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'We Are Trying to Make Sense of Our Lives': Health Promotion in the Context of Young People's Digital Sexual Environment

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ABSTRACT

Issue Addressed: Young people's engagement with sexual content online has received ongoing attention in both policy and practice. However, there remains limited understanding of how health promoters can best engage with digital environments to support young people's learning about sex and relationships in the context of their existing digital practices.

Methods: Qualitative, in-depth interviews were conducted with 22 young people aged 18–25 and 22 key informants specialising in relationships and sexuality education (RSE), sexual health and digital content design.

Results: Young people interact with digital sexual health content from a wide range of sources and platforms. This environment serves as an important space for self-exploration in relation to sex, relationships and identity that is situated in the broader context of young people's offline environment, community, and friendships.

Conclusions: Digital spaces support young people to develop skills and knowledge about sex, relationships and identity by providing access to diverse resources across various platforms and communication modes. Having a range of information and perspectives online enables young people to exercise their judgement, critically reflect and build their skills and knowledge in important ways.

So What? To support young people's sexual health, it is necessary to understand the key elements of online engagement that help young people in building an understanding of sex and relationships. This includes an understanding of online health promotion as contributing to existing formal and informal sexual health messaging.

1 | Introduction

Digital spaces are significant sites for sexual health promotion as they provide young people access to a wide range of content on relationships, sex, bodies and sexuality. Previous research has found that young people both actively search for and incidentally access [1], a range of topics, including those related to

sexual practices, sexual pleasure, STI symptoms and transmission, pregnancy and masturbation [2]. Indeed, digital spaces present numerous benefits that are supportive of young people's learning, including anonymity and privacy, accessibility, access to information that may not be provided in school or family environments, and connection with communities and peer support [3, 4].

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The potential strengths of digital sexual health promotion have been widely discussed. It is a relatively inexpensive medium for sexual health promotion that has the capacity for wide reach to targeted population groups, including those that may be otherwise difficult to access, and allows private engagement with sensitive or stigmatised topics [4–7]. Health services have increasingly turned to digital platforms to deliver health information, including websites, mobile applications and social media, and, despite some limitations with evaluation, success has been observed in relation to increased sexual health knowledge and behaviour change for effectively designed programs [5–8]. However, there remains limited understanding of the broader context of young people's online engagement with content concerning sexual practices and relationships, including the extent of what they learn, how they interact with this content and where this sits in relation to digital sexual health promotion.

Indeed, young people's engagement online, particularly in relation to unregulated sexual content, has been largely framed in terms of the perceived risks and potential for harm [9, 10]. Recently, the Australian government proposed the 'age verification' scheme, seeking to restrict young people's access to sexual content online, including pornography and social media platforms [11]. Where pornography has been located as harmful [12] for exposing young people to potentially damaging representations of sex, bodies, relationships and gender roles [13–15], social media has been discussed as a space where young people can be exposed to sexual victimisation, misinformation and ideas that may promote sexual risk-taking [9]. These concerns have prompted regulatory responses, including age-based access restrictions [11]. However, responses that aim to restrict young people's access both overlook potential positive outcomes associated with young people's access to content related to sex and relationships online, and, if such engagement does indeed yield beneficial effects, restrictive policies may inadvertently undermine these positive impacts. This underscores the need for a more nuanced understanding of young people's interactions with online sexual content, balancing potential risks with the potential for positive developmental and educational outcomes.

While work within cultural studies has explored the ways that digital spaces and cultures offer young people reflexive, participatory environments to expand their knowledge on intimacy and learn about sex and relationships [12], and fill in the gaps not addressed by traditional sources [10, 16], this approach has not been taken up to the same extent within public health [17]. The E-Safety Commission in Australia has highlighted the range of benefits presented by digital engagement that sit alongside the harms encountered by young people in the online environment, including cyberbullying, sexting and exposure to unwanted sexual content [17, 18]. However, the overwhelming focus on responding to digital safety issues creates potential barriers to advancing digital sexual health promotion as efforts remain focused on the regulation of young people's access to online spaces and reduction of engagement with sexual content.

