GROWING UP IN THE DIGITAL INFORMATION ECOSYSTEM

What Young People and Communities Can Teach Us About Health Literacy

Professor Samantha Thomas
Institute for Health Transformation | Deakin University

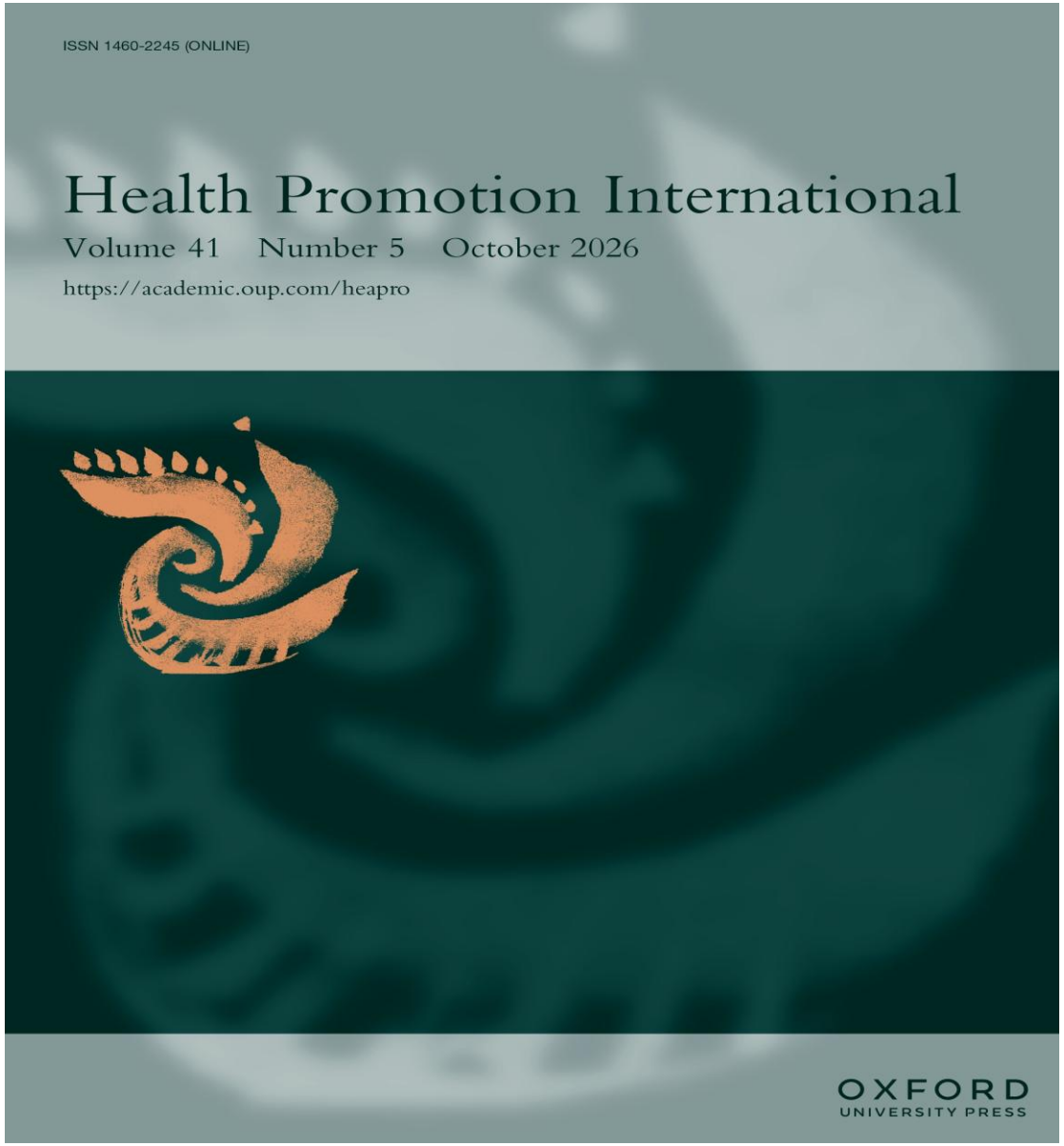
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Meet the PolReg team

Policy + Regulation Team (PolReg)

Examining how corporate power influences politics, policy and regulation.

THE TEAM



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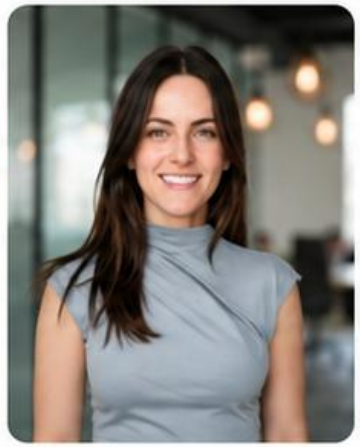


Dr Hannah Pitt

OUR PhD STUDENTS



Katrina Wood



Monique Murray



Sally Witchalls

Because sometimes the evidence is already clear.

The harder question is:

What is preventing governments from acting on it?

That is a central focus of the PolReg Team at the Evidence Exchange.

We are interested in the gap between evidence and action.



Why do major parliamentary and government inquiries sometimes produce strong recommendations — but little policy change?



Why are reforms delayed, weakened or abandoned?



And whose interests shape what governments ultimately decide is politically possible?

