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Young people, social media, and critical health media literacies

Henry Mainsah[1]
Lin Prøitz[2]
Lilliana Del Busso[3]

NAME OF DEPARTMENTS AND INSTITUTIONS:

[1] Consumption Research Norway (SIFO), Oslo Metropolitan University (OsloMet), Norway

[2] Department of Computer Science and Communication, Østfold University College, Norway

[3] Department of Welfare, Management and Organisation, Østfold University College, Norway

CORRESPONDING AUTHOR:

Henry Mainsah. Email: henryma@oslomet.no.

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ABSTRACT

Background: Social media and other digital platforms are becoming significant sources of health, fitness, and nutrition information for young people. This underlines the need to examine the potential consequences of such information practices for young people's health knowledge, their relationship to their bodies, and their wellbeing. **Aim:** Using a sociocultural approach to literacy, this article examines how young people understand, experience, and engage with health information mediated through digital technologies. **Methods:** Five activity-based focus group interviews were organized with 14–17-year-olds as part of a pilot project informing a broader study about health information and critical literacies. **Results:** Content about fitness, nutrition, and body image constituted a dominant part of the health-related information the participants encountered on social media. The participants were aware of algorithmic processes that produced health information and affirmed their ability to evaluate the quality of content on social media. They were critical of but accepted being the object of surveillance and data capture. Participants were critical of health narratives on social media by highlighting the unhealthy practices of influencers and questioning perfect body ideals. However, they still aspired to these "perfect" masculine and feminine body ideals. **Discussion and conclusion:** The study highlights the affective, situated, and relational nature of young people's health literacy practices. This reflects the tensions, contradictions and ambivalences that are an integral part of the wider youth digital culture.

KEYWORDS

Embodiment, health information, media literacy, social media, young people.

BIOGRAPHIES

Henry Mainsah (Ph.D) is a research professor in consumption studies and digital culture at Consumption Research Norway (SIFO), Oslo Metropolitan University. He has a PhD in Media and Communication from the University of Oslo. His research interests include interdisciplinary research methods, digital and social media, design, digital literacies, and youth culture.

E-mail: henryma@oslomet.no. ORCiD: 0000-0002-7114-1762.

Lin Prøitz is a professor of communication and digital media at the Department of Information Technology and Communication, Østfold University College and Professor II at the Center for Digital Narratives at the University of Bergen. Her research interests include young people's self-performances, gender and sexuality, affect and intimacy in a digital and visual culture. Her work is grounded in feminist and media studies

E-mail: lin.proitz@hiof.no. ORCiD: 0000-0001-5094-1069.

Lilliana Del Busso is a professor at Østfold University College. Del Busso has a PhD in Psychology from London South Bank University. Her research interests are in the fields of psychosocial studies and critical psychology, and include embodiment, reflexivity, space, emotion, and qualitative research methodologies. She conducts qualitative research in the fields of child protection, psychological medicine, and critical social psychology.

E-mail: lilliana.a.busso@hiof.no.

Introduction

Young people in their teenage years are in a particularly exploratory stage in life where physiological and psychological changes as well as social values and norms become key to how they negotiate identity, health, and wellbeing. They are navigating this unique period in an era when digital media is ubiquitous in their everyday lives, including for entertainment, learning and participation in social life. Almost all Norwegian teens from the age of 13 use one or more of social media platforms such as Snapchat, Instagram, TikTok, X, Discord, Facebook, WhatsApp, or Reddit (Medietilsynet, 2024). Increasingly, adolescents are turning to online sources like websites and social media for health-related information on topics such as sexual health, mental health, fitness, and nutrition (Taba et al., 2022; Opel et al., 2023). Teens are increasingly using Conversation Agents (CAs) such ChatGPT to find out about sensitive topics, including mental and sexual health topics (Park et al., 2023).