This paper sits at the intersection of these discussions on young people's access to online sexual information and explores what

approaches to digital sexual health promotion are effective, and how young people can be supported in learning about sex and relationships online while maintaining their safety. It responds to public policy debate and broader anxieties about young people's digital engagement, and seeks to better understand why and how young people engage online with content and information on sexual health and relationships, what role this content has in how young people's navigate their experience of sex and relationships, and how this might be best approached in the context of public health.

This paper presents findings from in-depth interviews with young people aged 18 to 25 years and key informants working in relationships and sexuality education, sexual health and digital content design. It argues that to develop effective public health responses that locate sexual health as involving the capacity, skills and knowledge to navigate information and situations related to relationships, sexual interactions and physical health [19–22], it is necessary to understand the key elements of online engagement that support young people in building an understanding of sex and relationships [23]. In so doing, it contributes to the public policy discussions about young people's access to online spaces and the role of health promotion in this broader context of digital engagement.

2 | Methods

To better understand young people's engagement with digital sexual content, in-depth interviews were conducted in Australia with young people aged 18–25 and key informants working in relevant industries. Research ethics approval was obtained from the La Trobe University Human Research Ethics Committee (HEC21223), ACON Foundation (NSW, 202130) and Thorne Harbour Health (VIC, THH/CREP 21-012).

2.1 | Participants and Recruitment

Young people were recruited through Facebook advertising and invited to complete a brief eligibility survey to register their interest in participating. Potential participants were invited to participate based on the selection of demographic characteristics to ensure diversity in gender, sexuality and cultural backgrounds in the sample. Each young person provided informed consent and received reimbursement of a \$25 gift card for their participation.

Key organisations and experts in RSE and youth sexual health promotion, marketing and communication and digital communications were identified via an online search and through the researchers' networks. These organisations and individuals were directly invited via email to participate in the study and provided information and a consent form. No reimbursement was provided for key informants.

Overall, 22 key informants and 22 young people participated in semi-structured, in-depth interviews. Tables 1 and 2 provide participant demographics. Pseudonyms are used for quotations in the discussion below.

TABLE 1 | Demographic characteristics—Key informants.

Characteristics of participants (N=22)		
	n	%
Organisation type		
Community organisation	8	36%
Private business/private sector organisation	10	45%
Public institution or publicly funded organisation	4	18%
Organisation or consultant sector or role ^a		
Academia/research	4	18%
Clinical sexual health	1	5%
Community organiser	1	5%
(Dis)ability community service organisation	2	9%
Gendered violence prevention role	2	9%
Health promotion role	4	18%
LGBTIQA+ health and wellbeing organisation	2	9%
Marketing role	1	5%
Multicultural and multifaith role	1	5%
Psychologist	2	9%
Sex education role	5	23%
Sex therapy	2	9%
Sexual health and wellbeing community role	2	9%
Young people and mental health	1	5%
Area(s) of expertise ^a		
Advocacy	1	5%
Content creation (digital)	1	5%
Digital cultures	1	5%
HIV	1	5%
LGBTIQA+ needs	1	5%
Medicine	1	5%
Psychological treatment	3	14%
Relationships and sexuality education	8	36%
Sexology	4	18%
Sexual communication	6	27%
Sexual health promotion and information	4	18%
Sexual wellness communication	1	5%

(Continues)

TABLE 1 | (Continued)

Characteristics of participants (N=22)		
	n	%
Social media	1	5%
State/territory		
New South Wales (NSW)	7	32%
Queensland (Qld)	1	5%
Victoria (Vic)	11	50%
Western Australia (WA)	3	14%
Interview type		
Zoom video and audio	21	95%
Phone	1	5%

^aOrganisations and consultants had overlapping sectors and areas of expertise, often branching across numerous categories. As such, numbers may add up to more than 100%. Percentages have been rounded to their nearest whole number.

2.2 | Data Collection

Interviews were guided by semi-structured questions (available as [supplementary material](#)). Questions for young people centred on their experiences of school-based RSE, their engagement with digital content related to sex, relationships, consent and pleasure, and what they considered to be effective digital media approaches to support sexual literacy. Questions for key informants focused on the delivery of effective sexual health promotion in digital spaces and how to develop holistic approaches to sexuality education and sexual rights using digital media and digital engagement.