Rethinking risk

We often focus on



individual choices

Focusing on personal responsibility and decision-making.



risky behaviours

Looking at behaviours such as gambling frequency, spending and chasing losses.

But we also need to ask



who creates the conditions for risk

Examining the role of industry practices, product design, marketing and regulation in shaping risk.



who benefits from those risks

Considering the commercial, political and economic interests that profit from gambling-related harm.



Risk is not only about individual choices —
it is also shaped by commercial and political decisions.

Harmful industries shape health



Tobacco



Alcohol



Vaping



Fossil fuels



Big Tech



Gambling



Junk food

These industries do not just sell products —
they shape the environments that influence health.

Commercial and digital determinants of health are deeply connected

Commercial determinants of health

Businesses and commercial activities influence health through the products they sell, how they market them, and their influence on policy and information.


Tobacco


Alcohol


Vaping


Fossil fuels


Big tech



Gambling


Junk food


Pharmaceuticals

Commercial and digital strategies work together to influence what people see, think do and normalise

Digital determinants of health

Digital technologies and environments influence health by shaping what we see, believe and do, and creating new opportunities for commercial influence.


Social media platforms



Algorithms and personalisation


Influencer marketing



Targeted digital advertising


Streaming, gaming and online entertainment


Online health information


Artificial intelligence and chatbots


Access to digital technologies and services

TOGETHER THEY CAN LEAD TO:

- Increased consumption of harmful products
- Normalisation of harmful behaviours
- Misinformation and confusion about health
- Greater exposure and earlier initiation (especially for children and young people)
- Worse physical and mental health outcomes
- Widening health inequalities

The Information Environment is a Determinant of Health

Health Promotion International 2025, 41, daaf255
https://doi.org/10.1093/heapro/daaf255
Editorial

OXFORD

Editorial

Trust is a verb: how to reimagine confidence in health systems

SHIFT 1: PROFESSIONAL EXPERTISE MUST MEET LIVED EXPERIENCE AS A PARTNER

SHIFT 2: CONVERSATION ABOUT HEALTH MOVES AT A SPEED THAT STRAINS UNDERSTANDING

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Health Promotion International 2025, 40, daaf165
https://doi.org/10.1093/heapro/daaf165
Editorial

40 2026 OTTAWA CHARTER

OXFORD

Editorial

Health promotion in the algorithmic age: recognizing the information environment as a determinant of health

THE INTERNET HAS FUNDAMENTALLY CHANGED SOCIETY AND HEALTH

When the Ottawa Charter was adopted in 1986, the internet, barely born in 1983, was not part of everyday life.

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Trust, algorithms and digital systems shape what people see, believe and do.

The information we encounter is not neutral.



Digital environments are shaped by

- Commercial interests
- Algorithms and platform design
- Social relationships and trust
- Political decisions



These forces influence

- What information is produced
- What information is promoted
- What information is encountered
- What information is trusted



Information environments do not simply inform — they also shape what people see, believe and do.

Purnat et al. (2025) | Health promotion in the algorithmic age

Three determinants. One information ecosystem.



Commercial

Profit, marketing and corporate practices shape what information is produced and promoted.



Digital

Platforms, algorithms and data systems shape what information people encounter and engage with.



Political

Governance, regulation and participation shape whose interests are protected and whose voices count.

These determinants interact to shape what people see, trust and can act upon.

The Digital Determinants of Health



Health Promotion International, 2025, **40**, daaf033
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Editorial

OXFORD

Editorial

Health promotion and the digital determinants of health

The concept of determinants of health has evolved significantly over time. The Industrial Revolution marked a shift in thinking about health determinants, moving from a focus on individual factors to a broader recognition of how social, economic, and environmental conditions shape population health. The Digital Revolution and the growing role of artificial intelligence (AI) are broadening our understanding of health determinants further, raising new questions about what influences health and well-being in the modern world.

The health promotion community has always been at the forefront of efforts to address the determinants of health, advocating for multisectoral action and policy responses that tackle structural inequities and challenge the policies of health-harming industries. In the face of new opportunities and problems presented by digital transformations, health promotion research has also come called to lead literacy on addressing the digital determinants of health (Kickbusch and Holly 2023).

DIGITAL DETERMINANTS OF HEALTH: A BRIEF HISTORY

Health promoters have been considering the significance of internet access and digital technologies as determinants of health for over a decade. (Baum et al. 2014, Clyburn 2016) Schamroth and Razzaki noted that "if we accept that digital technology is affecting our behaviour and social interactions, decades of public health research tell us it also plays a role in determining our health". (Schamroth and Razzaki 2019).

The influence of digitalization on the named determinants of health emerged some as of particular relevance for researchers, with some even proposing digital connectivity and digital literacy as "newer social determinants" (Sheon 2018). Several attempts to have been made to conceptualize the digital domain of health. (Rice and Sara 2019, Dyar et al. 2022). Similarly, the organization on some identical closet commercial (Buchanan et al. 2018, Stoeng et al. 2021).

After considering the multiple direct and indirect ways that health, other technologies, that can all are encompassed, Health Promotion International's special Focus on DDoH. Contributors were invited to explore how different determinants and influences relationships between digital and other

RAPID ADOPTION OF A NEW CONCEPT

The concept of DDoH has been readily adopted by academics, policymakers, and international organizations, indicating its usefulness in encapsulating the various opportunities and challenges for health presented by digital transformations. In June 2023, *Health Promotion International* became the first journal to create a special collection on DDoH, bringing together relevant publications from as far back as 2011 ("Collection: Digital Determinants of Health" n.d.).