The quality of health knowledge shared online is quite varied in terms of credibility, accuracy and veracity (Melchoir & Oliveira, 2022; Lopez et al., 2016) and social media platforms are frequently criticized for spreading misinformation, on a variety of global health issues (Bode & Vraga, 2018; Mulcahy et al., 2024; Wellman, 2024). Some authors have linked misinformation on TikTok to the adoption of harmful dietary practices, body image issues, and mental health concerns. Platforms such as TikTok, YouTube, and Instagram are believed to glorify weight loss, promote diet culture, and provide a narrow view of health, primarily driven by non-expert creators (Zeng et al., 2025). Despite frequent media attention on youth and how they use digital technologies to manage their health, there is little scientific research on the topic within a Norwegian context.

This article examines how young people understand, experience, and engage with health information mediated through digital technologies that are part of their everyday lives. It is based on an exploratory pilot study of Norwegian young people between 14–17 years old. It draws on a sociocultural perspective, which views digital, and media literacy related to health as embedded in people's daily practices and shaped by social contexts. Through this approach we question the adequacy of theoretical assumptions that view literacy solely in terms of skills and competences. Our approach highlights how young people's learning about and engagement with knowledge about health and bodies materialize through dynamic and affective processes linked to wider representations, systems, ideologies, and power dynamics embedded in their everyday sociocultural context.

Locating health information practices within critical media literacies

Many approaches to media literacy, digital literacy, health literacy, and digital health literacy tend to define literacy as a set of skills or competencies (Bouclaous et al., 2023; Wrench & Garrett, 2014). Van der Vaart & Drossaert (2017), for example, view digital health literacy as consisting of a set of competencies that include information searching, evaluation of the reliability of health information, determination of the relevance of information, and privacy consciousness. Having these competencies

would accordingly improve people's ability to adhere to a healthy lifestyle, empower people to make their own health decisions, and ultimately improve health (Choukou et al., 2022).

By contrast scholars who adopt socio-cultural learning approaches to literacy criticize notions of literacy as defined above that reflect what they call the «autonomous» model of literacy (Street, 2014). Authors within New Literacy Studies (Gee, 2000; 2015; Luke, 2014; Lankshear & Knobel, 2013; Street, 2014; 2016), for example, argue that digital literacy cannot be reduced to mere "lists of abstracted skills and techniques that a proficient person can «do». Once they «have» these «skills» they can use them purposefully at work, at home, at school, etc., and function «competently»" (Lankshear & Knobel, 2015, p. 12). They understand literacy rather as a phenomenon that manifests itself principally through various kinds of social practices that take different forms in different cultural and social contexts (Buckingham, 2007) framed by history, values, and beliefs (Gee, 2000; Coiro et al., 2008; Lankshear & Knobel, 2011). These literacy approaches highlight "metaknowledge" of "meaning systems and sociocultural contexts in which they are produced and embedded", technical skills to negotiate these systems, and the ideologies that underpin them (Luke, 2000, p. 72). They recognize the fact that young people's own interests, expertise, life, histories, and experiences have a role to play in which they approach technology. Sociocultural approaches enable us to identify the cultural tools that young people currently use and might use in the process of making meaning about health in their current digital environment. These vary according to how they identify themselves, the values they have, the groups they relate to, and the purposes they pursue and so on (Lankshear & Knobel, 2015).

Buckingham (2007) suggests that there is a need for conceptions of media literacy that include aspects of pleasure, sensuality and irrationality that are arguably central to most people's experience of media, and of culture more broadly. This aligns with arguments that other authors have made that underline how literacy practice "creates and is fed by ongoing series of affective intensities that are different from rational control of meanings" (Leander & Boldt, 2013, p. 22) forming relations and connections across signs, objects, and bodies in often unexpected ways (Leander & Ehret, 2019).

