.²⁶

Public and patient involvement

The scoping review will not directly involve the public or patients; however, as mentioned we will connect with experts in our network to help identify relevant evident sources. We will also have an opportunity for youth and health promotion professionals that work directly in the field of school health promotion to provide feedback on the scoping review and the interpretation of the results.

Stage 4: charting the data

Data will be charted from papers included in the scoping review by two independent reviewers using a data charting tool developed by the lead researcher (JCK) that will be reviewed by the research team and piloted prior to charting data from all included sources. A draft data charting tool can be reviewed in online supplemental file 2. The draft

data extraction tool will be adapted and revised as necessary during the process of extracting data from each included source. Modifications will be detailed in the scoping review. Any disagreements that arise between the reviewers will be resolved through discussion. If appropriate, authors of papers will be contacted to request missing or additional information. The data extraction will include key information for each article, as well as relevant findings related to the review questions including: author(s); year of publication; origin/country of origin; aims/purpose; participants; age of participants; study setting/context; methodology/methods; description of youth engagement activity/activities in school health promotion, description of the form of youth engagement activity/activities and description of facilitators and barriers to youth engagement in school health promotion. Various frameworks will be used to guide the extraction of data. The sociological ecological model that considers the interplay between individual, social and system factors will be used to categorise narrative descriptions of facilitators and barriers to youth engagement, as well as activity type. This aligns well with the CEYE framework¹⁷ that indicates that facilitators, barriers and outcomes of youth engagement can be identified at the individual, social and system level. Further, Hart's Ladder of Participation¹⁰ will be used to map the forms of youth engagement participation in school health promotion activities.

Stage 5: collating, summarising and reporting the results

The charted data will be presented in a tabular format to align with the review objective and associated questions. Descriptive analysis will be used to present quantitative data (ie, distribution of studies geographically, age and type of participants, frequency of activity types) and thematic analysis²⁸ will be used to present the qualitative data. A narrative description will accompany the tabulated results to describe in-depth how the results relate to review question and additional questions.

ETHICS AND DISSEMINATION

As only publicly available evidence sources will be collected for this scoping review, it will not be necessary to obtain ethics approval. The main objective of the scoping review will be to map and characterise the different components of the youth engagement process in school health promotion including the facilitators and barriers, the type and form of youth engagement activities, as well outcomes of the engagement activities. This scoping review aims to directly inform future youth engagement strategies in school health promotion, as well as provide further understanding on different process factors that promote or inhibit positive outcomes from youth engagement in school health promotion. To disseminate our work, we plan to develop an array of different knowledge translation products to ensure we reach our target audiences including researchers, healthcare professionals, educators, policy-makers and youth including publishing in an open access journal, presenting at relevant conferences,

developing evidence summaries for decision-makers and professional groups, and developing an infographic for youth and the lay public.

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Contributors JCK and SFK conceptualised the scoping review. JK designed the scoping review protocol and data extraction tool. JCK and SFK reviewed and approved the protocol for submission.

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Competing interests None declared.

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