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Autistic students' mental health and wellbeing in UK higher education: A systematic review of support, barriers, and dropout

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Abstract

Background. More autistic students are entering UK higher education (HE) each year. Their mental health, social experience, and academic progression remain worse than those of their non-disabled peers. The autism-in-HE literature has grown, but the evidence on mental health and wellbeing (MHWB) provision has not been pulled together in one place. As a result, no clear answer exists to the practical question institutions actually ask: which kinds of support help, for which students, in which conditions.

Aim. This review brings the evidence together. It maps existing MHWB provision for autistic students, examines the barriers they face in using it, and assesses how strongly autism is linked to HE dropout.

Methods. A systematic search of seven academic databases (Education Research Complete, ProQuest, Psychology and Behavioural Sciences Collection, APA PsycINFO, Scopus, SocINDEX, Web of Science) was conducted in January–April 2025 for studies published 2015–2025. Eligibility criteria, search strategy, and data extraction were pre-specified. Critical appraisal used CASP (qualitative) and JBI (mixed-methods) checklists. Synthesis followed a qualitative narrative approach with reflexive thematic analysis (Braun & Clarke, 2006; 2022). Reporting follows PRISMA 2020 (Page et al., 2021).

Results. Twenty studies were included. Three themes were generated through reflexive thematic analysis. Theme 1 covers the barriers autistic students reported: mental-health difficulties, academic structures that worked against them, social and sensory environments, weak staff awareness, and the cost of disclosure. Theme 2 sets out the relationship between autism and dropout, where attrition is disproportionately high and the drivers are both individual and institutional. Theme 3 covers MHWB support: peer mentoring and adapted CBT looked promising, but autism-specific provision was thin almost everywhere.

Conclusions. UK universities are not yet meeting the MHWB needs of autistic students. The Equality Act 2010 imposes the duties; the *Abrahart* judgment has tightened them; institutional practice has not caught up. The case for shifting from reactive accommodation to proactive, autism-informed design is clear, as is the case for staff training, co-produced support frameworks, and rethinking how assessment is structured. The evidence base remains small for the size of the population it concerns, and the studies are too varied in method to be meta-analysed. Longitudinal and participatory research, designed with autistic students rather than about them, is the priority.

Keywords: autism; neurodiversity; university students; mental health and wellbeing; higher education; support services; reasonable adjustments; Equality Act 2010; systematic review.

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1. Introduction

Autistic students are arriving at UK universities in unprecedented numbers. Higher Education Statistics Agency figures show admissions rising from 6,845 in 2014/15 to 19,565 in 2022/23 (HESA, 2024), close to a threefold increase in less than a decade. What happens to those students once they arrive is a different story. North East Autism Society (2023) reports that 36% of autistic students failed to graduate in 2022. That is the worst non-completion rate of any disabled group, and it sits well above the all-student baseline of 29%. UK studies on attainment paint the same picture (Chown et al., 2018; Cox et al., 2021; Lucas & James, 2018; Van Hees et al., 2014).

The first year of university is difficult for many students, and frequently more so for autistic students. The literature documents elevated rates of anxiety, depression, stress, and autistic burnout during this transition window (Cage et al., 2020; Cage & McManemy, 2022; Scott et al., 2023). Autism is a disability under the Equality Act 2010, which means universities owe autistic students an anticipatory duty to make reasonable adjustments rather than waiting for individuals to ask. Burin and Atrey (2024) read the Court of Appeal's recent judgment in *University of Bristol v Abrahart* [2024] EWCA Civ 250 as having tightened that duty further. Assessment methods sit inside the duty unless they are part of an explicit competence standard. The legal framework is therefore in place, but institutional practice has not yet caught up (Vincent et al., 2021).

Three features of the population complicate the picture. Many autistic students are not diagnosed until well after leaving school, and the diagnostic gap is widest for autistic women (Loomes et al., 2017; White et al., 2011). Many bring real academic strengths to university (interest, persistence, the analytic style of thinking) that institutional structures rarely mobilise (Anderson et al., 2017; Madriaga & Goodley, 2010). And the disadvantage they report most consistently is social and sensory rather than academic (Campbell et al., 2022; Cai & Richdale, 2016; Goddard & Cook, 2022; Gurbuz et al., 2019).