Whilst the new terminology has quickly been taken up by the global health community, DDoH is often interpreted narrowly. For example, in guidance developed for policymakers and health professionals, DDoH is used to refer only to technological factors that shape health systems and health care, especially the divides in digital connectivity and digital literacy that limit the expansion of digital health solutions. (World Health Organization 2021, OECD 2023, World Bank 2023) The health impacts of digital transformations expand far beyond health systems: the digital world is an increasingly important setting in which health is created. A more holistic interpretation of DDoH needs to consider all the characteristics, features, uses, and governance of digital technologies and digital ecosystems that influence health-related behaviours, health outcomes, and healthcare delivery.

Digital determinants can impact health directly and also through their interaction with other social, political, and commercial determinants. A recent study and expert consultation led by the WHO Regional Office for Europe and the London School of Economics identified 127 health determinants that have arisen or been changed in the digital age, including 37 digital determinants. (van Kessel et al. 2025) The findings from this project reinforce the formation of digital determinants as a separate category and highlight the need for further research into the evolving interlinkages between different determinants of health.

THE NEED TO ADDRESS DIGITAL AND OTHER DETERMINANTS TOGETHER

Deepening our understanding of the relationship between digital and other determinants of health is the objective of *Health Promotion International*'s special issue on DDoH. Contributors were invited to explore how different determinants are influencing people's ability to benefit from digital



THE LANCET

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"The stakes are generational. The soft and hard digital infrastructures being consolidated today will shape the health trajectories of children and young people for decades."

See Series page 1745

Comment
Product safety and liability law in governing digital determinants of health
See page 1679

World Report
Alcohol control policies reducing harms
See page 1699

Perspectives
Practical legislation for healthier societies
See page 1699

Correspondence
Prioritising the future of youth as an urgent political choice
See page 1699

Articles
Conversational diagnostic artificial intelligence in ambulatory primary care
See page 1737

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Founded 1823 – *Published weekly*

Digital systems, infrastructures and platforms are shaping the health of young people.

Digital determinants of health influence health and wellbeing



Social media and online platforms

Digital platforms shape how people connect, communicate and access health information.



Algorithms

Algorithms help determine what information, ideas and content people see online.



Digital advertising and influencer marketing

Targeted advertising and influencers can shape what people buy, believe and consider normal.



Artificial intelligence and online information

AI tools are changing how people search for, receive and interpret health information.



Access to digital technologies and services

Access to devices, internet and digital services can improve health, but unequal access can deepen inequalities.



Digital environments can improve health — but they can also create new risks and inequalities.

Digital platforms shape health information environments



Vast reach and influence

Digital platforms amplify health information, shaping what people see, believe and do.

Mixed quality and commercial interests

People encounter helpful, misleading and commercially driven content side by side.

This creates both opportunities and risks — and can widen existing health inequities.

Kickbusch & Holly (2023) | Holly et al. (2025)

When harmful systems shape children's futures

DEAKIN UNIVERSITY



Harmful commercial products

Tobacco, vaping, alcohol, gambling and unhealthy food industries expose children to products and marketing that can shape lifelong health risks.



Climate and environmental crisis

Fossil fuel industries contribute to pollution and climate change, threatening children's health, safety and future opportunities.



Growing inequalities

Children experiencing poverty and disadvantage often have fewer resources and protections to avoid harmful environments.



Children's health and futures



Digital environments

Social media, gaming, influencers and algorithms shape children's behaviours, identities, relationships and understanding of what is normal.



Big Tech and corporate power

Technology companies shape children's online experiences through platforms designed to capture attention, collect data and generate profit.



Limited power and protection

Children have little influence over the commercial, technological and political decisions that shape their lives and futures.



Children's futures are being shaped by powerful commercial, digital and political systems — often without their interests, rights or wellbeing at the centre of decision-making.

But are we really listening to young people?



We often measure

- Exposure, use and harms
- Patterns of behaviour
- Effects on health and wellbeing



But do we ask?

- What do young people see?
- How do they engage with these environments?
- What meanings do they make?



And do we involve them?

- What do they think should change?
- What protections do they want?
- What should platforms, governments and public health do?



If we only measure impact, we miss young people's expertise about how digital environments work — and what should be done.

Communities have valuable knowledge about risk

Lived experience

People understand the real-world impacts and workarounds.



Local context

Communities know the places, systems and conditions that create risk.



Practical solutions

People can identify feasible, acceptable and culturally relevant ways to reduce harm.



Communities are not just sources of data — they are partners with expertise that can inform change.

What if we started by listening rather than correcting?



We often ask

- What do people need to know, understand or do?
- How can we improve individual knowledge and skills?



But communities can teach us

- How health information is experienced, interpreted and trusted in everyday life
- How systems and environments shape health choices, opportunities and risks

Being consulted is not the same as being heard — community knowledge needs to influence decisions.

