

RESEARCH BASED TEMPLATE

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Co-designing a Health Literacy Framework: A Multiphase, Youth-Led Research Study to Support Health Providers Meet the Sexual Health Needs of CALD Youth

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Background:

Culturally and linguistically diverse (CaLD) youth draw on rich cultural knowledge and strong social networks that shape health-related decision-making. However, inequities in developing sexual health literacy (SHL) persist, compounded by stigma and limited culturally responsive healthcare. This paper presents findings from the final phase of a youth-led multiphase project, contributing to a baseline, evidence-informed SHL framework that centres CaLD youths' voices and informs culturally responsive healthcare, policy and education.

Methods:

This youth-led, mixed-methods study engaged young people aged 16-26 from Pacific Islander and Northeast/Southeast Asian backgrounds. Young peer researchers conducted interviews and small focus groups with 18 CALD youth to co-develop the SHL framework building on findings from earlier phases. A semi-structured interview guide explored participants' experiences of SHL and interactions with healthcare systems, including community organisations, services, and providers. Data were audio-recorded, transcribed and thematically analysed. Using a participatory approach, participants also co-developed and evaluated sexual and reproductive health (SRH) strategies to address SHL needs through a visual ranking scale. Thematic analysis was used to analyse strategies then mapped to the socio-ecological framework.

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Results:

Interview findings indicated that strengthening SHL requires age and culturally responsive approaches across multiple levels of the healthcare system, supported by advocacy, collaboration and partnerships with CALD communities. The ranking scale findings highlighted four priority enablers for improving equity in SHL and SRH outcomes: 1) Community and peer-led approaches that support intergenerational dialogue; 2) Age- and culturally appropriate resources and services; 3) A culturally diverse and responsive health workforce; and 4) Stigma-reduction initiatives that build trust and understanding.

Conclusion:

CaLD youth are active agents in shaping accessible and meaningful health information and services that strengthen SHL. This study underscores the importance of community-driven, culturally responsive approaches and offers practical guidance for policymakers, clinicians, researchers and educators to advance equitable SRH outcomes for CALD youth.

Disclosure of Interest Statement:

This project was funded by the Queensland Sexual Health Research Fund. No other conflicts of interest to disclose.