A substantial body of primary work now exists, but relatively little of it has been synthesised through the specific lens of *mental health and wellbeing* (MHWB). Earlier systematic reviews surveyed the autism-in-HE literature in broader terms (Anderson et al., 2017; Gelbar et al., 2014; Toor et al., 2016), but a lot has happened since 2015: new primary studies, the post-pandemic deterioration in student mental health across the board, and the legal shift around *Abrahart*. This review takes up the MHWB gap directly, guided by three research questions:

- **RQ1.** What MHWB initiatives currently exist for autistic students in UK universities, and what evidence of effectiveness is available?
- **RQ2.** What barriers do autistic students face in accessing or benefiting from MHWB support in HE?
- **RQ3.** What links are reported between autism and HE dropout, and what role do MHWB factors play?

The review contributes a UK-focused, MHWB-centred synthesis structured to PRISMA 2020 standards, with critical appraisal using CASP and JBI checklists, and qualitative narrative synthesis. Its target audience is institutional policy-makers, disability and student-services practitioners, and the autism-in-HE research community.

The review uses identity-first language (“autistic students”) throughout in line with current preferences expressed by autistic communities and the recommendations of Bottema-Beutel et al. (2021), while preserving person-first wording where it appears in cited sources.

2. Methods

2.1 Protocol and reporting

The protocol was written in late 2024 and the review follows the PRISMA 2020 reporting standard (Page et al., 2021). PROSPERO registration was not appropriate (no human participants, no health-outcome data) so the protocol is archived in Zenodo instead, with the search strings, the extraction template, and the PRISMA 2020 checklist (DOI 10.5281/zenodo.17063953).

2.2 Eligibility criteria

Eligibility followed a PEO (Population, Exposure, Outcome) structure, which is the framework that fits a qualitative-and-mixed-methods evidence base of this kind.

- **Population:** university or higher-education students described in the included study as autistic, on the autism spectrum, having an autism spectrum disorder (ASD), or having Asperger's syndrome (terminology used in the source studies).
- **Exposure / phenomenon of interest:** experience of, access to, or evaluation of MHWB-related support in a HE setting.

- **Outcomes:** any qualitative or quantitative indicator of MHWB, academic progression, support uptake, accommodation effectiveness, retention, or graduation.
- **Setting:** universities, colleges of higher education, or other tertiary institutions, with emphasis on UK contexts.
- **Study design:** any empirical study (qualitative, quantitative, mixed-methods) and systematic reviews where they provided new evidence syntheses.
- **Publication period:** 2015 to 2025.
- **Language:** English-language abstracts and full texts.

Studies focused on primary or secondary education, on autism more broadly without a HE component, or on physical-health or vocational outcomes unrelated to MHWB or HE progression were excluded.

2.3 Information sources and search strategy

A systematic search was conducted across seven academic databases: Education Research Complete, ProQuest, Psychology and Behavioural Sciences Collection, APA PsycINFO, Scopus, SocINDEX, and Web of Science. Searches were run between January and April 2025. The full Boolean search string is provided in Supplementary Materials S1. Reference chaining of included studies and targeted citation searching of recent systematic reviews supplemented the database search.

2.4 Selection process

Search results were imported into Rayyan systematic-review software for duplicate removal and blind screening. Titles, abstracts, and keywords were screened independently by reviewers using Rayyan's blind function. Where abstracts were unavailable, executive summaries or tables of contents were used. Discrepancies at the title-and-abstract stage were resolved through discussion with a designated reviewer. Studies passing first-stage screening proceeded to full-text review; corresponding authors were contacted where full texts were not openly accessible. Reference management used Zotero and RefWorks.

Fifteen studies came through the initial database screening. Reference chaining added four more. A targeted citation search during peer-review preparation surfaced one further qualitative study (Bolourian et al., 2018) that fitted the eligibility criteria but had been missed by the database search because of how its abstract was indexed. That brought the final set to **20 studies**. Figure 1 shows the PRISMA 2020 flow.

2.5 Data extraction

Data extraction used a charting framework developed in Microsoft Excel and piloted on the first eight included studies. Fields included: authors, year, and publication type; research aims; study population and setting; methodological approach; sample size and characteristics; outcome measures; and key findings relating to MHWB, support interventions, and systemic barriers. The first eight studies were independently coded by two reviewers to establish consistency before the remainder were divided between reviewers; inter-rater reliability was supported through reconciliation meetings rather than formal kappa scoring, consistent with the qualitative-synthesis register of the review.