Sociocultural approaches perceive literacy as having a connection to larger sociopolitical issues of culture, gender, class, and political economy (Currie & Kelly, 2022). Buckingham explains that being media literate is not only about knowing how to use media but also "[…] entails an in-depth critical understanding of how these media work, how they communicate, how they represent the world, and how they are produced and used" (2019, p. 3). He identifies four key dimensions for the study of media literacy: production, language, representation, and audience (2007; 2015; 2020). Looking at the production dimension highlights young people's understanding of the role of sources and producers of health-related content on social media, and a broader awareness of the commercial forces that influence the nature of information that is targeted at them. Representation concerns how digital media offer interpretations and selections of reality, which embody implicit values, ideologies, and ways of seeing. Critical users of media might be able to assess the motivations of the creators of media content, reliability and bias, as well as broader questions about whose voices are heard and whose views are not represented. The language dimension involves awareness of the forms of communication on social media, and the broader codes, conventions and rhetoric of media genres. The audience

dimension involves an awareness of how platforms collect and share users' data, design mechanisms that keep people engaged on platforms. It also means recognizing the diverse ways in which different social groups utilize the medium, and "reflecting on how it is used in everyday life – and indeed how it might be used differently" (Buckingham, 2007, p. 48).

Methods

In two cities in the Southern-Eastern part of Norway, Oslo and Fredrikstad, we have conducted four activity-oriented focus group interviews (see Krueger, 1998; Colucci, 2007; Winstone et al., 2014; Bourne & Winstone, 2021) with eleven boys and seven girls aged between 14-17 years old. Two focus groups took place in Oslo, one with four 17-year-old boys, and one with three 14-year-old boys. We held three focus groups in Fredrikstad, one with four 17-year-old boys, one with three 16-year-old girls, and another with four 16-year-old girls. Given that this was an exploratory pilot study, we did not follow any precise criteria for sample size, and the selection of participants was not meant to be representative. In the analysis we use quotes from ten participants across the five focus groups:

Table 1. *Overview of focus groups.*

Focus groups	Location	Participants
FG1	Oslo	4 boys, 17-year-olds
FG2	Oslo	3 boys, 14-year-olds
FG3	Fredrikstad	3 girls, 16-year-olds
FG4	Fredrikstad	4 girls, 16-year-olds
FG5	Fredrikstad	4 boys, 17-year-olds

Each focus group lasted one hour and a half. During the focus groups, we alternated between rounds of question and answers and hands-on activities [see Figure 1]. After a round of introductions and general questions about everyday routines and uses of technology, we asked the participants to take out their smartphones and count the number of apps they had on them. This was meant as a warm-up activity and a means of introducing a discussion about uses of apps, personal data, and critical awareness. Afterwards, we asked participants to log into two of their social media apps and list all the content they considered to be health related from their social media feeds on a piece of paper. During and after the activity we asked the participants what they thought about the type of content that appeared on their social media, and what the content said about them. We also asked them to attempt to explain why the content on their feeds appeared in the manner it did. This activity was inspired by the "scroll back" (see Robards & Lincoln, 2017) and think aloud interview methods (see Leighton, 2017; Swart, 2021). The scroll back method involves sitting with research participants as they scroll back through their social media, profiles, timelines, or feeds while asking them to explain to narrate and explain what they see. Similarly, the think aloud interview is a method of interviewing where the interviewee verbalizes their thoughts and impressions in conversation with the researcher while performing a task. In our context, this activity aimed to give the participants a deeper insight into the wealth of the information landscape that they knowingly and unknowingly are part of. This exercise proved extremely helpful for having interviewees reflect on the algorithmic

curation of health information and provided useful avenues to question participants about their experiences and understanding of algorithmic processes. Afterwards, we asked the participants to write down three questions about health that they were most interested in or which they believed their peers were preoccupied with and to search for answers to these questions using any online source they chose. We use this activity to prompt questions about the veracity and reliability of sources of online health information. As a wrap-up activity the participants drew a map of their health information worlds on a piece of paper. We prompted participants to include information on their maps indicating types of knowledge and sensory perceptions related to health, or visual metaphors indicating how their digital health data environment represents them.

Here we enacted an approach that blends research and critical pedagogy and focuses on enabling children participating in research to learn and practice to become critical interpreters of their own digital lives (see Markham, 2024; Pronzato & Markham, 2023). This framework promotes critical thinking as a key element of research and improved digital or data literacy as one possible outcome of research.

