

SUMMARY BRIEF

# Digitally enabled health systems that address the needs of young people

› A framework for health leaders



This framework, developed by Digital Transformations for Health Lab (DTH-Lab), provides guidance for health leaders on how to design and implement digitally enabled health systems that address the needs of young people between 10–29 years. The framework aligns with the WHO Global Strategy on Digital Health 2020–2027, GIDH and broader global efforts to promote equitable, standards-based and people-centred digital transformation in health systems.

# A framework for health leaders involved in the development and implementation of national digital health strategies

Globally, an estimated 2.6 billion people are between 10 and 29 years of age, according to the 2025 population estimates from the United Nations Department of Economic and Social Affairs.<sup>1</sup> The majority live in low- and middle-income countries, where they constitute **more than 40% of national populations in many countries.**<sup>2</sup> Health is an important topic for young people: the findings from a systematic analysis for the Global Burden of Disease Study 2021 identified self-harm, interpersonal violence, mental disorders and noncommunicable diseases (NCDs) as the leading causes of disability-adjusted life years (DALYs) for individuals aged between 10 and 29 years.<sup>3</sup> Insights

from global and regional consultations with young people conducted by Digital Transformations for Health Lab (DTH-Lab) further **indicate five priority health areas** for young people: mental health, sexual and reproductive health (SRH), nutrition and fitness, climate-related health issues and NCDs.<sup>4</sup>

As countries accelerate the transition toward standards-based, interoperable digitally enabled health systems, it is critical to recognize that **young people engage with digital technologies in distinct ways.**<sup>5</sup> Yet, their needs, risks and lived experiences remain insufficiently embedded in system design, governance and implementation

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- 1 Based on the median variant projection from the [World Population Prospects 2024](#), which represents the United Nations' central or most likely population projection scenario. The estimate was calculated by aggregating the 10–14, 15–19, 20–24 and 25–29 age groups for both sexes combined.
  - 2 United Nations, Department of Economic and Social Affairs, Population Division (2024). *World Population Prospects 2024: The 2024 Revision*. Available at: <https://population.un.org/dataportal/data/indicators/46/locations/900,5503,1503,5504,1859,1518/start/2025/end/2025/table/pivotbyindicator?df=0286abdc-1af7-4bda-8da3-b6a5d161a6ed>
  - 3 Naghavi M, Ong K, Aali A et al. (Global Burden of Disease Study Causes of Death Collaborators) (2024). Global burden of 288 causes of death and life expectancy decomposition in 204 countries and territories and 811 subnational locations, 1990–2021: a systematic analysis for the Global Burden of Disease Study 2021, *The Lancet*, 403(10440), pp. 2100–2132. doi: [https://doi.org/10.1016/S0140-6736\(24\)00367-2](https://doi.org/10.1016/S0140-6736(24)00367-2)
  - 4 DTH-Lab (2025). *Building a blueprint for digital first health systems: Findings from regional youth workshops and focus group discussions. Interim report*. Available at: [https://cdn.prod.website-files.com/687cbb29cf02b40319f0acdf/68e5ab7a01e61a7fb6c02604\\_DTH-Lab-Building-blueprint-for-digital-first-health-systems-findings.pdf](https://cdn.prod.website-files.com/687cbb29cf02b40319f0acdf/68e5ab7a01e61a7fb6c02604_DTH-Lab-Building-blueprint-for-digital-first-health-systems-findings.pdf)
  - 5 Banerjee, P. and Holly, L. (2026). Everyday digital technology use and youth health: Scoping review of longitudinal studies., *JMIR Public Health and Surveillance*, 12: e85094. doi: <https://doi.org/10.2196/85094>

of digital health systems. Addressing young people's needs is a significant opportunity for health leaders to **future-proof** the digitally enabled health systems currently being developed and implemented.

More than 125 countries have adopted national digital health strategies and the Global Initiative on Digital Health (GIDH), managed by the World Health Organization (WHO), is strengthening global coordination. To date, young people have been largely overlooked in these processes. An analysis of the 87 strategies, accessible via the WHO Global Repository on National Digital Health Strategies, found that **57% did not reference young people's needs or initiatives related to young people**. Among the 43% that did, most strategies referenced only maternal and child health or vaccination programmes rather than addressing adolescents and young adults as a distinct population group.<sup>6</sup> While a few countries, such as Sweden, have introduced targeted initiatives – like the youth-focused platform [UMO.se](https://UMO.se) – within

their national digital health strategies, such examples remain limited. This highlights the need for more intentional integration of young people's health in digital transformation efforts.