2.6 Critical appraisal

Quality and methodological rigour were appraised using design-appropriate checklists: CASP for qualitative studies, the JBI checklist for mixed-methods and quantitative descriptive studies, and the AMSTAR 2 checklist for the small number of included systematic reviews. Appraisal did not result in study exclusion; rather, ratings were used in sensitivity discussion in Section 4. The completed critical-appraisal table is provided in Supplementary Materials S2.

2.7 Synthesis

Synthesis followed a qualitative narrative approach with reflexive thematic analysis (Braun & Clarke, 2006; 2022; Byrne, 2022). Although Braun and Clarke's reflexive thematic analysis is most often associated with primary qualitative data, its emphasis on iterative theme generation and explicit reflexivity has been productively extended to evidence synthesis (Thomas & Harden, 2008). Coding was supported using NVivo 14. Three reviewers contributed to theme generation through iterative discussion. Where included studies offered direct quotations from autistic students, these were carried into the synthesis to preserve the voice of the population the review concerns.

2.8 Ethical considerations

As a secondary analysis of published literature, the review did not require institutional ethical approval. Attention was paid to accurate representation of the findings of original studies, transparency in process, and the avoidance of representational harm in

summarising the experiences of autistic students. The author engaged the recommendations of Bottema-Beutel et al. (2021) on non-ableist language throughout.

3. Results

3.1 Search outcomes

The PRISMA 2020 flow of records is shown in Figure 1. After database search, deduplication, two-stage screening, reference chaining, and targeted citation searching, 20 studies were included in the review.