Figure 1. *The focus group activity guide.*

Focus group activities

Activity 1:

1. Go into your phone, count, and write down the number of apps on it.
2. Make a list of five of the apps you use most.
3. Log in to two of your favorite social media apps and spend a few minutes on each app noting down everything you see on your feed, and the chronological order in which things come up.
4. Try to find answers to the following: Why does content on your social media feed appear the way it does? What do you think about the content you get on your social media? What do you think the content says about you?

Activity 2:

1. Log onto one or two of your favorite social media apps, scroll on and note down any content you find that relates to bodies and health.

Activity 3:

1. Write down three health-related questions that you and your peers are most curious about.
2. Choose two or three places online and try to find answers to these questions.

Activity 4:

1. Draw a map that shows you and your health information landscape.

Analysis

The data consisted of the hand-written and drawn materials created by participants, observation notes of researchers, and transcripts of discussions. The material was analyzed in a reflective, evolving and iterative process following Braun & Clarke's (2022, p. 35) different phases of reflexive thematic analysis. In the first phase, 'data set

familiarization', we collectively immersed ourselves in the data set immediately after the end of each interview by listening to the audio files, reading the transcripts and notes, looking at materials produced by participants, and producing notes about ideas and themes. In the second 'coding' phase we worked through the material in an iterative and evolving manner identifying interesting segments and allocating meaningful descriptions. Following this we generated initial themes across the material, capturing patterned meaning. (e.g., gender-differences; the impact of school; influencer; body, food, and training; drugs/hormones; what is personal data; 'bulk/&cut'). In the 'developing and reviewing themes' phase, we assessed the 'fit' of the initial themes with the wider research context, which then led to 'refining themes' where the analysis was fine-tuned for the final phase of 'writing up'.

Results

Ways of knowing about algorithms and surveillance

The production aspect of media literacy "is inevitably related to the question of who owns and controls information, and the means by which it is generated and distributed" (Buckingham, 2007, p. 48). It was rather unsurprising to find out that the everyday lives of the young people in our study were characterised by regular presence on social media platforms via their smartphones. The main social media platforms they mentioned were Snapchat, TikTok, YouTube, and Instagram.

In their processes of sensemaking - from everyday algorithmic processes to broader mechanisms of "surveillance capitalism" (Zuboff, 2019) - the participants drew on different (and varying degrees) types of knowledge resources. The interview accounts were replete with anecdotes describing moments when participants sensed that they were being subject to surveillance through their mobile devices.

> Jenny: I have noticed that often when I am hungry, food related things suddenly appear. Right after I come back from school, I am often on my phone before dinner.
>
> Interviewer: do you know why?
>
> Jessie: I suspect it is maybe because she has searched online for food once when she was hungry, and she always does that at the same time of the day, so she gets food related stuff on her feed at that time of the day.
>
> (focus group 3)

Similarly, Anita from the same focus group described how once she had talked to her mum and shortly afterwards when she went on TikTok, she found a commercial about the same thing her mum had talked about. Reacting to Anita, Kamilla said: "One feels sometimes that it is listening". Emotional reactions to such incidents varied from a feeling of creepiness and shock to mild amusement. The participants' echo what some authors have highlighted about the affective dimension of algorithmic experiences when they suggest that the moods, affects, and sensations that algorithms and surveillance systems generate, contribute to users' understanding of how these work (Bucher, 2018; Swart, 2021; Ruckenstein, 2023).

Participants indicated that their understanding of experiences of surveillance was partially informed by information in the media.

> Karl: Sometimes I feel that they listen to what I say. Like sometimes I would say something to a buddy and then suddenly the same evening the exact same thing comes up.
>
> Interviewer: How do you think that happens (question to everyone)?
>
> Johan: I don't know if … I don't think so … I don't think the microphone is on at all times, but I don't know it probably has control over something or the other but it's a bit like that. On the school PC, for example, there's a thing like that we can, or we've had a camera on the PC and then we can put a cover like that in front of the camera so that it's not possible to kind of see the person behind it regardless of whether he's filming or not and … I've seen some stuff about it that a case happened in China where they've kind of gone into other people's mobile phones or kind of got control over different iPhones and then kind of been able to collect information from their mobile phones then.
>
> Ian: There are actually things that are not legal, but they probably do it in a way to for the algorithm, you can probably pay those companies too, right?
>
> Johan: Yes, people buy, or companies buy information from other companies all the time.
>
> (focus group 1)