DTH-Lab has created a **framework for health leaders involved in the development and implementation of digital health strategies**.<sup>7</sup> Structured around eight levers, the framework outlines how digitally enabled health systems can be intentionally designed to support young people's health, well-being and agency. Grounded in global evidence, youth consultations and international policy commitments, it advances a vision of a hybrid health system, one that combines digital and in-person care to deliver accessible, equitable and people-centred services and **was developed to be fully aligned with WHO's Global Strategy on Digital Health (2020–2027)**. Central to this vision is the recognition of young people not only as service users but also as active contributors to the design, governance and evolution of digital health systems.

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6 Mitra, A. and Silberzahn, T. (2026). Making young people visible: what national digital health strategies reveal and how a new framework can respond. DTH-Lab. Available at: <https://www.dthlab.org/articles/making-young-people-visible-what-national-digital-health-strategies-reveal-and-how-a-new-framework-can-respond>

7 Digital Transformations for Health Lab (2026). Digitally enabled health systems that address the needs of young people: A framework for health leaders involved in the development and implementation of national digital health strategies. Geneva: Digital Transformations for Health Lab. <https://www.dthlab.org/articles/digitally-enabled-health-systems-that-address-the-needs-of-young-people-a-framework-for-health-leaders>

# Embedding young people's priorities in digitally enabled health systems

## WHAT

should a **digitally enabled health system** include to benefit young people?

## HOW

should a **digitally enabled health system** be designed?

### Level 1

Integrated digital health solutions

### Level 2

Digital health embedded in learning and training environments

### Level 3

(Digital) health, AI and social media literacy

### Level 4

Workforce capacity for young people's health

### Level 5

Young people's participation and governance

### Level 6

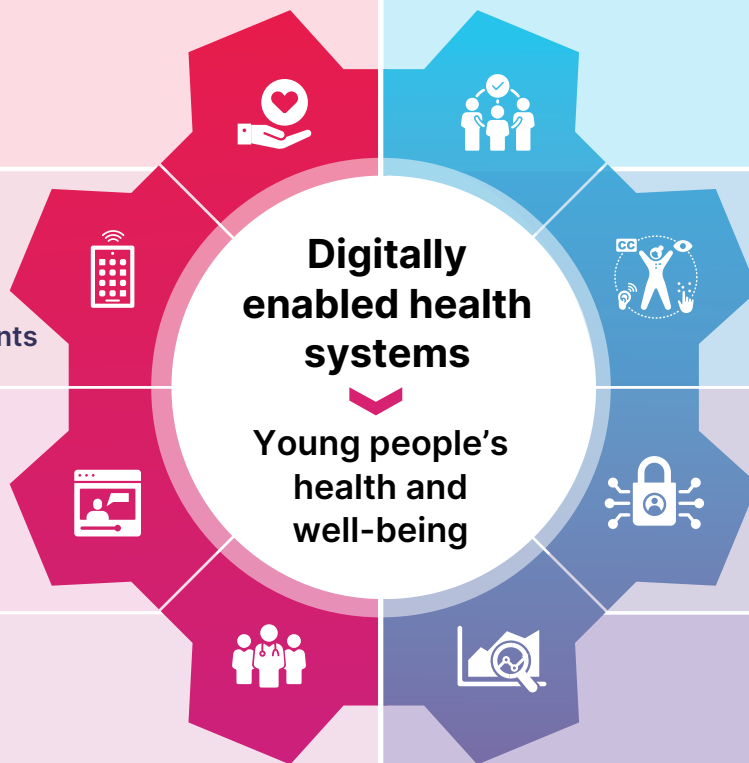
Equity and accessibility

### Level 7

Data security and privacy, safety and accountability

### Level 8

Monitoring, evaluation and continuous improvement



LEVER

1



## Integrated digital health solutions

Integrated digital health solutions for young people must be accessible, youth-friendly and responsive to their diverse and evolving needs across the course of their lives.