Interviews were conducted by the lead author concurrently with both groups over 4 months in late 2021. Because of COVID-19 outbreaks in Australia, all interviews were conducted online. Young people participated via Zoom (audio, video or chat), while key informants used Zoom or the telephone. Audio interviews with young people ranged from 25 to 66 min, varying depending on their comfort level in discussing the topic. Key informant interviews typically ran for 50 min. All interviews were audio recorded and transcribed verbatim.

2.3 | Data Analysis

Analysis was conducted in line with Braun and Clarke's [24] process of thematic analysis wherein key patterns and themes were identified in the data set. A mixed inductive and deductive approach was taken, wherein initial coding was guided by research objectives while also allowing for emergent themes. Data were coded in NVivo using a codebook collaboratively developed from the research objectives and overall familiarisation with the data. This allowed for structure while maintaining flexibility for interpretive insights. James, Waling and Lim independently cross-checked the codebook and coded data, discussing divergences and ensuring a reflexive, iterative approach. Throughout the process of coding, James and Lim remained attentive to repeated themes and patterns that had not been captured in the

TABLE 2 | Demographic characteristics—Young people.

Characteristics of participants (N= 22)		
	n	%
Self-identified sexual orientation ^a		
Bisexual	8	36%
Gay or lesbian	7	32%
Heterosexual or straight	7	32%
Queer	3	14%
Pansexual	2	9%
Asexual	1	5%
Demisexual	1	5%
Omnisexual	1	5%
Self-identified gender identity ^a		
Man	9	41%
Woman	8	36%
Gender queer	2	9%
Non-binary	6	27%
Trans man	1	5%
Trans feminine	2	9%
Trans	2	9%
Gender diverse	4	18%
Gender fluid	1	5%
Charagender ^b	1	5%
Prefer not to have a label	1	5%
Assigned sex at birth		
Female	12	55%
Male	9	41%
Prefer not to say	1	5%
Age		
18	3	14%
19	1	5%
20	5	23%
21	2	9%
22	2	9%
23	3	14%
24	5	23%
25	1	5%
Disability/chronic illnesses		
Yes	6	27%
No	5	23%

(Continues)

TABLE 2 | (Continued)

Characteristics of participants (N= 22)		
	n	%
Undisclosed	11	50%
State/territory		
Australia Capital Territory (ACT)	1	5%
New South Wales (NSW)	5	23%
Queensland (Qld)	2	9%
South Australia (SA)	2	9%
Tasmania (Tas)	2	9%
Victoria (Vic)	8	36%
Western Australia (WA)	2	9%
Residential location		
Capital city/inner suburban	5	23%
Outer suburban	13	59%
Regional	2	9%
Rural	2	9%
Country of birth		
Australia	18	82%
England	1	5%
Malaysia	1	5%
Singapore	1	5%
United Kingdom	1	5%
Ethnicity ^c		
Anglo-Celtic Australian	10	45%
Asian (region undisclosed)	1	5%
Central and Eastern European	1	5%
East Asian	3	14%
European (region undisclosed)	1	5%
Northern European	5	23%
Southeast Asian	2	9%
Southwest Asian	1	5%
Southern African	1	5%
Western Europe	1	5%
Religion		
Agonistic	3	14%
Atheist	5	23%
Catholic	2	9%
Christian	1	5%
Not religious	10	45%

(Continues)

TABLE 2 | (Continued)

Characteristics of participants (N=22)		
	n	%
Pagan	1	5%
Secondary school type (when attended school) ^d		
Government schools	6	27%
Religious-based schools	11	50%
Other private schools	2	9%
Undisclosed	3	14%
Interview type		
Zoom video and audio	6	27%
Zoom audio only	7	32%
Instant messaging only	5	23%
Phone	4	18%

^aGender identity and sexual orientation are reported based on participants' preferred identity and description. These do not add up to 100% as some participants indicated more than one sexual orientation and/or gender identity. For a list of these identities, please visit <https://www.prideinsport.com.au/terminology/>.

^bCharagender has two opposing definitions and is not currently well recognised in common LGBTIQ+ lexicon. One definition describes charagender as 'a fictigender strongly connected to one or more fictional characters'. Another describes charagender as a 'term for a gender which is so personal to someone that they can only describe it as "me"-gender'.

^cEthnicity is reported following the Australian Standard Classification of Cultural and Ethnic Groups, developed by the Australian Bureau of Statistics. Percentages add to more than 100% as participants indicate more than one cultural and ethnic background.