Johan's statement above echoes a widely shared belief that tech companies secretly track or monitor users through the camera on their devices to send them targeted advertisements on the platforms they use. In school Johan and his mates are urged to cover the camera on their PCs as a preventive measure. He indicates that his understanding is also informed by news stories about the surveillance practices of citizens in China through mobile devices. In a somewhat nonchalant and matter-of-fact manner Ian, Johan and Karl expressed awareness of the sometimes-unscrupulous surveillance and business practices of digital platforms. At times they would take small actions to resist surveillance. At other times they felt a sense of resignation over the fact that they would be surveilled as a condition for using social media.

As mentioned earlier, a sociocultural approach to literacy also involves an awareness of one's position as an audience, reader, or user of media. In the case of social media platforms, there has been attention on the ways in which the interface design shapes user interactions. Entrena-Serrano observes that "TikTok strongly encourages users toward passive consumptive curation – watch, scroll, repeat – while refusing to provide enough transparency about how interactions curate recommendations and discouraging users from disabling data collection" (Entrena-Serrano, 2025, p. 1). Participants sometimes drew on elements of popular public discourse to frame understanding the effects of user engagement on social media platforms. This could be seen when Ian was talking about how easy it was to lose track of time when scrolling on TikTok.

> Ian: sometimes when I check I am surprised about how much time have used on TikTok, for example. I feel like, on TikTok especially, it's hard to notice how much time you've spent watching something. Because you also get a lot of dopamine from watching those short clips. And it's just so quick to keep scrolling if there's something you don't like. You just continue scrolling and scrolling.
>
> Interviewer: Dopamine, you said. What do you mean? Why do you say it's dopamine…
>
> Ian: Well, often it's… You're already interested in what you see, sort of. Like, the algorithm knows what you like. And… yeah, the small videos. They're fast. A lot is happening at once. So, your brain kind of gets satisfied by it.
>
> (focus group 1)

Although the participants were concerned that they sometimes used too much time on their mobile devices scrolling through social media apps, they generally felt they had a sense of control over their social media use. Thus, we do not take Ian's use of the word "dopamine" in the excerpt above, as representing a mere face value belief about

suffering from some sort of addictive effect of TikTok. As Madsen (2022) observes, the prominence of such terms in everyday language reflects a wider popularity of medicalized media panic discourses articulated within media and popular psychology literature regarding the effects of smartphone and social media apps on children. Young people sometimes might employ such terms in everyday speech as part of a broader vocabulary of terms that they use to make sense of their social media saturated everyday lives (see Owens, 2025).

Exploring the sources of health information

Part of the representation dimension of media literacy that Buckingham (2015) proposes includes addressing questions about authority, reliability, and bias regarding sources of online information. The participants generally expressed confidence in their ability to find and evaluate the veracity, credibility and accuracy of health information that they found on their social media feeds and when they searched relevant online sources. It was rather unsurprising that the participants were aware of source criticism and source verification tactics. Fake news and misinformation related topics have been a prominent feature in public debate. Critical evaluation of online sources has been a key aspect of media education in the Norwegian school system.

Participants from the first focus group all agreed that TikTok was not a trustworthy source of health information. As Johan explains "I never search on TikTok, because you get videos from people who do not know what they are talking about, so it is better to search on google to hear from professionals". Another participant explained that he usually searched for information on Google and most recently on ChatGPT.