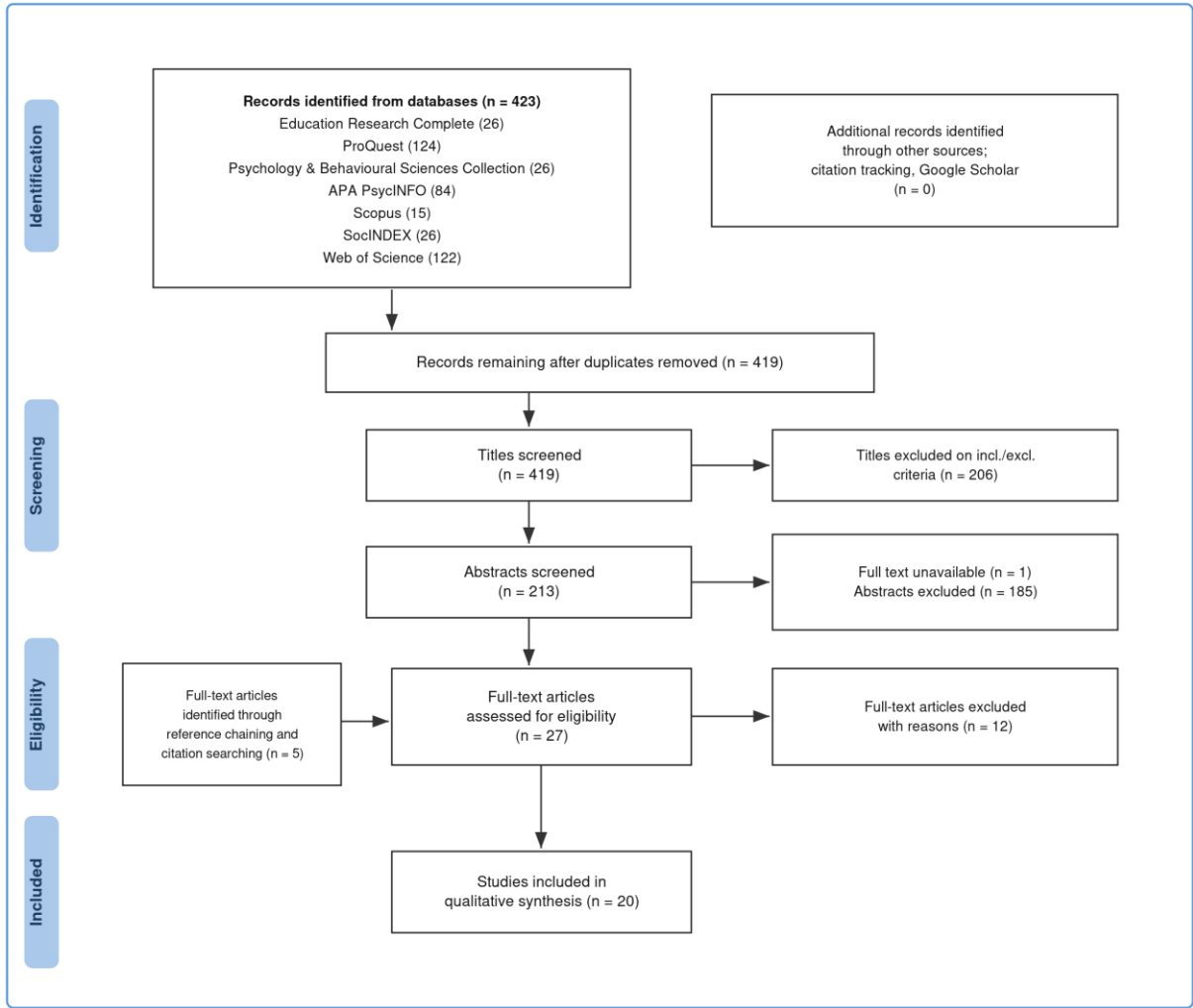


Figure 1. PRISMA 2020 flow of records through the review (n = 20 included studies).

3.2 Characteristics of included studies

The included studies comprised qualitative interview and focus-group designs (n = 12), mixed-methods evaluations (n = 4), quantitative survey-based studies (n = 2), and systematic or scoping reviews (n = 2). Geographic spread included the UK (n = 11), USA (n = 5), Australia (n = 2), Belgium (n = 1), and Canada (n = 1). Sample sizes ranged from single-case experimental designs (Birdsey & Walz, 2021) to systematic reviews summarising hundreds of participants. Date of publication ranged from 2016 to 2025 within the search window, with a concentration in 2018–2023 reflecting the post-2015 expansion of the autism-in-HE evidence base. Full study characteristics are presented in Table 2 (Supplementary Materials S3).

3.3 Critical appraisal summary

Critical appraisal across the included set identified consistent strengths in qualitative methods (clear research questions, appropriate sampling, transparent analytic process) and recurrent weaknesses in mixed-methods reporting (limited integration of

strands, modest sample sizes, single-site designs). No studies were excluded on quality grounds; ratings are referenced where methodological caveats affect the interpretation of specific findings.

3.4 Themes

Three overarching themes were generated from the synthesis.

3.4.1 Theme 1: Barriers and challenges experienced by autistic students

Autistic students reported barriers across mental-health, academic, social, sensory, awareness, and disclosure domains.

Mental health. Heightened anxiety, depression, and stress were the most consistently reported MHWB concerns. Anderson et al. (2017) and Hopkins (2025) reported bullying and the absence of tailored support as contributors to deteriorating mental wellbeing; Cage and McManemy (2022) documented significantly higher rates of burnout among autistic students than among neurotypical peers. Jenks et al. (2023), Hopkins (2025), and Anderson et al. (2017) recorded a recurring institutional pattern in which autistic students reported being dismissed because they did not appear visibly to be struggling. Bolourian et al. (2018), interviewing US autistic and ADHD undergraduates, found that participants attributed substantial emotional difficulty to the cumulative effect of small institutional failures rather than to specific crisis events, a finding consistent with the “silent attrition” framing developed by Elias and White (2018). Pre-existing mental-health difficulties were often exacerbated by entering HE, as Cage and Howes (2020) report in the voice of one participant:

“I didn’t feel happy [at university], but that was at least 75% due to my mental health being so poor, my PTSD became shockingly bad there, until I was too scared to lock my bedroom door at night in case I couldn’t get out.” (Siobhan)

Academic challenges. Reported academic stressors included large class sizes, opaque hierarchies of teaching and support staff, last-minute room or staff changes (Lucas & James, 2018), unfamiliar shifts away from the more structured environment of secondary education (Toor et al., 2016), and the demands of independent time management (Cage & Howes, 2020; Gurbuz et al., 2019). Bolourian et al. (2018) similarly identified academic accommodations gaps, particularly faculty unawareness of registered accommodations, as a recurrent source of academic stress in US institutions.