^dSchool types reported are based on participant self-descriptions of the secondary school they attended, noting that not all participants were in school at the time of the interview. School type was relevant as participants were asked to reflect on the RSE they received at school.

codebook. Additional codes were developed in response to these identified themes. Data from interviews with young people and key stakeholders were coded separately, allowing for later comparison of key themes. Reflexivity, described by Liamputtong [25] as a key strategy to attend to rigour in research, was central to the analytical process, with researchers critically reflecting on their positionality and subjectivity during data collection and analysis. To support this process, researchers routinely debriefed with senior staff, examining their interpretations and assumptions. A qualitative methodology prioritising participants' perspectives underpinned analysis [25]. This approach, in accordance with Liamputtong's conceptualisation of transferability, aimed to provide rich, nuanced discussions rather than generalisable results [25], offering insights into how young people and key informants understand and navigate digital spaces for sexual health information.

3 | Results

The results highlight three key themes: the ways young people navigate and assess online sexual health content, the role of digital spaces in identity exploration and community-building and the implications for health promotion in supporting young people's digital sexual literacy [26].

3.1 | Accessing Informal Digital Spaces

Young people actively search for informal, personal, and story-based content. They described navigating online spaces with a keen awareness of which sites and platforms were likely to contain this type of content, and how this could be identified via tone, platform and communication style. One young person described how digital spaces are traversed by young people searching for types of information that depart from formal sexual health information:

I definitely think stats and physical/medical info would be very useful for broad topics (e.g., sexual health issues, types of contraception and STIs, etc.) but personal stories/experiences would be great for connecting with the reader and making them feel comfortable with engaging with the info further. (Ashton, 20years old, male, bisexual).

Despite critical awareness of where different types of information can be found, young people described often sifting through a large number of search results to find information that satisfied their criteria. Finding the 'right' information was not a straightforward process. This criteria could involve, for example, finding information from what was regarded as a credible source, or information that addressed their concern in particular specificity. Young people described this process:

It's not a simple Google search, you can't just type in something super specific and you're going to get hundreds of results, you might have to search for 30 minutes, go down like 12 different rabbit holes and then like the perfect answer is right in front of you.

(Kaleb, 20years old, male, heterosexual).

In addition to these active processes of searching for information, young people also consume messages and information about sex and relationships through non-active searching, including participation in online communities that disseminate messages, social media posting and the sharing of advice and information among friendship groups. Social media and online community spaces were discussed by key informants as key digital sites where young people were likely to 'passively' consume information about sex, relationships and sexuality:

I think people are Googling and stuff, if they really actively have a question, but I think sort of circumstantial, whatever they see on Tik Tok or Instagram is probably where they get most of their information from, and following influencers on Instagram and Tik Tok, I honestly think that's where they're getting most of their information from.

(Alexis, Community Sector, Sex Education).

The digital environment is an important space that young people access to both actively seek out specific information,

and engage with content that is accessed via less intentional means. A range of sources, mediums and platforms are traversed by young people that form a complex web of digital sexual content.

3.2 | Assessing the Web of Content

Regardless of the ways that young people come to find information, they then navigate and assess information in a variety of sophisticated ways. In particular, both young people and key informants described the ways that online information would be assessed in relation to other online information—with a variety of sources engaged with and measured in relation to personal experience. This worked to form an assessment of both the information and their situation, as well as helping to provide an overall picture of the topic:

I tend to compare lots of information online if it is on a more specific matter with no black and white answers, and I do find it more helpful this way. (Mark, 22 years old, heterosexual).

In addition to this, young people assess online information based on the relatability and perceived relatability of the source. When asked if information online was perceived to be trustworthy, a participant responded:

I surprisingly do, more than I think I would. Like I guess it obviously depends on the person who's saying it, and on some platforms it's easier to judge that kind of person, like on Facebook if they have a few profile photos and you can scroll through their feed a bit, you can get a rough estimate of the kind of person they are (Kaleb, 20 years old, male, heterosexual).

This was supported by key informants who described the ways that young people assess the credibility of information online based on who delivers the information or message:

A lot of them go to influencers and YouTubers and people that are actually already speaking on these topics in ways that they find authentic. I think that young people that I talk to today have this idea of authenticity and reputation, they use the word reputation a lot ... like the reputation of an influencer, or the reputation of that person on YouTube matters, and we undersell and we don't respect the depth that the young people have in being discerning around those kinds of things. (John, Community Sector, Health Promotion).