When we asked participants to write down questions that they and their peers were curious about they listed questions about topics such as skincare, diets, building muscle, and body transformation. Fourteen-year-old Pelle from the second focus group noted down questions such as, "does creatine give bigger muscles", and "does protein powder work and does it have no side effects". When asked to describe what he found, he said the following:

> I searched on TikTok...and a guy came up who was explaining that if you take creatine about 3-5 grams daily, and you exercise the right way and eat healthy, you will maybe gain 1.5 kilos more muscle. The other question I asked was whether protein powders work on ChatGPT, and it answered that protein was very essential in building muscle but that for a healthy adult it was likely unnecessary, and that you get enough protein from a normal diet.
>
> (Pelle, 14, focus group 2)

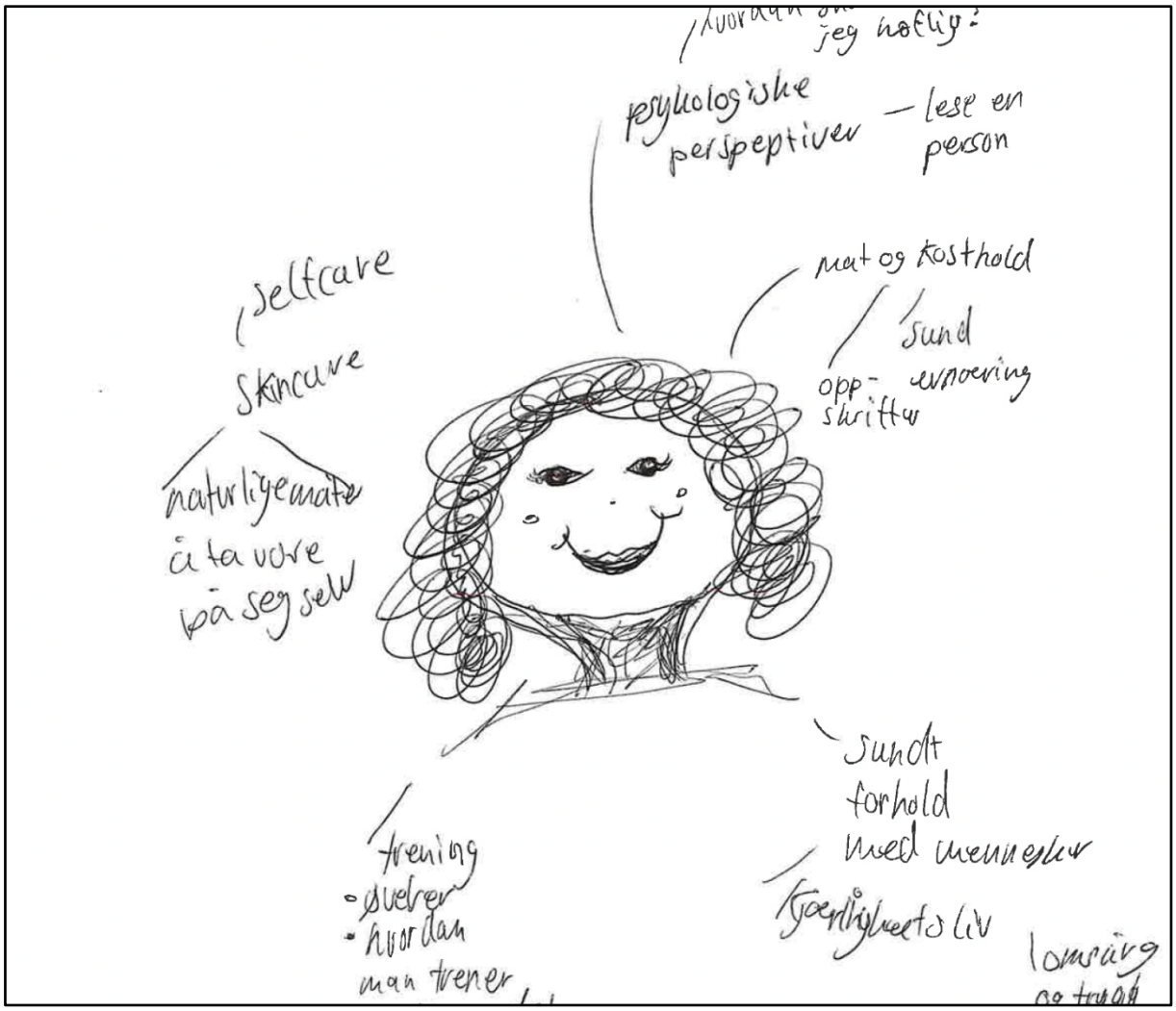
When asked what he thought of these search results, Pelle observed that he trusted the answer from ChatGPT more. However, he suspected that there might be hidden commercial agendas behind these results, and that this might be marketing to promote creatine. He thought that ChatGPT mined data from companies selling protein powder to produce these search results, which could indicate bias.