**To achieve this, governments should consider the following:**

- **Aligning with youth needs:** Ensure digital health strategies reflect priority health areas and recognize heterogeneity across the age group 10–29, with tailored, age-segmented approaches, for priority health areas of young people, such as mental health, reproductive health and climate health.
- **Enabling integrated, interoperable care pathways:** Invest in standards-based architectures that support seamless data exchange, longitudinal records, continuity of care and future AI integration.
- **Ensuring responsive and continuous access:** Provide 24/7 access to healthcare through telehealth and digital triage systems to improve timely care and navigation across services.
- **Designing for age-appropriate engagement and empowerment:** Adapt content, interfaces and service delivery to varying developmental stages, autonomy levels and health literacy needs.

LEVER

2



## Digital health embedded in learning and training environments

Digitally enabled health systems must be embedded within the environments where young people live, learn and work, such as schools, universities, vocational training centres, workplaces and community settings.

To achieve this, governments should consider:

- **Institutional integration across settings:** Embed interoperable digital health services within schools, universities and training systems through coordinated action across health, education, information and communications technology (ICT) and labour sectors. This includes strengthening the skills of educators, counsellors and supervisors to support youth health needs, digital navigation, referral systems and the safe use of emerging technologies.
- **Reaching underserved youth through multi-channel models:** Use integrated delivery approaches combining digital platforms with community-based intermediaries (e.g. community health workers, NGOs, peers) to ensure equitable access for out-of-school and informally employed youth. Where services are accessible and trusted they should progressively be integrated into broader interoperable systems where feasible.
- **Sustainable and tiered financing models:** Establish predictable funding with clearly defined roles and spending authority across national and subnational levels to support implementation in decentralized systems.
- **Capacity-building for educators and counsellors:** Teachers, counsellors, community leaders and training supervisors are often the first point of contact for young people seeking support, even before engaging with formal health providers. Governments should equip them with skills in adolescent health and digital health tools to better support young people across education, training and community settings.

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## (Digital) health, AI and social media literacy

Digital health literacy is essential for enabling young people to access, interpret and safely engage with digital health information and services, thereby supporting health promotion, prevention and informed decision-making while reducing exposure to misinformation and digital risks.

To achieve this, governments should consider the following:

- **Integrating (digital) health literacy into education systems:** Embed health, digital and media literacy within national curricula using a digital citizenship for health approach. Equip young people with skills to navigate online information, recognize misinformation and engage responsibly in digital environments.
- **Ensuring safe and responsible use of social media and youth-facing AI chatbots for health promotion:** Integrate social media and youth-facing AI platforms (such as AI-chatbots and large language models) into digital health literacy and health promotion strategies. This must be accompanied by mandatory safeguards, including media and AI literacy, age-appropriate protections and transparent moderation standards. Technology companies should be required to adopt safety-by-design principles, comply with stronger oversight of algorithmic practices and implement clear measures to prevent misinformation, harmful content and unsafe AI-generated health advice.
- **Support youth-led behaviour change initiatives:** Co-design health campaigns to promote healthy behaviours regarding sleep, nutrition, fitness and mental well-being in young people to improve relevance, trust and impact.



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## Workforce capacity for young people's health

A digitally enabled health system for young people depends on a workforce that is clinically competent, youth-sensitive and confident in using digital tools.

To achieve this, governments should consider the following:

- **Building age-specific and digitally enabled workforce capacity:** Train health workers in adolescent and child health guidelines alongside practical skills for delivering care through digital platforms, understanding young people's digital behaviours and applying principles of consent, confidentiality, young people's rights and data protection. Flexible, continuous professional development approaches, including micro-learning, should be used to help providers stay updated on adolescent health needs, digital tools and emerging health risks.
- **Preparing the workforce for multi-channel care and strengthening trust in digital and AI tools:** Equip providers to deliver coordinated care across online and offline channels, while building confidence, buy-in and trust in digital and AI systems through training, co-design and institutional support.

