

# WHEN ALGORITHMS SILENCE SEXUAL HEALTH: NAVIGATING DIGITAL CENSORSHIP TO DRIVE REAL-WORLD OUTCOMES

## Authors:

REBECCA ATKINSON<sup>1</sup>, SARAH CABRET<sup>2</sup>, JACKSON ELLIOTT<sup>3</sup>, DAILE KELLEHER<sup>4</sup>

<sup>1</sup>Sexual and Reproductive Health Australia, Australia

<sup>2</sup>Sexual Health Victoria, Australia

<sup>3</sup>Sexual Health Victoria, Australia

<sup>4</sup>Sexual and Reproductive Health Australia, Australia

## Background/Purpose:

This project shares practical learnings from navigating digital platform censorship during a national sexual and reproductive health awareness campaign and identifies adaptive strategies that strengthened measurable outcomes. Digital advertising platforms are central to health promotion; however, automated moderation systems on Meta and Google increasingly misclassify medically accurate content as “sexually explicit,” restricting reach. United States - based advertising regulations are often applied globally, creating unintended barriers for public health campaigns. In 2025, Sexual and Reproductive Health Australia, in collaboration with Sexual Health Victoria, delivered a national government-funded campaign and encountered repeated advertising restrictions across multiple states and platforms.

## Approach:

A multi-channel campaign incorporated paid social media, Google advertising, podcasts, bathroom placements and street posters. To mitigate censorship impacts, the team worked with a dedicated account manager prior to launch, preloaded campaign funds, submitted repeated policy reviews, escalated rejected advertisements, refined language while maintaining clinical accuracy, and continuously tested creative and placement adjustments. Optimisation shifted from impression-based metrics to click-driven outcomes, prioritising conversions. Short, authority-led video content replaced longer-form creative.

**Outcomes/Impact:**

Despite initial reductions in display reach, optimisation strengthened engagement outcomes overall. Google click-through rate reached 8.77%, significantly exceeding healthcare benchmarks. The campaign generated over 37,000 unique “Book Now” clicks, and service uptake increased by 13.2% nationally during the campaign period. Highest engagement was observed among males aged 18-34 years, a population traditionally difficult to engage.

**Innovation and Significance:**

Algorithmic moderation represents a structural barrier to equitable health communication. Strategic agility, diversified media investment and active platform advocacy can mitigate restrictions and drive measurable change. Anticipating censorship risk and embedding mitigation strategies into campaign design is critical to protecting access to evidence-based health information.

**Disclosure of Interest Statement (example):**

The authors declare no conflicts of interest. No pharmaceutical funding was received in the development or delivery of this project.