

Shifting focus to adolescent wellbeing and inclusive participation in the digital age

TO THE EDITOR: We fully support Partridge and colleagues¹ call for greater attention to engaging young people in the design of digital health initiatives to optimise their mental health and wellbeing. Actively involving young people in shaping these tools is critical to ensuring that digital health tools are relevant, accessible and effectively implemented.

The authors rightly highlight inequalities in access to digital technologies among young people from rural areas and culturally and linguistically diverse communities. This important issue could be further strengthened by also attending to the perspectives of young people with disability. Despite calls for more inclusive research,² young people with disability continue to be under-represented in both digital health research and design processes, limiting the evidence base and our capacity to address disability-related inequalities in mental health and wellbeing.

Young Australians with disability experience disproportionately poorer mental health and wellbeing than their peers without disability (33% *v* 13%).³ With about 450 000 young Australians aged 15–24 years living with disability — about 14% of this age group — their inclusion is essential to ensure that digital mental health strategies are inclusive, equitable and effective.

Implementing meaningful codesign is not without challenges, but this is precisely why inclusive methods must be adequately resourced and planned.⁴ The Research Alliance for Youth Disability and Mental Health (RAY; www.raydisabilitymentalhealth.org) is one example of a research program seeking to build the evidence base about effective ways to codesign research with young people with disability. Practical steps to support engagement include accessible communication, flexible participation, collaboration with disability-led organisations, and recognition of lived experience as a form of expertise.^{2,5} Just as important is the need to rethink how disability is framed and understood within digital health contexts. Involving young people with disability is not just about tailoring tools to a specific group, it also broadens the scope of innovation, expanding the horizon of what digital health technologies can *be* and *do*, improving design and usability for everyone.

Digital inclusion must reflect the full diversity of adolescence to support mental health and wellbeing. Ensuring young people with disability are part of this work is an ethical responsibility and a pathway to better outcomes for all.

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- 1 Partridge SR, Todd AR, Jia SS, Raeside R; Health Advisory Panel for Youth at the University of Sydney. Shifting focus to adolescent wellbeing and inclusive participation in the digital age. *Med J Aust* 2025; 222: 484–487. <https://www.mja.com.au/journal/2025/222/10/shifting-focus-adolescent-wellbeing-and-inclusive-participation-digital-age>
- 2 Bailie J, Fortune N, Plunkett K, et al. A call to action for more disability-inclusive health policy and systems research. *BMJ Glob Health* 2023; 8: e011561.
- 3 Australian Institute of Health and Welfare. People with disability in Australia 2024 [Cat. No. DIS 72]. Canberra: AIHW, 2024. <https://www.aihw.gov.au/reports/disability/people-with-disability-in-australia/contents/health/health-status> (viewed May 2025).
- 4 Lipton B, Bailie J, Dickinson H, et al. Codesign is the zeitgeist of our time, but what do we mean by this? A scoping review of the concept of codesign in collaborative research with young people. *Health Res Policy Syst* 2025; 23: 54.
- 5 Anderson AM, Martin RA, DeCormier Plosky W, et al. A global call to action for disability inclusion in health research. *Nat Med* 2025; 31: 1399–1403. ■