3.3 | Shifting Understandings of Going Online to Being Online

The content young people engage with online, however, does not exist in isolation, and young people described also situating online information alongside offline information, continuing

conversations and interactions from offline spaces in digital spaces, or sharing digital resources. In this way, online and offline spaces are traversed seamlessly and inextricably linked:

I have one friend who is having a particular issue and I knew there was like one podcast about it. It was really quite educational and so I was like here watch this, and she was like oh thank you so much, and then she started following them too. (Summer, 21 years old, female, bisexual).

Young people's online engagement is inseparable from their offline interactions with the social world. This was described by key informants:

For children and young people, there is no online and offline; there is just the world in which we live (John, Community Sector, Health Promotion).

Interaction online is a first port-of-call for that audience and almost have come of age in a time or they don't know a life without that really, so interaction is second nature and they don't see life as online-offline, that's just a part of everything. (Amy, Public Sector, Research).

Stakeholders described young people as being online as a matter of course—they search, they engage, they lurk—they assess online information in ways that there is no separation from online and offline—young people do not merely 'go online'; they are living in a space where there is not a distinction between online/offline.

3.4 | Shifting From Information to Content

Knowing that young people engage online as a matter of course also requires appreciating what online spaces provide them, particularly in relation to topics of sex and relationships. Often young people used digital content to make sense of an experience they encountered offline. While older participants described this as often relating to questions about their own relationships or sexual experiences, for younger people and children, key informants described the likelihood that they would Google information about changes in their bodies or to clarify terms they heard but did not yet understand:

When they notice something on their body they're probably going on the internet before going to someone else... I think because of the access they have to the internet all these things they'll Google them before they even ask someone because of just the nature of their learning and their interactions with the internet. (Riley, Community Sector, Health Promotion/LGBTIQA+ Health and Wellbeing).

However, many described searching for information beyond the physical aspects of sex, statistics or medicalised sexual health

content. Rather, they were searching for content that would help them navigate the emotional aspects of relationships or gender identity:

When I was a teenager Twitter was incredibly important in developing my sense of sexuality and gender and stuff like that, even if I didn't really know it at the time, because I was interacting and listening to a lot of perspectives from transwomen and queer people (Diana, 25years old, trans woman/trans feminine, gay or lesbian/bisexual/queer).

Accessing other people's stories via lurking on social media and informal platforms like Reddit was discussed by young people to provide reassurance and help young people reflect on their own experiences. One young person spoke of the normalising aspects of this:

Just to figure out that I wasn't alone, I suppose. And to, to be like, 'Okay, this isn't, this isn't just in my head. This isn't just me, like overreacting or anything. This is actually, this is actually a common and, you know, valid, valid thing that a lot of people experience'. So that was really helpful in that regard, I think. (Wren, 23years old, charagender, omnisexual, demisexual).

Online spaces were described as spaces that young people feel safe to explore their identity or other questions related to sex and relationships in ways that provide emotional support and reassurance. Observing others' experiences was described as an important part of this normalising experience for young people, providing a sense of reassurance:

Just having someone else that they can identify with is enough to feel validated and good and all of this stuff. So just seeing other people on TikTok for example dealing with these struggles is enough for them to feel a sense of okay-ness about them. (Diana, Private Sector, Sex Education).

Young people described finding community online and emphasised the importance of being able to communicate with peers and having access to read about others specific experiences that reflected their own that they may otherwise not have access to in offline spaces:

Something I found really useful actually are Facebook groups like you can be on a group for asexual people, for disabled people and then you have people's own lived experience. (Kit, 22years old, non-binary/gender diverse, asexual).

Reflecting offline interactions, where young people turn to already trusted people for companionship, friendship, and the sharing of advice [27], topics about sex and relationships can emerge via trusted sources and communities online. This

involves existing networks based on interests that share sexual information or content, rather than being a result of specific searching:

Sexual relationships are often part of online communities that aren't actually about sex and relationships. And I know that from my own experience from being into music forums when I was, the late 90's, early 2000's that had nothing to do supposedly with sex and relationships. But you know, there's always a thread about you know, something to do with sex... within the community, so digital communities, learning is different, it's connected, it's often pulling pieces together that feel right, that you have an affinity with someone else and that's why you'll listen to them. (Diana, Private Sector, Sex Education).