Gambling is a Global Public Health Issue

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Perspectives

OXFORD

Perspectives

Protecting children and young people from contemporary marketing for gambling

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Abstract

Around the world, children are being exposed to intensive marketing for gambling products. This normalizes perceptions that gambling is essentially a harmless form of entertainment, despite mounting evidence of the harms it causes. Young people and their parents are supportive of strategies to protect children from being exposed to gambling marketing. Yet existing regulatory efforts are inconsistent and inadequate, and have not protected children from exposure to the many forms of marketing now being developed and exploited by the gambling industry. We outline existing knowledge about strategies used by the gambling industry to market its products, with a specific focus on the potential impact of gambling marketing on young people. We provide a definition of gambling marketing and outline the different forms of promotion that are currently used to market gambling, current regulatory responses, and the impact of marketing on children and young people. We then argue that a comprehensive public health approach to gambling is urgently required, which must include effective action to limit the influence of marketing for gambling products, while recognizing that it is never possible to insulate children entirely from their reach.

Lay summary

- Gambling marketing has become particularly pervasive and aligned with major cultural activities such as sport.
- Evidence clearly shows the normalizing impact of marketing on children and young people's gambling attitudes and consumption intentions.
- Current regulatory efforts are inadequate and have not protected children and young people from exposure to a range of different forms of marketing.
- Young people and their parents support the implementation of significant restrictions on gambling marketing.
- The array of marketing mechanisms used by the gambling industry should be addressed as part of a comprehensive public health policy approach to protect children from gambling harms.

Keywords: youth gambling, advertising, public health, children, determinants of health

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Editorial

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Editorial

Global public health action is needed to counter the commercial gambling industry

A rapidly transforming health-harming industry

The commercial gambling industry has become one of the most innovative health-harming industries of recent times. New digital technologies and affordable internet have enabled the rapid transformation of this industry and its ability to offer many high-intensity gambling products across the world (Akanle and Fageyinbo, 2019). These are readily accessible in land-based venues and online via mobile devices which are constantly available 24 hours a day. In low- and middle-income countries (LMICs), mobile betting, coupled with the weak or complete absence of regulatory enforcement also adds to gambling engagement, particularly among youth (Okot *et al.*, 2019; Sichali *et al.*, 2023). Gambling harms can destroy lives, and the liberalization of gambling, intertwined with the highly skilled gambling industry means that harms can now occur even more rapidly and at a larger scale. There is ample evidence to show the significant negative health and social consequences of gambling not only for individuals who gamble, but also for families and communities. These include financial difficulties (Marko *et al.*, 2023), family violence (Bramblila *et al.*, 2023), homelessness (Vandenberg *et al.*, 2022), criminality (Binde *et al.*, 2022), psychological distress (Sinclair *et al.*, 2015), and comodities with substance misuse (Skaal *et al.*, 2016), and suicide (Mironneau and Nikkinen, 2022), as well as disproportional health care utilization and associated economic costs (Cowlishaw and Kessler, 2016).

Governments have been unprepared and complacent in dealing with the impact of rapid technological developments in the gambling industry. The absence of global approaches and conventions has also enabled the gambling industry to transcend geographical borders (Saeed *et al.*, 2023). For example, African countries are strategically important growth markets for such health-harming industries (Bitanihirwe *et al.*, 2022). Recent years have seen the expansion and diversification of commercial gambling in LMICs, as exemplified in Sub-Saharan Africa (SSA), where acute concerns have been raised about the role of Global North operators in capitalizing on a 'regulatory void' relating to online gambling and its promotion (Sichali *et al.*, 2023). However, challenges faced by most LMICs include resource constraints, competing priorities, power imbalances and the inability to effectively regulate health-harming industries and the risks they pose. SSA for commercial gambling, in most countries these are inconsistent, lack transparent public reporting and require strengthening to stay abreast of advances in the industry (Sichali *et al.*, 2023).

The commercial gambling industry operates from a similar playbook to other health-harming industries, such as tobacco and alcohol (Cowlishaw and Thomas, 2018; Ulicanlar *et al.*, 2023). This involves delaying and circumventing regulation, developing innovative products and promotions, appealing to new markets, co-opting the production of research and knowledge and capturing 'public health' responses through corporate political activities (van Schalkwyk *et al.*, 2021). The digital determinants of health are also clear in relation to the gambling industry (Kickbusch and Holly, 2023). New technologies have enabled the industry to rapidly *'create doubt and frame the public debate with devastating consequences'* for community health and wellbeing (Thomas and Daube, 2023, p. 2). As a result, the products, practices and promotions of the industry, coupled with poor regulatory responses from

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Commercial gambling harms cross borders and require coordinated public health action.

Young people are immersed in a normalised gambling environment

Gambling is everywhere online

Young people see gambling content across social media, streaming, sport and influencer platforms.



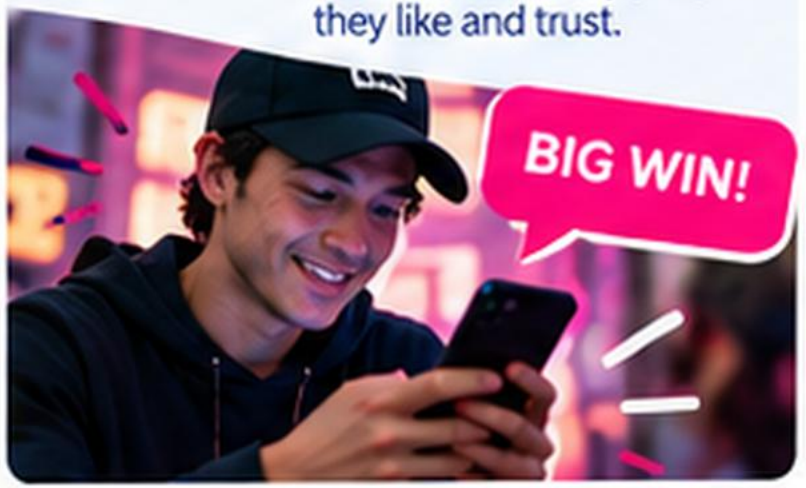
It feels normal and part of youth culture

Gambling is embedded in sport, gaming, memes and everyday social media content.