Social and sensory barriers. Difficulty with interpersonal dynamics, social isolation, exhaustion, and the cognitive labour of masking autistic traits were widely reported (Anderson et al., 2017; Cage et al., 2020; Hopkins, 2025; Jenks et al., 2023). The HE environment was frequently experienced as sensory-overwhelming (Gurbuz et al., 2019), and Thompson et al. (2019), Goddard and Cook (2022), Jansen et al. (2017), and Scott and Sedgewick (2021) noted that transport, accommodation, and the broader social-and-financial geography of HE constituted environmental barriers in their own right.

Awareness of autism and support services. Limited understanding of autism among staff and peers, combined with poor student awareness of available services, recurred across studies. Insufficient autism-informed training for staff (Cage & Howes, 2020; Cage et al., 2020) meant that students did not always know how to access support that nominally existed. Because autism affects social and communication functioning, even academically able students often faced difficulty in self-advocacy (Toor et al., 2016). Bolourian et al. (2018) emphasised the role of *faculty awareness* specifically: many included participants identified individual faculty members as gatekeepers whose comprehension or otherwise of autism shaped students’ day-to-day experience more decisively than institutional disability-service provision.

Disclosure and diagnosis. Stigma, stereotyping, and bullying discouraged disclosure of diagnosis. Goddard and Cook (2022) reported that peer awareness was frequently filtered through stereotyped media depictions; one participant observed:

“If they’ve got the Sheldon Cooper stereotype in their mind, they just think you’re probably rude and incredibly smart. Some people just really have no idea what ASD is. They may not even realise that autistic people can go to university.” (Isabel)

Failure to disclose was a commonly reported problem (Anderson et al., 2017), often resulting in unmet needs.

3.4.2 Theme 2: The link between autism and dropping out of HE

Autistic students were identified as being at elevated risk of withdrawal from HE owing to compounding personal, social, and academic stressors.

High dropout rates. Few universities collect or report retention, graduation, and post-graduation status rates in a manner that allows disaggregation by autism status (Chown et al., 2018). Where qualitative evidence is available, the pattern is concerning: Cage, De Andres and Mahoney (2020) report that many autistic individuals do not complete their studies because of unaddressed needs, including one participant’s observation that “dropping out becomes the only option or is outside of my control”. Jansen et al. (2017) reported that autistic students had a higher likelihood of repeating courses or withdrawing without a degree than neurotypical peers. Lucas and James (2018) report that UK autistic students are less likely to graduate, and those that do are less likely to achieve a

first-class or upper second-class (2:1) honours degree than non-disabled peers. Internationally, Siew et al. (2017) reported that nearly a quarter of Australian autistic students withdrew from HE before completion. Bolourian et al. (2018), in their US sample, similarly identified withdrawal narratives in which “leaving” was experienced as the only sustainable option in the face of cumulative institutional shortfalls.

Attributed reasons. Across studies, attribution clustered around burnout, lack of tailored academic adjustments, and feelings of institutional alienation (Cage & McManemy, 2022). The notion of “silent attrition”, withdrawal without formal complaint or disclosure (Elias & White, 2018), recurred and is corroborated by the Bolourian et al. (2018) US data.

3.4.3 Theme 3: MHWB support initiatives

Several studies described or evaluated support initiatives, with varying effectiveness.

Mental-health and wellbeing support. Few initiatives focused directly on autistic students’ MHWB. Where such services existed, they frequently lacked autism-specific training. Cage, De Andres and Mahoney (2020) emphasised that, although universities often offer disability or mental-health services, autistic students encounter difficulties in locating, accessing, or benefiting from these resources because of inflexible systems and poor communication. Birdsey and Walz (2021) evaluated the concurrent use of standardised and adapted Cognitive Behavioural Therapy (CBT) with an autistic student in a single-case experimental design, finding that CBT may be beneficial but requires further adaptation to fit the sensory, communicative, and cognitive profiles of autistic individuals.