The ways that discussions online about sex and relationships can occur, including in places not specifically focused on sex and relationships, enabled young people to find a way around the usual taboos, shame and awkwardness that are associated with talking about sex in offline interactions. A shame-free learning environment was described as an important aspect of supporting young people with questions about sex and relationships:

I think sex is still generally pretty embarrassing and it's a pretty uncomfortable thing to talk about, and so if you want to know about that stuff it's best to do it in a place where no one else can—it needs to feel private, it needs to feel like not shameful. (Diana, 25years old, trans woman/trans feminine, gay or lesbian/bisexual/queer).

Digital spaces and communities were described as important tools for supplementing what was frequently regarded as inadequate school-based relationships and sexuality education; many participants described experiencing school-based education that did not meet their needs or worked to reinforce taboos and silences. One young person described the significance of digital spaces in this context:

I just know from my personal experience, I didn't get enough of that at all. And the way that I got most of my information ended up being the internet. (Wren, 23 years old, charagender, omnisexual, demisexual).

However, the ways that young people engage with digital content, for instance, via searching, lurking, or sharing, vary according to their individual needs and comfort levels. Key informants further described the way that young people's engagement with online health forums varies based on their motivation levels: less motivated young people were described as reading forums and engaging with pre-existing content rather than seeking direct input; however, more motivated individuals value both peer and professional input, seeking normalisation from peers while also pursuing credible, nuanced information from clinicians. This was outlined by one key informant:

When you're less motivated, you're probably not feeling as safe to talk to a clinician. So, you're kind of really banking on that someone else has had the conversation and you can sort of like read over their shoulder and hope that it applies to you. (Jorge, Community Sector, Young People and Mental Health).

Online engagement does not operate in the same way for every young person—traditional public health information is relevant for some, but finding and participating in community is more important for others. All of these touchpoints are important, and young people are adept at using digital spaces in ways that support their needs, be it for community connection or identity formation in ways that support their learning about sex and relationships. In this way, digital spaces offer a range of supports for young people that are specific to their circumstances and provide young people with the capacity to choose their level of engagement with content that is relevant for their needs and existing knowledge base.

3.5 | What Can the Health Promotion Space Offer in Light of These Uses?

In this context, key informants discussed the importance of not simply producing sexual health information online, but finding ways to engage with the digital environment to support sexual health:

When we think of health promotion in its sort of theoretical and traditional forms and what it aims to do then it has to utilise online platforms and online channels of sending out messages and perhaps generating interaction with its target populations. ... if we talk about health promotion we've got to talk about health promotion and not just information health information. (Victoria, Public Sector, Research).

As one component of this, health promotion can be understood as working alongside existing content in ways that are used by young people to build a nuanced understanding of relevant topics. It can be understood that health promotion, when conceptualised as one component of young people's digital content, does not involve attempts to replace existing content or restrict access to other content, but enables multiple opportunities for engagement:

I think my favourite is when there is a website, because I just find having everything in just one place is really easy. But that having like, Instagram ads, or even then also having an Instagram page where they post, like stuff from the website as a way to like, draw people's attention in, because most people aren't just going to magically stumble across the website on their own. (Ira, 18 years old, male/transman/trans/gender diverse, queer).

Understanding the way that young people seek community, authenticity and navigate sexual health information across platforms is important for developing health promotion resources that are in line with the way that young people assess information in relation to emotion and identity:

The way they assess [online content] is so much more about [how] their feelings and emotions relate to that. So what I mean by that is, like, how nice does the website look, is it you know, would you listen to this influencer on Instagram versus this one.

(Diana, Private Sector, Sex Education).

Alongside this, both young people and key informants spoke about the importance of respecting young people's digital cultures and emphasised the need to have information available on the platforms and spaces with which they already engage. How this might work in practice was described:

If you can have like a forum or something like Reddit you know where people can find a community that they're part of and post questions and stuff like that could be really useful. (Kit, 22 years old, non-binary/gender diverse, asexual).