Influencers and sporting identities have a big impact

Young people see gambling as fun, social and aspirational when promoted by people they like and trust.

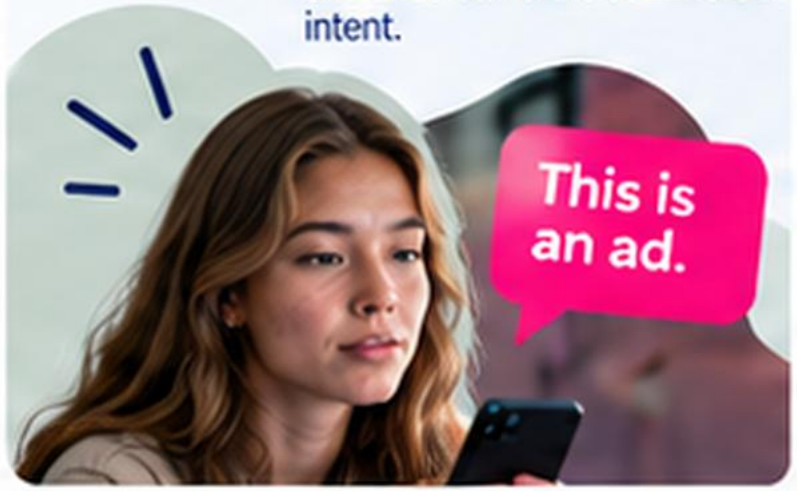


Young people are exposed to pervasive, sophisticated and normalised gambling marketing in their digital environments.

Young people recognise commercial strategies — but remain influenced

They can see it's marketing

Many young people recognise gambling content as advertising and understand the commercial intent.



But awareness does not eliminate influence

Even when they recognise it as marketing, young people still report it shapes their attitudes and behaviours.



Emotional and social drivers matter

Gambling content is linked to excitement, social connection, belonging and identity, particularly through sport and influencers.



Young people understand the commercial nature of gambling content, but it still influences how they think, feel and act.

Recognising commercial persuasion does not eliminate its influence.



What young people recognise

- Promotions are designed to persuade.
- Influencers and sporting identities can make messages feel familiar.
- Repeated exposure can normalise gambling in everyday culture.

Awareness matters. But young people cannot control the commercial environment around them.

Children's views about gambling marketing

Pitt et al. BMC Public Health (2024) 24:2004
https://doi.org/10.1186/s12889-024-19331-x

BMC Public Health

RESEARCH Open Access

"It's changing our lives, not for the better. It's important that we have a say". The role of young people in informing public health and policy decisions about gambling marketing

Hannah Pitt[1*], Simone McCarthy[1], Melanie Randle[2], Grace Arnot[1], Mike Daube[3] and Samantha Thomas[1,4]

Abstract

Background Marketing has a significant impact on the normalisation of gambling for youth across the globe. This has included shaping positive attitudes towards gambling, as well as increasing the social and cultural acceptance of gambling – particularly aligned with valued activities such as sport. Because of this, public health experts argue that gambling marketing poses a significant risk to the health and wellbeing of youth. While young people are increasingly exposed to, and impacted by marketing for gambling products, they are rarely consulted about policy issues and options. This study aimed to explore young Australians' perceptions of current policy responses to gambling advertising, whether they thought young people should be involved in discussions and decisions about gambling marketing regulations, and their perceptions of the duty of governments to protect young people from gambling industry marketing strategies.

Methods Qualitative focus groups (n=22) were held with n=64, 12–17 year olds in the Australian states of Victoria and New South Wales. Participants were asked to reflect on current gambling policies, particularly relating to marketing, what they thought should be done about gambling marketing, and if and how young people should be included in public health responses to gambling. An interpretivist 'Big Q' approach to reflexive thematic analysis was used.

Results Young people highlighted the need for more effective regulations around the content and frequency of gambling marketing. They also wanted to see more realistic representations of the negative impacts of gambling to counter persistent positive commercial marketing messages. Most thought that young people should be given an opportunity to have a say about responses to gambling due to their unique experiences. Participants identified mechanisms to increase young people's engagement in decision making, such as direct lines of communication to different levels of government, involvement in research, and diversifying ways of engagement. Specific recommendations included more regulatory action such as bans on gambling advertising.

Conclusions Creating formal structures that facilitate the inclusion of young people's perspectives in decisions made about gambling can result in more innovative and effective strategies to prevent the harms from gambling industry products, promotions, and practices.