Learning about bodies, fitness, and gender ideals

Critical media literacy is particularly significant in understanding how media texts variously empower and disempower groups through gendered representations (Iyer &

Luke, 2011). Social media scholarship highlights how platforms create and reproduce bias through their recommender systems in the way they profile particular social identities and bodies (see Duffy & Meisner, 2023; Gillespie, 2022; Burgess et al., 2025). Gerrard & Thornham (2020) show how platform recommender systems promote ideals of 'consumerist, youthful and white' femininity, arguing that 'what gets generated through recommendation systems are over-simplified versions of gender and other identities' that tie in with the commercial objectives of platforms and advertisers (2020, p. 1279).

Figure 2. *A drawing made by a female participant depicting her health information landscape. The drawing features a smiling girl in the middle representing the participant linked to keywords such as "selfcare" "skin care the natural way", "taking care of oneself", "working out", "love life", and "healthy relationships with people".*



During the focus groups we asked participants to note down words that they associated with health, and key questions about health that they and their peers found most relevant. The female participants associated health information with exercise, nutrition, losing weight, and skin care routines. This reflected content they sought after and received on their social media feeds:

> Interviewer: When I say health information, what comes into your mind?
>
> Oda: I think...I think exercise, nutrition, and things like that.
>
> Amelie: Yes, I think also exercise, nutrition, how to lose weight and get a healthy body, sort of.

> Elise: And living a healthy life, nutrition also. I think of facial skin routines, about how to get rid of acne.
>
> Interviewer: How do you find information about that?
>
> Oda: I get a lot of that stuff on TikTok. There are some profiles who post such things.
>
> (focus group 4)

Across the focus groups we heard similar anecdotes from the participants about how they both sought and were exposed to different forms of advice and recommendations principally on TikTok and YouTube about exercise, diets, losing weight, and beauty tips.

The male participants in the first and second focus groups said that the health-related content they regularly received or came across on social media included many commercials and posts from influencers giving dietary advice and recommendations for dietary supplements. Work-out tutorials and images and videos of muscular and physically fit men were also prominent. The male participants said that some posts showed extremely muscular men flexing while demonstrating how to do various exercises correctly to bulk up. These participants described some of the men on display in the social media posts as 'gigantic', and they suspected that such men were probably using anabolic steroids. The incessant flows of information about fitness and images of sculpted bodies were often accompanied by moral injunctions to meet body ideals of "fit femininity" and "fit masculinity" (Rich, 2024, p. 704).

When we asked the participants in the second focus group why there was so much interest among boys their age about exercise and fit bodies, and why their social media feeds featured so much of that type of content one participant answered:

> I think maybe you see other men, slightly older teenagers than us, who have big muscles or have been training for a long time. So, we start to think that we want to have muscles like them, too. And then you become really focused on it.
>
> (Pelle, 14, focus group 2)

Some studies highlight how public pedagogies that circulate on social media are dominated by normative gendered narratives of a healthy and fit body, shaping the ways in which young people understand themselves and act over their bodies and health (Camacho-Miñano et al., 2019; Camacho-Miñano & Gray, 2021). However, as Rich (2024, p. 700) argues, far from being a straightforward process of internalization of reductive body ideals from social media, body image materializes as part of a wider assemblage of elements including discourses, humans, bodies, digital cultures, and platform infrastructures. The production of masculine and feminine body ideals involves multiple intra-actions between one's own body, the bodies of peers, bodies online, and gendered discourse among other things.

Affective pedagogies

The subject of social media influencers came up regularly when participants talked about their engagement with health and fitness social media. Participants had either heard about or actively followed different categories of influencers such as athletes, food bloggers, young members of the Norwegian royal family, and fitness entrepreneurs. Influencers share health and wellness content and their personal lives

on social media as a form of advice-giving. Hendry et al. (2022) have termed this practice of sharing information and giving advice, specifically in relation to health information "influencer pedagogy".