It is the underpinning relevance and perceived authenticity that were considered essential to enabling effective health promotion. In particular, key informants described digital resources as effective only if engaging with young people in a relevant way. Relevance was described by key informants as produced through attending to the authenticity of the message, the inclusion of young people from relevant communities, and ensuring there is a 'face' to a brand:

Potentially the most impactful way to do it is by engaging people who can be the voice and face of a message rather than probably going down a direction that feels more generic with a focus on faceless animations and almost a more typical departmental response. ... what we've seen is that it is about who's delivering the message almost as much as what the message is. (Amy, Public sector, Research).

This was elaborated by another participant, describing how young people read the messenger as having authenticity from lived experience:

A lot of time people with a more specific health background can give information in a very clinical format and that can make it seem quite like oh for a peer instead of having it come from someone who's like here's like the real deal all this kind of stuff. It's sometimes more useful to have it from someone who doesn't come from a clinical background (Kit, 22 years old, non-binary/gender diverse, asexual).

To facilitate this, there was a consensus among key informants and young people that young people themselves need to be involved in the process of developing and providing online resources in relation to sexual health. This included involving young people so that: the issues they are concerned about are correctly identified; the mode of communication, including via specific platforms, is adopted specific to young people; and the language used to communicate health messages reflects young people's mode of expression and is both understandable and relatable. In describing ideal content design, the process of co-design was outlined:

It would have to be I guess a combination of both, younger people identifying topics that they're interested in, and then people with more experience, and even people with credentials, with I guess formal knowledge of the certain topics to provide the facts about it.

(Zoe, 20years old, female, heterosexual).

This was explained as an important part of ensuring the content was relevant, in alignment with lived experiences, and, as a result, perceived as credible by the target audience:

I think maybe people with a credible background collaborating with young people and answering the questions they have, then putting it in their resources with the credits towards, like, this person had these questions, or created in collaboration with these young people. I think that would make it even more credible I guess, because you'd know it's not just these people who have the medical information saying or giving me the answers, they're actually answering questions that people like me have, and so it's more again like the personal stories, the personal connection. Gives it more credibility because you know that it's actually happened to someone.

(Mollie, 10years old, female, bisexual).

Indeed, involving young people in the process of promoting sexual health was described by both key informants and young people to result in more relatable content that aligns with young people's existing digital engagement. In particular, it was regarded as important to have young people contribute their stories, voices, and lived experience as part of content that seeks to normalise other young people's experiences. Key informants further recognised how young people can contribute to the dissemination of messaging in ways that align with their digital cultures and practices. For example, videos and shareable content that can be shared by peer groups were also identified as important in allowing the 'authentic' circulation of messaging around sex and relationships.

Importantly, however, it is necessary that health promoters attend to the differences between young people; they do not assume that resources can speak to every individual or cater for every young person's needs or be perceived as relevant for all young people:

Some young people have really advanced and evolved critical thinking skills, others not so much. And here's—this came from a young man just the other night ...he was like the thing you have to remember is this, we're year 10 to year 12s, we're all different, we're trying to make sense of our lives, so what's authentic and what's reputable for one of us isn't necessarily authentic and reputable for another one of us, because, this is my language not his, because that person's a goth and that person spends all their time at the skate park (John, Community Sector, Health Promotion).

In this way, digital sexual health promotion needs to attend to where young people are at, how they interact online, and what is important to them about that process, recognising that digital health promotion cannot speak to all young people and will not replace other forms of engagement around sex and relationships but form one component of young people's digital space.

4 | Discussion

Given that young people are engaging with digital content in ways that speak to identity and community, it is important that health promoters and policymakers recognise what digital spaces provide young people. Young people are able to assess information online [28, 29], and this process of assessment is part of a reflexive process that helps to build a nuanced awareness of the topics related to sex, relationships, and their own identity. In this context, health promotion might be about supporting online inquiry and digital safety. Limiting or restricting young people's access to digital space would impede an important aspect of young people's development of critical, digital sexual literacy [26, 30, 31] that is formed via this process of reflection, assessment, and engagement. Rather, policy and health promotion efforts should focus on how best to encourage and support young people's learning about sex and relationships via a range of digital spaces, including peer spaces, and encourage curiosity while also ensuring safety. Participants' emphasis on critical engagement with online content suggests that health promoters and policymakers should prioritise developing young people's digital literacy rather than relying on restrictive approaches that may limit access to important resources. Investing in education that equips young people with the skills to critically assess and navigate online sexual health content is a more effective approach than prohibitive measures that fail to account for young people's lived experiences of digital engagement.