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BMC

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Article

OXFORD

Article

Young people's views about the use of celebrities and social media influencers in gambling marketing

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Abstract

Young people's exposure to gambling marketing has had a clear impact on their gambling attitudes, risk perceptions and consumption intentions. Celebrities and social media influencers (SMIs) are increasingly used by the gambling industry in a wide range of promotions. While there is evidence that these types of promotions are influential in shaping young people's attitudes towards other harmful products, there is limited evidence in relation to gambling. Qualitative focus groups ($n = 22$) with $n = 64$, 12–17 year olds were conducted in Australia. These investigated young people's exposure to celebrity and SMI marketing of gambling and the influence they perceived this marketing had on young people's gambling attitudes. Reflexive thematic analysis was used to deconstruct the themes from the data. First, young people perceived gambling attitudes. Reflexive deductive analysis was and recall of gambling advertisements because they were attention grabbing and familiar. Second, young people thought that celebrities and SMIs increased the trust, legitimacy and social acceptance of gambling. Third, the use of celebrities and SMIs lowered the perceptions of risk associated with gambling. Lastly, there were suggestions to reduce the impact of celebrity and SMI gambling promotions on young people, such as bans and restrictions. This study highlights the importance of a comprehensive approach to preventing young people's exposure to gambling marketing, that not only considers imposing stronger regulations to restrict the way the gambling industry is allowed to promote its products, but also aims to counter the novel ways the gambling industry attempts to appeal to children and young people.

Keywords: gambling, marketing, children, young people, advertising, social media, celebrity, social media influencers

BACKGROUND

The commercial gambling industry is one of the most innovative health-harming industries of modern times, posing a significant threat to public health (Badu *et al.*, 2023; Glozah *et al.*, 2023; Thomas *et al.*, 2023a). While the commercial gambling industry operates from a similar playbook to other health-harming industries such as tobacco and alcohol (Cowlishaw and Thomas, 2018; de Lacy-Vawdon *et al.*, 2023), governments have rarely recognized the tactics of the gambling industry as a public health issue (van Schalkwyk *et al.*, 2021; Thomas *et al.*, 2023a). Consequently, there have been limited efforts outside of personal responsibility strategies to protect communities from harm (Miller *et al.*, 2016; van Schalkwyk *et al.*, 2021; Arnot *et al.*, 2023d; Badu *et al.*, 2023). The absence of strong global regulatory frameworks and conventions has also enabled the gambling industry to develop a range of novel products with widespread appeal to a new generation of younger gamblers, particularly when aligned with popular activities such as sport (Sichali *et al.*, 2023; Thomas *et al.*, 2023c). Digital transformations have revolutionized how the gambling industry is able to *'promote its products, gain publicity, attract new customers, shape*

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Children recognise gambling marketing — and want stronger action to reduce its influence.

Young people want strong action on gambling marketing

Reduce exposure

Young people want tighter restrictions on gambling advertising across social media, sport and influencer content.



Protect younger audiences

They support stronger age verification, platform accountability and reducing gambling content in spaces where young people spend time.



More honest information

Young people want clear, independent information about the risks, and for influencers to be more transparent about paid partnerships.



Young people are calling for stronger regulation, platform accountability and honest information to create safer digital environments.

Young people want to be part of the solution

They have ideas for change

Young people suggest practical solutions, including content warnings, ad-free spaces, algorithm changes and clearer labelling of paid content.



They want to be consulted

Young people want genuine opportunities to share their experiences and help design more effective and relevant solutions.



They want a healthier digital future

Young people want digital environments that support their health, wellbeing and opportunities, not normalise gambling harm.

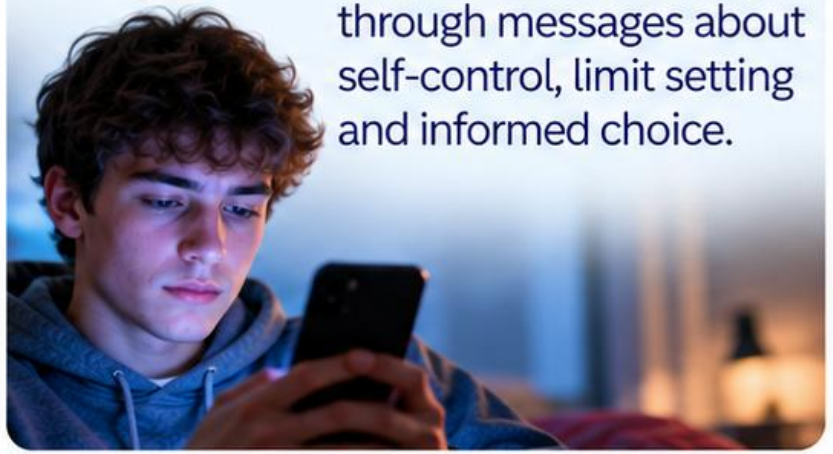


Young people bring valuable insights and practical ideas – and they want to be meaningfully involved in shaping solutions.

But the response still focuses on the individual

The usual response

Teach young people to 'gamble responsibly' through messages about self-control, limit setting and informed choice.



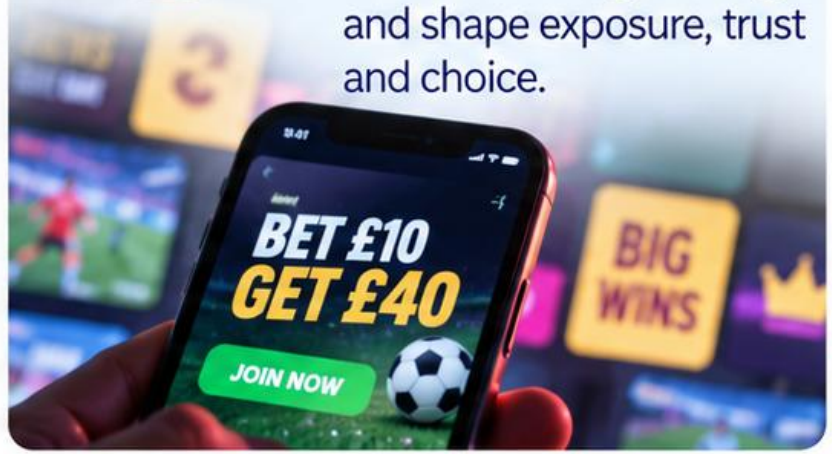
What this assumes

That harm is mainly a result of poor decisions, lack of knowledge or failure to manage risk.



