



Young people's priorities for digital sexual health promotion: findings from a peer engagement project (**CONUNDRUM Action**)

## What did we do and why did we do it?

Young people often look online for sexual health information and support but cannot always find what they need. In an earlier study<sup>1</sup>, young people told us that while they trust the scientific accuracy of information on official health websites, such as those by the NHS, it is often not presented in ways that are engaging or accessible. Additionally, they do not always trust that they are receiving the “full picture” from these sources about topics such as side effects of contraception or STI testing.

To better understand how to improve digital sexual health promotion for young people, the CONUNDRUM Action Group – which includes young people, researchers, and professionals working in NHS Scotland and Scottish Government – sought young people’s views on:

- What makes online sexual health information engaging for young people?
- How do young people decide if online sexual health information is trustworthy?
- What digital tools and features might young people use to support their sexual health, and why?

## How did we do it?

We conducted 8 online discussion workshops with 35 young people aged 16–25 who were recruited via youth organisations. Participants were a mix of genders<sup>2</sup>, from multiple ethnic backgrounds, and included LGBTQ+ young people, care-experienced young people and young people with disabilities.

Workshops were co-designed and co-led by five young “peer researchers” from the CONUNDRUM Action Group, supported by researchers from University of Glasgow.

## What did we learn?

Young people want online sexual health content that is:

- **Balanced:** Takes a holistic and comprehensive perspective on all aspects of sexual health, wellbeing and relationships, including positive dimensions of sexual experience, such as pleasure and consent, rather than a sole focus on risks related to sex (e.g. STIs, unintended pregnancy).
- **Inclusive:** The information, images and language used are inclusive of all people no matter their sexuality, gender, body type, relationship type, cultural background, type of sex they have, or if they are sexually active or not.
- **Relatable:** A supportive tone and content appropriately aimed at young people, including content co-produced with young people for young people (e.g. videos and blogs of real experiences).
- **Accessible:** Visually appealing, clearly presented and concise information that is easily viewed on either phones or laptops, easy to both browse and search for specific information, and has links to other trusted organisations and services for more help and advice.
- **Discreet:** Includes features that keep young people’s access to information safe and confidential, including private browsers and a button to leave quickly if needed.

<sup>1</sup>Lewis, Blake, et al. (2021) “Understanding young people’s use and non-use of condoms and contraception: A co-developed, mixed-methods study with 16-24 year olds in Scotland”. CONUNDRUM Final report. Available at: [https://www.gla.ac.uk/media/Media\\_781762\\_smx.pdf](https://www.gla.ac.uk/media/Media_781762_smx.pdf)

<sup>2</sup>13 women, 17 men, 3 non-binary people, and 2 who preferred not to disclose their gender.



## What makes online sexual health content trustworthy?

When young people evaluate online sexual health information for trustworthiness, they consider multiple factors such as the quality of its design and layout, credibility of the source, recognisable logos, transparency about who has written or curated the information and their professional legitimacy to do so. Although trust in NHS-produced information is generally high, it can be undermined if information appears incomplete, out-of-date (e.g. broken links to external websites), and is not pitched effectively for young people (e.g. overly clinical, or trying too hard to be youthful and fun). Young people often cross-check information from official health websites with other online sources (e.g. social media, other websites) and conversations with friends. If young people see that information has been co-produced with and for people their own age, such as personal accounts about using sexual health services, it can increase their confidence in the information and help them feel that they are not alone in their experiences.

## Young people's views on digital tools to promote sexual health

Young people shared their views on a range of digital tools and features that could be used to support their sexual health (see Annex at end of report for further detail). These included:

✉ online ordering of sexual health products (e.g. condoms, STI testing kits) for delivery by post

🧠 decision-making tools (e.g. to assess STI risk, or choose contraception methods)

📅 self-monitoring tools (e.g. apps to monitor STI symptoms, menstrual cycle)

📍 interactive maps of sexual health services with live information (e.g. on services offered and current waiting times for appointments)

💬 live chat messaging with a sexual health professional

📱 online peer support mechanisms (e.g. discussion forums, private messaging platforms, videos and blogs by young people about experiences relating to sexual health)

💬 digital mechanisms to provide feedback on services

🎮 games and interactive activities on sexual health topics

Young people described multiple benefits of these digital tools and features, including their potential ability to empower young people with information before interacting with a healthcare professional, such as a GP or nurse. Young people felt having access to knowledge would help prevent them from feeling judged and enable them to assess whether the information they were receiving was balanced and honest, particularly about the side effects of contraceptive methods. This was seen as valuable in the context of overstretched health services, where appointments can be hard to get and can feel rushed. Young people also highlighted how using digital tools and features could help avoid key barriers to accessing in-person services, such as long waiting times, travel time to a clinic, and having to speak to a health professional in-person. These factors were seen as important for all young people, but especially those living in rural or remote communities. Young people's concerns about accessing sexual health support digitally included the potential loss of a more personalised in-person

interaction with a health professional, fears that their confidentiality or data security may be breached, doubts about whether feedback provided digitally would be acted upon, and the potential for misinformation, harassment and exploitation within online peer support forums.

Published May 2023.

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## Recommendations to improve digital sexual health promotion for young people

- **Involve** young people in reviewing existing digital resources and co-developing new resources.
- **Build** opportunities to support young people's digital sexual health literacy within education and youth work settings.
- **Invest** in a nationally-coordinated website, endorsed by NHS Scotland, that can be trusted by young people as a 'go to' place for comprehensive and reliable information about sexual health, with functionality to order free condoms and STI testing kits, digital tools to facilitate contraception decision-making, and a live interactive map to sign-post to local services.
- **Include** videos and blogs made by young people for young people on real life experiences related to sexual health, including positive aspects of sex and relationships.
- **Provide** adequate resource for dedicated staff with expertise in digital sexual health communications to ensure online content is engaging and kept up to date.