Reading interview transcripts across the different focus groups, we found somewhat contrasting perceptions of social media influencers. Mehdi expressed admiration for the Norwegian fitness influencer on TikTok, Kasper Kvello:

> Because I feel he conveys knowledge in a nice way. I feel he has made working out safer. When he makes videos of himself working out, he is showing that the gym is a place that is not as dangerous as people think. Many people are nervous at first when they start at the gym...he is quite nice in his videos also. And he takes time to answer all comments on his videos.
>
> (Mehdi, 17, focus group 5)

Mehdi's statement illustrates how influencer pedagogy operates by making user trust and feel connected to the influencers they follow (Topham & Smith, 2023). However, Karl and Jo from the first focus group expressed critical views regarding an American fitness influencer who openly promoted the use of steroids and narcotics:

> There is one called Fulcrum who goes around filming himself smoking weed and drinking THC or one type of pure oil and other things like that. He has made a lot of videos...it is mostly only younger people who follow him. It is important that young people realise how serious these drugs are and that it is not something to play with for fun. Some influencers try maybe to romanticize these things showing only the positive and not the negative sides.
>
> (Karl, 17, focus group 1)

We perceived a central tension emerging from these extracts. Young people may have knowledge of the unrealistic nature of the body ideals that the microcelebrities project on social media, but they still aspire to and experience desire to transform into the same types of bodies. We agree with Rich (2024, p. 708) who argues that approaches to critical media literacy that focus solely on young people's knowledge and awareness of media miss out on key "affective pedagogies" that shape their literacy practices. Rich's (2024) analysis of health, fitness, gender, and body disaffection on social media reveals how entanglements with social media can generate powerful affects such as shame, pleasure and belonging along gendered lines, which may have implications for young people's relationship with their bodies.

Limitations of the study

Since this is a pilot study, we have not accounted for what role gender, ethnicity and class might play into health literacy practices. Studies with perspectives that allow this to be examined in more depth would give a more nuanced picture.

Discussion and conclusion

In this paper we have drawn on a sociocultural approach to literacies to examine how young people learn about their health, their bodies, and wellbeing, through social media and other interactive applications. A sociocultural approach that recognizes the affective, situated, and relational aspects enables us to understand the tensions,

contradictions and ambivalences that are an integral part of young people's digital practices and meaning making processes regarding knowledge about health.

Participants expressed confidence in their ability to judge the credibility of sources and some level of understanding of the algorithmic mechanisms that curated content on social media platforms. They were aware that as users of these platforms they were subject to commercial exposure, surveillance, and data capture by platform owners. However, they fully accepted these media as part of their everyday. Fitness, nutrition, and body image messages constituted a dominant part of young people's health-related information landscape on social media. This partly functioned as a public pedagogy for understanding their bodies and gendered norms and identities. They were critical of the media images and health material they encounter in these digital environments, such as the perfected, sculpted bodies promoted by popular social media influencers some of whose bodies have been enhanced by steroids. However, like what other studies have shown "this critical awareness does not translate easily into affective capacities to disentangle from the desire of wanting their own bodies to look this way" (Rich & Lupton, 2022, p. 6).

Our arguments suggest that people working in policy, pedagogy and research about young people, digital technologies, and health could benefit from viewing literacies in a larger frame that goes beyond an emphasis on skills and competences to consider what they acquire and learn from their wider sociocultural context. Today, digital skills and the use of technology form a central part of the national curriculum in Norwegian schools, which contributes to young people's technical skills and basic digital competence. However, our study indicates that digital literacy cannot be reduced to a rationalistic formula. The choices young people make in their 'digital lives', and the consequences of such choices, are thus dependent on factors beyond basic digital competence. Social identities, socio-economic background, family, peers and relational networks may play significant roles in how young people experience, understand and utilize digital content in their everyday lives. We suggest in line with Buckingham (2007) that it is important to develop conceptualizations of literacy that integrate sensory, affective, relational, irrational aspects that reflect young people's experience of social media and digital culture in general.

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