Social support. Structured peer mentoring and autism-friendly community provision were the most positively received initiatives. Anderson et al. (2017) described a mentoring programme as “an effective bridge between academic and social integration”; Siew et al. (2017) reported that adopting a person-centred approach, with the student placed at the centre of the support provision, was the most efficient form of service delivery, and that peer mentoring was the support form most consistently endorsed by autistic students. Counselling, social-community support networks, and technology training and support were also reported (Anderson et al., 2017; Scott et al., 2023; Siew et al., 2017; Thompson et al., 2019; Toor et al., 2016).

Academic support. Jenks et al. (2023) and Anderson et al. (2017) noted that academic mentors, in addition to non-academic mentors, were valued. Schindler and Boney (2022) attributed graduation to a tutoring-centre attendance pattern, with one participant quoted: “students who graduated more often scheduled a weekly standing appointment at the tutoring center”. Where access and provision were uneven, students nonetheless expressed appreciation for standard reasonable adjustments, extra time, separate testing locations, across Jenks et al. (2023), Cage and Howes (2020), and Schindler and Boney (2022).

The cumulative emphasis across studies fell on the *non-academic* dimensions of support: peer mentoring, mental-health and wellbeing provision, and structured transition support. One participant in Schindler and Boney (2022) summarised the limit of purely academic support:

“I think [academic support] could have made a difference for me, but I don’t think it would have been a major factor, I don’t think it would have made me stay...”

Jenks et al. (2023) and Bolourian et al. (2018) both argue that the combination of academic and non-academic support, integrated rather than parallel, gives autistic students the strongest prospects of progression.

4. Discussion

4.1 Key findings

Across the 20 included studies the picture is consistent. Autistic students in HE meet barriers in every domain that matters (academic, emotional, social, sensory). Their mental-health difficulties are well above those of non-disabled peers. They withdraw at higher rates. Promising kinds of support exist: peer mentoring, structured transition support, adapted CBT, and academic mentoring that runs alongside (rather than separately from) non-academic mentoring. But the provision is fragmented, inconsistent, and institutionally under-prepared. What students themselves ask for, across the literature, is not better one-off accommodations but a more anticipatory and autism-informed institutional approach.

4.2 Barriers and challenges in HE

Findings on mental-health difficulties align with prior evidence that autistic students experience elevated risk of anxiety and depression (Gelbar et al., 2014), and that the unstructured environment of HE can exacerbate pre-existing vulnerabilities. Even academically able students struggle when barriers are inadequately addressed (Anderson et al., 2017; Scott & Sedgewick, 2021; Gurbuz et al., 2019). The included evidence suggests that mental-health struggles often go unaddressed because of (a) the absence of autism-specific provision in mainstream services, (b) reluctance to disclose diagnosis for fear of stigma, and (c) institutional

patterns of dismissing students who do not present as visibly in crisis (Cage et al., 2020; Jenks et al., 2023). Poor mental-health is not only an experiential cost but a structural driver of delayed progression, interruption, and withdrawal.

The cognitive and sensory load of HE, executive-functioning demands, opaque hierarchies, room and staff changes, large noisy lecture settings (Cage & Howes, 2020; Lucas & James, 2018; Gurbuz et al., 2019), emerges as a category of disadvantage that conventional reasonable adjustments rarely address. Read through Maslow's framing of needs, many of these barriers sit at foundational levels: comfort, predictability, emotional security. Where such basic conditions are not met, higher-order academic goals become disproportionately difficult to reach. Bolourian et al. (2018) place faculty awareness at the centre of the pragmatic everyday experience of US autistic undergraduates, a finding consistent with UK reports on the inconsistency of staff knowledge and training (Cage & Howes, 2020).

Social challenges were particularly pronounced. Many autistic students report difficulty integrating into university communities and navigating unspoken social expectations, leading to loneliness and exclusion (Cage et al., 2020; Goddard & Cook, 2022). Masking, the cognitive and emotional labour of concealing autistic traits to appear neurotypical, recurred as a documented contributor to anxiety, depression, and burnout (Cage & Howes, 2020; Hull et al., 2017). Across the included studies, masking is treated not as an individual coping mechanism but as a structural response to a HE environment that does not yet recognise autistic communication styles as legitimate.

4.3 Autism and dropping out of HE

The review identifies a strong qualitative signal that autistic students disengage from HE because of compound stressors that institutional support has not adequately addressed. Quantitative dropout estimates remain sparse and inconsistently disaggregated by autism status (Chown et al., 2018), an evidence gap with policy salience. The qualitative data triangulate around the transition period as the most acute risk window (Cage & Howes, 2020) and around "silent attrition", withdrawal without formal complaint, as a pattern that obscures the institutional shortcomings driving it (Bolourian et al., 2018; Elias & White, 2018).