What it can miss

The commercial, digital and political environments that normalise gambling and shape exposure, trust and choice.



'Gamble responsibly' shifts attention onto individuals — and away from the systems that create harm.

Youth are accessing health information online.

Health Promotion International, 2025, **40**, dasf079
https://doi.org/10.1093/heapro/dasf079
Article

OXFORD

Article

How Tay adolescent girls and their female carers navigate sexual and reproductive health information

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Abstract

Achieving equity in sexual and reproductive health (SRH) outcomes for adolescents across geography, ethnicity, and gender remains a global public health challenge. Access to accurate information is a basic and important determinant of SRH, but for many young people, social norms and expectations limit what they can access. We know little about how SRH knowledge is accessed in the Asia Pacific, a region diversely rich in culture and related norms, and with persistently wide inequities in SRH outcomes. This study conducted face-to-face interviews with 20 adolescent girls (16–18 years) and their female carers (n = 20) from the Tay community—the largest ethnic minority group in Vietnam. Reflexive thematic analysis was used to construct topics for adolescent girls and their female carers. Second, SRH topics were considered sensitive and personal inhibiting interpersonal communication about SRH between women, their families, and across generations. Third, adolescent girls were accessing conflicting SRH information from a diverse range of sources, and both adolescent girls and female carers were reliant on SRH sources online. There is an opportunity to ensure reliable SRH information is available through a variety of sources: by focussing content and delivery of comprehensive sexuality education on pregnancy prevention at the high school level, contextualizing community-based health promotion to address sensitivities around SRH, and expanding national-level programmes to provide online safety skills and digital literacy for adolescents and parents.

Keywords: adolescent girls; female carers; sexual and reproductive health information; social norms; intergenerational communication

Contribution to Health Promotion

- Examined how adolescent girls from the Tay community and their female carers navigate social expectations to access sexual and reproductive health (SRH) information.
- Highlighted the SRH topics that adolescent girls and their female carers in this community feel are most important.
- Showed that SRH is a sensitive and personal topic that is not openly discussed.
- Highlighted the conflicting and confusing information about SRH between social settings and social media.
- Highlighted the urgency to localize SRH policy responses where service options are limited.

INTRODUCTION

Equitable sexual and reproductive health outcomes are a global priority for adolescent girls

Achieving equity in sexual and reproductive health (SRH) for adolescent girls (10–19 years) (WHO 2024) remains a priority for global action. This is reflected in Sustainable Development Goal 3.7 (United Nations n.d.) which aims for universal access to SRH care services with specific indicators for adolescent girls (Hepp *et al.* 2019). An important consideration of this priority is addressing the intergenerational impact of poor

When conversations are difficult, where do girls turn?



What shapes access to information?

Girls and carers described stigma, embarrassment and limited opportunities for open discussion about sexual and reproductive health.



Why online sources matter

Digital environments offered privacy, convenience and a way to seek information that felt difficult to discuss face to face.



What this reveals

Turning online can be a response to gaps in trusted interpersonal and institutional support.



Online information-seeking can reflect agency — but also unmet needs in families, schools and services.

Burns et al. (2025) | Health Promotion International

When information conflicts, misinformation becomes a risk.



What girls encountered

Conflicting messages across social media, online sources and people around them.



Why it matters

Not all information is accurate or safe. Girls may lack support to evaluate what they find.



What research shows

The study identified exposure risks, but did not measure subsequent health decisions or harm.



Access to more information is not enough — young people need trustworthy information and support.

Burns et al. (2025), *Health Promotion International*.

What do girls and carers teach us about health literacy?



Move beyond individual skills

Health literacy is shaped by culture, gender norms, family communication and institutional support — not just by what individuals know.



Improve the environment

Support culturally relevant sexuality education, trusted online resources and safe opportunities for discussion in families, schools and services.



Learn from communities

Girls and carers can identify the silences, barriers and supports that shape information-seeking. Their perspectives should inform policy and practice.



If we want healthier digital information environments, we need to learn from the people using them.

Burns et al. (2025) | Health Promotion International

Australia has changed the rules of digital participation.



What the policy does

From December 2025, specified social media platforms must take reasonable steps to prevent Australians under 16 from holding accounts.



What it aims to do

Reduce exposure to harmful content, cyberbullying and the pressures of constant connection by shifting responsibility towards platforms.



What is important to remember

This is an account restriction, not a total ban on viewing all online content. Implementation and enforcement are still evolving.



Protecting young people matters — but age restrictions are only one part of creating healthier digital environments.

Australian Government | eSafety Commissioner

Protection matters. But whose voices count?



Potential benefits

Some young people and families may welcome stronger protections from harmful content, pressure and unwanted contact.