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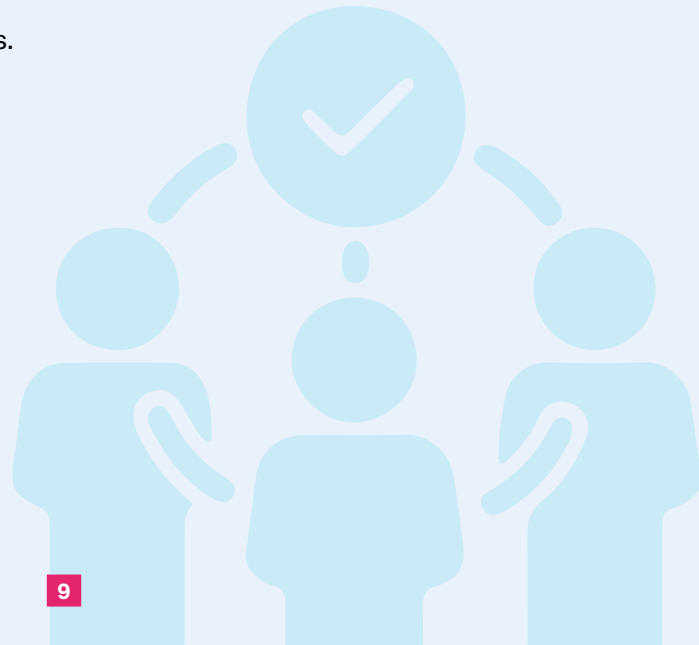


## Youth participation and governance

Institutionalizing youth participation is critical to ensuring digital health systems are responsive, trustworthy and aligned with young people's needs throughout their lives.

**To achieve this, governments should consider the following:**

- **Institutionalizing youth participation in governance and decision-making:**  
Establish formal youth councils or advisory bodies linked to health systems while also integrating young people into mainstream steering committees, ethics boards and data governance structures to strengthen accountability, representation and responsiveness in digital health systems.
- **Institutionalizing co-design through human-centred design approaches:**  
Engage young people in structured co-design, usability testing and iterative feedback processes to ensure digital health services are accessible, relevant and safe.





## Equity and accessibility

Equity and accessibility must be central to digitally enabled health systems to ensure they reduce, rather than reinforce, existing disparities in access to care among diverse groups of young people.

To achieve this, governments should consider the following:

- **Investigating access needs of different youth populations:** Investigate diverse youth access needs through inclusive design. Use people-centred and inclusive design approaches to identify the differing access needs and preferences of youth populations. Digitally enabled health systems should be designed to avoid exacerbating existing inequities related to gender, disability, income, geography, language or connectivity barriers. For example, [Stop TB Partnership](https://www.rtc.stoptb.org/rtc-toolkit/) codified its successful redesign of digitally enabled tuberculosis (TB) care services in Uganda and Vietnam into an easy-to-use people-centred design toolkit: <https://www.rtc.stoptb.org/rtc-toolkit/>.
- **Adopting multi-channel access models:** Ensure equitable reach through integrated digital and non-digital channels (e.g. mobile, web, SMS, Interactive Voice Response (IVR), community platforms) that are multilingual and inclusive.
- **Enabling accessible and secure health records:** Provide age-appropriate, privacy-protected access to health records with role-based permissions to support autonomy and continuity of care. Develop secure, interoperable electronic health records that support continuity across life transitions while ensuring age-appropriate consent, privacy and data protection safeguards.

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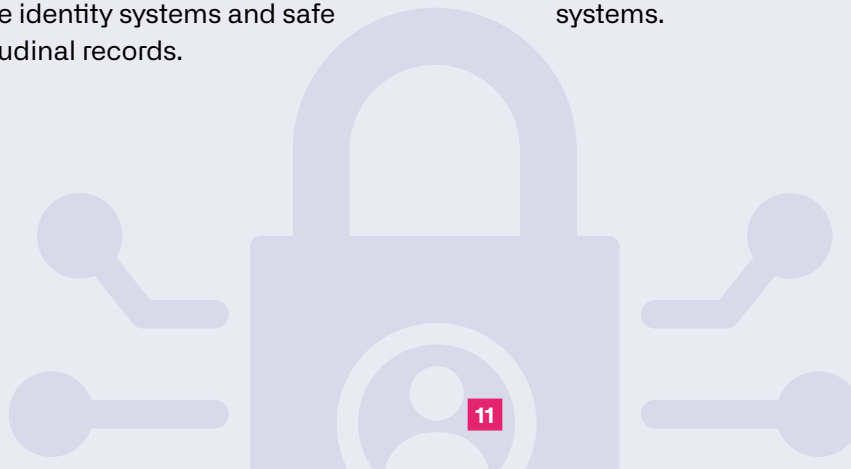


## Data security and privacy, safety and accountability

These principles are foundational to building trustworthy digitally enabled health systems for young people, requiring strong safeguards, transparent governance and youth-centred protections across data and AI use.