4.4 Evaluating support initiatives

The most positively received support forms in the included evidence were peer mentoring and integrated academic-and-non-academic support (Anderson et al., 2017; Jenks et al., 2023; Siew et al., 2017). Birdsey and Walz (2021) point to the importance of adapting standard interventions (CBT) to autistic profiles rather than offering unadapted provision. Across the included studies, students consistently described mainstream services as fragmented, requiring repeated self-advocacy in systems that did not understand them, and as failing where they relied on the student's capacity to navigate them. This pattern is consistent with critical-disability scholarship that locates disablement in institutional design rather than in individual impairment (Goodley, 2017; Oliver, 2013).

4.5 Implications for policy and practice

Three institutional priorities come out of the synthesis. The first is autism awareness and training at every staff level, teaching and administrative both. Several of the included studies locate day-to-day faculty awareness as decisive for student experience; Bolourian et al. (2018) is one of the clearest, and Jenks et al. (2023) is one of the few evaluated training programmes the field has actually produced. The second is integrated, student-centred support frameworks, with early identification of need, co-created plans, and communication that holds together across academic and non-academic services. The third is cultural: making disclosure something that does not cost the student, and moving the burden of self-advocacy off the individual.

The legal context strengthens the case for proactive design. After *University of Bristol v Abrahart* [2024], the Equality Act 2010 anticipatory duty applies more strictly than many institutions have practised; assessment methods are subject to the duty unless they are part of a defensible competence standard (Burin & Atrey, 2024). For autistic students, whose substantial disadvantage in conventional assessment formats is well documented, the implication is that blanket reliance on standard adjustments is increasingly difficult to defend.

4.6 Strengths and limitations

The review's strengths include its focus on MHWB-specific initiatives, its UK-centred framing within the *Abrahart* legal context, the use of design-appropriate critical-appraisal checklists, and the integration of a recently identified qualitative US study (Bolourian et al., 2018) that strengthens cross-jurisdictional triangulation.

Four limitations should be noted. First, the small number of included studies ($n = 20$) limits the inferences that can be drawn and reflects a real evidence gap rather than restrictive inclusion criteria. Second, the heterogeneity of designs precludes meta-analytic synthesis, and quantitative effect sizes for the most promising interventions remain unavailable. Third, restriction to English-language abstracts and the 2015–2025 window will have excluded some relevant earlier or non-English work. Fourth, the synthesis depends on the quality of reporting in primary studies, and several included studies reported small single-site samples without long-

term follow-up.

5. Conclusion

Autistic students in UK higher education face a stacked set of barriers: academic, mental-health, social, sensory. Institutional unpreparedness compounds those barriers, as does the absence of joined-up, autism-informed support. The combined effect shows up in withdrawal rates that are disproportionately high and in an inequity that legal frameworks have not, by themselves, fixed. Promising initiatives exist but they are fragmented and unevenly used.

The evidence calls for a change of approach: from reactive accommodation to proactive design. That means institutions that anticipate rather than react, that integrate academic with non-academic support, and that train staff to recognise autism-informed concerns when they appear. After *Abrahamart*, the legal weight of that shift sits with the institution, not with the autistic student who happens to disclose. What the field needs next is targeted, adequately powered, participatory and longitudinal research, capable of showing which integrated provisions actually improve MHWB and progression.

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AI use disclosure

Generative artificial intelligence (Anthropic Claude) was used to support the rewriting and structural revision of an earlier draft of this manuscript. All AI-assisted content was reviewed and verified by the author, who retains responsibility for the content and conclusions of the paper.

CRedit statement

Nicki James Shepherd: Conceptualisation, Methodology, Investigation, Data curation, Formal analysis, Writing, Original Draft, Writing, Review and Editing.

Conflicts of interest

The author declares no conflicts of interest.

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Data availability

The review's protocol, completed PRISMA 2020 checklist, full Boolean search strings, characteristics-of-included-studies table, and critical-appraisal table are openly available on Zenodo (DOI 10.5281/zenodo.17063953).

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