Important concerns

Restrictions may also affect access to information, peer connection, support and participation — especially for mental health and sexual health.



The participation question

If policies reshape young people's digital lives, young people should be involved in evaluating impacts and shaping what happens next.



Good policy should protect young people — and listen to them.

Restricting access is one response. Changing the system goes further.



Commercial drivers of harm

Algorithmic design, targeted advertising, influencer marketing and data extraction shape what young people see and how platforms profit from attention.



What stronger governance means

Healthier digital environments require platform accountability, regulation of harmful commercial practices and access to trustworthy information and support.



What health promotion can add

We need to move beyond access restrictions alone and work with communities to design safer, fairer digital environments.



A healthier digital future needs regulation, trusted support and meaningful youth participation.

Digital governance | public health

What if the future of health literacy started with listening?



Why listening matters

Communities understand how digital, commercial and political environments shape their everyday lives.



What communities offer

They can identify what information feels trustworthy, what harms they encounter and what support they need.



What must change

Health promotion must move beyond correcting individuals and work with communities to transform unhealthy information environments.



Young people are not just audiences for health information — they are partners in creating healthier information environments.

Health literacy must move towards structural change.

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Editorial

Health literacy and the Sustainable Development Goals—calling for systemic progress beyond individual responsibility

Ten years ago, the World Health Organization's Shanghai Declaration placed health literacy at the heart of the Sustainable Development Goals (SDGs) agenda (World Health Organization 2016). The Declaration linked health literacy explicitly to equity, empowerment, education, and action on the determinants of health. A decade later, this vision is increasingly urgent. Progress towards the SDGs has been slow and uneven, prompting renewed attention to the conditions that enable people and communities to achieve better health and wellbeing (World Health Organization 2025, pg 2). Just 36% of the 139 assessable SDG targets are on track or making moderate progress, while 15% have regressed (United Nations Department of Economic and Social Affairs 2026, pg 2). Ongoing geopolitical conflicts, colonial legacies, the impacts of the climate crisis, and economic pressures continue to widen inequalities between and within countries, with the greatest burdens falling on populations already experiencing disadvantage (Persaud *et al.* 2021, Freeman *et al.* 2025, Rad 2025).

Amid these developments, health literacy is again being recognized as an important public health goal for sustainable development, with growing emphasis on empowerment and critical engagement rather than individual comprehension alone (Nutbeam 2025). This is increasingly important as individuals, families, and communities are expected to navigate complex health systems, climate-related emergencies, and digital and commercial environments shaped by broader social, political, and economic systems (Jochem *et al.* 2022). While health promotion should focus on strengthening individuals' personal health literacy, it must also address organizational and system-level health literacy capacities across the settings and environments of everyday life (Sorensen *et al.* 2021). Progress towards the SDGs will remain constrained if public health programmes and health systems are unnecessarily complex, difficult to navigate, or themselves create barriers to health and wellbeing. Identifying and reducing these systemic barriers is therefore critical to improving health and health equity (Wolandes and Paasche-Orlow 2007, Sorensen *et al.* 2021). This requires a shift away from an emphasis on individual capability alone.

To date, much health literacy activity has focused on whether people have the knowledge and skills to understand information, navigate health services, interpret risk, identify misinformation, and make informed choices about their health (Sorensen *et al.* 2012, Nutbeam 2025). While individual skills are important, this may have drawn focus away from the systems, structures, organizations, and environments that shape both the choices available to people and their capacity to act on them (Paasche-Orlow *et al.* 2006, The Lancet 2022). If health literacy remains myopically focused on individuals, it risks shifting responsibility away from institutions and systems, recasting problems created by complex services, unhealthy environments, and poor-quality information as deficits in people's knowledge or capability (Santana et al. 2021).

Health promotion has long recognized that health is shaped not just by individual knowledge and behaviour, but also by social, economic, commercial, environmental, and political conditions, and by the distribution of resources and power (Thomas *et al.* 2025). A person may access health information but still be unable to act on it because services are inaccessible, healthy options are unaffordable, living or working conditions constrain choice, commercial marketing promotes harmful products, or digital environments amplify misleading information. These barriers are central to both health literacy and health equity.

Approaches centred primarily on individual and community behaviours may therefore have limited capacity to address health inequities without greater attention to the upstream conditions that produce them (Underwood et al. 2025). This is particularly important in health promotion because responsibility, equity, and power are closely connected (Abimbola 2026). People do not enter health systems, educational settings, or information environments on equal terms. Resources and opportunities—including education, income, material circumstances, language, geography, and social support—are unevenly distributed, shaping health inequities (World Health Organization 2025). These differences shape people's opportunities and capacities to navigate health information, services, and environments (Paasche-Orlow and Wolf 2007, Nutbeam and Lloyd 2021, Hidalgo *et al.* 2026). Importantly such inequalities can emerge early in life, as people enter education and other social systems with unequal access to resources and opportunities (Orkan 2019). Health literacy is therefore socially patterned by unequal access to resources and opportunities across the life course.

Recognizing this is critical to understanding the contribution health literacy can make to achieving the SDGs. Doing so requires moving beyond individual capability to address the systems and conditions that shape health literacy and people's possibilities for action. Organizational health literacy makes this responsibility explicit by focusing attention on what organiations must do to reduce complexity and create more accessible, responsive, and equitable environments (Brach 2017, Famanova *et al.* 2018). This includes removing barriers and creating technology