To achieve this, governments should consider the following:

- **Strengthening transparency, accountability and redress mechanisms:** Ensure clear visibility on data use, enable granular consent and establish youth-friendly grievance, escalation and liability frameworks for addressing online harm.
- **Embed privacy and security by design with stronger protections for health data:** Mandate robust safeguards that treat health data with higher protection than general data, ensuring confidentiality, secure identity systems and safe longitudinal records.
- **Enforce youth-responsive AI governance and technical standards:** Implement risk-tiered AI regulation with mandatory algorithmic transparency, bias audits and context-specific safeguards to protect young people from harmful, discriminatory, or unsafe AI applications. Governments should also establish enforceable technical standards and practical tools, such as hazard-risk matrices, to identify, monitor and mitigate risks affecting young people within digitally enabled health systems.



LEVER

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## Monitoring, evaluation and continuous improvement

Monitoring, evaluation and learning (MEL) systems are essential to ensure digitally enabled health systems remain responsive, accountable and continuously improve based on real-time data and young people's feedback.

**To achieve this, governments should consider the following:**

- **Strengthening youth-centred monitoring and decision-making:** Capture indicators on access, quality, trust, safety and continuity using disaggregated data and qualitative youth insights and integrate this feedback into routine performance reviews and planning to ensure adaptive and responsive systems.
- **Addressing youth needs in the evaluation of digital products and services:** Assess not only programmes but also digital tools and platforms from the perspective of young people's needs, especially critical topics such as child safety.
- **Leveraging data for intelligence and system improvement:** Move beyond monitoring to actively using data for insights, predictive decision-making and continuous system optimization.

# Checklist for national health leaders

## What should a digitally enabled health system include to address the needs of young people?

### Lever 1

#### Integrated digital health solutions

- Have you assessed whether the health system in your country provides the digital health solutions that young people need most, in a young person-friendly way?

### Lever 2

#### Digital health embedded in learning and training environments

- Are health-related services for young people embedded in the places where they learn and work, for example in schools, apprenticeships, community settings and universities?

### Lever 3

#### (Digital) health, AI and social media literacy

- Are young people being equipped with the digital, health and civic literacy and skills needed to be healthy in a digital world?
- How are social media and youth-facing AI chatbots regulated in your country to prevent negative impact on young people?

### Lever 4

#### Workforce capacity for young people's health

- Does the health workforce serving young people have the right balance of skills and knowledge – and do teachers and university counsellors have adequate knowledge of (digital) health?

## How should a digitally enabled health system be implemented to address the needs of young people?

### Lever 5

#### Young people's participation and governance

- Is young people's participation ensured through the approach to design and governance of the digital health-related solutions created for them?

### Lever 6

#### Equity and accessibility

- Can young people easily access digital health solutions irrespective of their location or connectivity levels?

### Lever 7

#### Data security and privacy, safety and accountability

- Do digital health policies uphold the stringent privacy and data-protection standards that are required for young people?

### Lever 8

#### Monitoring, evaluation and continuous improvement

- Are there monitoring systems in place to evaluate the effectiveness, efficiency, safety and accessibility of relevant digital health solutions for young people?

## Putting the Framework into practice

Are you involved in developing, updating or implementing a national digital health strategy? We would like to hear from you.

DTH-Lab can provide technical support to countries seeking to strengthen their national digital health strategies as well as sharing relevant tools, materials and case examples.

**Contact:** [team@dthlab.org](mailto:team@dthlab.org)

**Visit:** [www.dthlab.org/digitally-enabled-health-systems](http://www.dthlab.org/digitally-enabled-health-systems)



Access the complete framework document here:

<https://tr.ee/8UmgUk>