Digital sexual literacy can be understood as the skills and capacity to confidently navigate and engage with digital spaces in ways that enable learning and communicating about sexual health and sex and relationships [26]. Indeed, digital spaces work to support young people in developing the skills and knowledge needed to explore sex, relationships, and identity through facilitating access to a collection of resources, formal and informal, on a variety of platforms and involving a

range of communication modes. Having a range of information and perspectives online enables young people to exercise their judgement, critically reflect and build their skills and knowledge in important ways [28] that are in accordance with this understanding of digital sexual literacy. These skills are important to ensuring capacity to engage with digital spaces throughout life, supporting lifelong education and learning beyond formal school settings. In particular, it is important to acknowledge the gap that young adults—who may have had inadequate access to school-based RSE or have now outgrown formal RSE—face in relation to relationships and sexuality knowledge [32]. Health promotion strategies extend beyond school-based interventions [32] and consider targeted ways to build digital sexual literacy for young adults in the spaces they already engage with, including options such as community-driven digital campaigns and partnerships with online platforms and authorities that young adults trust. Strengthening digital literacy among young adults not only improves their immediate access to topics of relationships and sexuality but also equips them with lifelong skills in critically assessing and engaging with sexual health content.

For health promoters, it is important to attend to the ways that created content may be interpreted based on measures of digital culture, rather than just informational quality. Additionally, health promotion needs to follow where young people are at online rather than trying to create content that competes for attention. Health promotion that supports digital sexual literacy extends beyond the provision of static health information, but engages with existing content and online spaces, and equips young people with the skills to move effectively between these multiple sources. Interaction is particularly salient for digital health promotion [31] and it is important to consider both what digital tools foster interaction and what interaction means for young people in online spaces. In particular, digital sexual health promotion was described by both young people and key informants as a process of engaging with young people rather than creating specific content for young people to consume. This involves an understanding of online spaces as places that young people gather, meet, lurk and share ideas. While there are specific aspects of digital tools that can be deployed to encourage interaction, it is critical that health promoters understand the ways that interaction is fostered through attending to broader notions of peer involvement and authenticity [10]. In particular, this involves ensuring that health promotion efforts contribute to existing formal and informal sexual health messaging, rather than operating as external interventions or trying to prevent access to other content [27, 28]. Indeed, online sexual health promotion initiatives seeking to engage with young people should be understood as a contribution to this broader space and working alongside or within these informal spaces [27]. This could involve partnerships with trusted content creators and online communities, co-designing resources with young people to enhance authenticity, and leveraging interactive formats such as Q&A sessions, peer-led discussions, and participatory digital campaigns. By embedding health promotion within existing digital cultures, rather than competing with them, health promotion strategies can more effectively support young people in critically engaging with and navigating online content.

4.1 | Limitations

This study offers nuanced insights into how young people navigate, assess, and interact with online information, ensuring that their voices are centred in the discussion. While the qualitative, small-scale nature of the study limits generalisability, it provides an in-depth understanding of the complexities of digital sexual health engagement. These findings contribute to best practice discussions on developing effective digital health promotion strategies.

5 | Conclusion

In order to have effective health promotion initiatives and policies that support young people in developing their sense of sex, relationships, and self, it is necessary to have a strong understanding of the ways in which young people navigate and interact with digital content more broadly. This includes recognising the ways that young people traverse online spaces in ways that are inextricably linked with offline spaces, identity and community. Access to a wide range of digital content about sex and relationships helps young people to reflexively navigate topics that are relevant to them and critically reflect on topics about sex and relationships. Effective health promotion is located as part of this complex nexus and contributes to young people's available resources, wherein access to digital content is central for developing digital sexual literacy.

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Ethics Statement

This project obtained ethics approval from La Trobe University Human Research Ethics Committee (HEC21223), ACON Foundation (NSW, 202130) and Thorne Harbour Health (VIC, THH/CREP 21-012).

Conflicts of Interest

The authors declare no conflicts of interest.

Data Availability Statement

Research data are not shared.

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Supporting Information

Additional supporting information can be found online in the Supporting Information section.