**Acknowledgements:** Thanks to young people from the following organisations for sharing their views: TRIUMPH Youth Advisory Group; 6VT Youth Café (Edinburgh); Castlemilk Youth Complex (Glasgow); Landed Peer Education Project (Wishaw); LGBT Youth Scotland; The Place Youth Club (Aness, Highlands); I Youth Zone (Greenock); Waverley Care African Health Project.

This project was supported by funding from University of Glasgow Knowledge Exchange Fund, NHS Greater Glasgow and Clyde, NHS Lanarkshire, NHS Lothian, Scottish Government, and ISSF-Wellcome [204820/Z/16/Z].

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## Annex: Summary of Young People's Views on Digital Tools to Promote Sexual Health

Digital feature/tool	What young people value most	What young people have concerns about
<b>Online ordering of sexual health products (e.g. condoms, STI testing kits) for delivery by post</b>	<ul style="list-style-type: none"> <li>• May reduce barriers to accessing services in-person, such as travel and time to attend appointments, anxiety about speaking to a healthcare professional, and concerns about privacy and confidentiality.</li> </ul>	<ul style="list-style-type: none"> <li>• Without speaking with a professional, opportunities to support young people on other sexual health issues might be missed.</li> <li>• Needs to be confidential (e.g. discreet packaging) as might not be safe for young people if their parent/ carer finds out they are sexually active.</li> </ul>
<b>Decision-making tools (e.g. to assess STI risk, or choose contraception methods)</b>	<ul style="list-style-type: none"> <li>• Can help make health information more accessible.</li> <li>• Can help provide balanced and honest information (e.g. about side effects of different contraceptive methods).</li> <li>• Can empower young people with knowledge and confidence before an appointment with a health professional.</li> </ul>	<ul style="list-style-type: none"> <li>• Using a digital decision-making tool was seen as a good first step, but young people felt that the tool should encourage seeking further help and advice from a health professional.</li> </ul>
<b>Self-monitoring tools (e.g. apps to monitor STI symptoms, menstrual cycle)</b>	<ul style="list-style-type: none"> <li>• Can help young people to get the most out of appointments with a health professional by being able to easily check (e.g. on phone) relevant factors, such as when STI symptoms first started, date of last period, date/s of partnered sexual activity, etc.</li> <li>• May be especially useful when appointment time is limited.</li> </ul>	<ul style="list-style-type: none"> <li>• Some young people expressed concern over the reliability of digital self-monitoring tools and their potential to cause anxiety.</li> <li>• Young people need to feel confident that their self-generated data is confidential and securely protected.</li> </ul>
<b>Interactive maps of sexual health services with live information (e.g. on services offered and current waiting times for appointments)</b>	<ul style="list-style-type: none"> <li>• May reduce anxiety about finding a service, especially when outside of local area.</li> <li>• Useful for directing peers to suitable services.</li> <li>• Could be used to locate 'pop-up' services for those living in rural areas.</li> </ul>	<ul style="list-style-type: none"> <li>• Information would need to be reliable, up to date and tailored to location of user.</li> </ul>
<b>Live chat messaging with a sexual health professional</b>	<ul style="list-style-type: none"> <li>• Anonymity could encourage young people to ask more questions without feeling embarrassed.</li> <li>• Can help young people to assess whether making an appointment with a health professional is necessary (especially when appointments are hard to get).</li> </ul>	<ul style="list-style-type: none"> <li>• Might prevent young people from seeking help straight away where testing or treatment is needed.</li> <li>• Online messages would need to be anonymous and confidential.</li> </ul>

<p><b>Online peer support mechanisms (e.g. discussion forums, private messaging platforms, videos and blogs by young people about using sexual health services)</b></p>	<ul style="list-style-type: none"> <li>• Hearing the lived experiences of other young people can help individuals to feel they are not alone.</li> <li>• Blogs and videos made by young people provides peer credibility within official health websites, increasing young people's trust.</li> <li>• Creating online spaces for conversations about sexual health can help to reduce stigma.</li> </ul>	<ul style="list-style-type: none"> <li>• Potential risks within peer support forums for misinformation, harassment and exploitation.</li> <li>• Health related content would need to be moderated by a health professional for accuracy.</li> <li>• Credibility of the information source should made clear (e.g. endorsed with NHS logo).</li> </ul>
<p><b>Digital mechanisms to provide feedback on services</b></p>	<ul style="list-style-type: none"> <li>• Young people would feel listened to.</li> <li>• Helpful to have a mechanism for regular feedback on services, especially as young people's needs change quickly.</li> <li>• Could prevent wasting time and resources.</li> </ul>	<ul style="list-style-type: none"> <li>• Young people need to see evidence that their feedback is acted upon.</li> <li>• Feedback would need to be anonymous as people may worry about being treated unfairly after giving feedback.</li> <li>• Might not be well-used as many young people just want to access sexual health services quickly and leave.</li> </ul>
<p><b>Games and interactive activities on sexual health topics</b></p>	<ul style="list-style-type: none"> <li>• Can be a helpful way to communicate information via different formats (e.g. especially for people with dyslexia).</li> <li>• May be useful for younger young people to introduce sexual health information in an age-appropriate way.</li> </ul>	<ul style="list-style-type: none"> <li>• Sexual health information needs to be appropriately tailored to the intended age group.</li> <li>• Older young people may see games as patronising and a waste of time.</li> </ul>

**CONUNDRUM is a research collaboration between sexual health stakeholders – including young people, policy makers, practitioners and researchers – who are committed to improving sexual health among young people in Scotland.**

To find out more, visit: [www.gla.ac.uk/conundrum](http://www.gla.ac.uk/conundrum).

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