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World Health Organization (WHO) Committee ACMUN 2024

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Novice Committee

Chair: Nik Chopra

Co-chair: Jessica Ng

A Letter From Your Chair:

Hello Delegates,

Welcome to ACMUN 2024. My name is Nikhil Chopra, and I am your chair for the World Health Organization (WHO) Committee. I am a Grade 11 student at Appleby College, and I have participated in Model United Nations for the past 5 years. In my spare time, I enjoy playing basketball and learning all about the stock market. I look forward to an amazing ACMUN experience with you all.

The World Health Organization (WHO)

The WHO is the leading global authority on public health, striving to ensure the highest possible level of health for people worldwide. With its focus on universal health coverage, emergency response, and improving health services, the WHO is crucial in addressing contemporary health challenges, including those exacerbated by the digital age.

As we navigate the complexities of the 21st century, the impact of social media on mental health and the proliferation of health misinformation in the wake of the COVID-19 pandemic emerge as pressing concerns. Delegates in this committee are tasked with exploring these issues and



formulating comprehensive strategies to mitigate their adverse effects on global well-being.

Topic 1: The Impact of Social Media on Mental Health

In this committee, delegates will delve into the psychological consequences of excessive social media, exploring issues such as cyberbullying, anxiety, and the influence of online personalities. Delegates must address both the positive and negative aspects of social media when proposing solutions for a healthier online environment.

Introduction:

The pervasive presence of social media in the lives of adolescents has become increasingly challenging to ignore. Digital platforms present risks to teenagers, such as privacy concerns, cyberbullying, and detrimental effects on mental well-being. The widespread use of cell phones and various media forms among youth also contributes to chronic sleep loss, negatively impacting cognitive abilities, academic achievements, and socio-emotional functioning.

Studies suggest a correlation between smartphone and social media use among teenagers and increased mental distress, self-harming behaviors, and suicidal tendencies. However, it is crucial to acknowledge that the ethical use of social media can also provide opportunities for connection, facilitate meaningful conversations, boost self-esteem, promote health, and afford access to vital medical information.

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• Social media are digital platforms and technologies facilitating the creation and exchange of user-generated content and information in virtual communities and networks.

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- Mental health is the state of well-being where an individual realizes their potential, copes with the normal stresses of life, works productively, and contributes to their community.
- Digital Well-Being: The state of optimal mental and emotional health in the context of digital technologies and online interactions.
- Online personalities are individuals who gain popularity and influence through social media platforms, often shaping trends, attitudes, and behaviors among teenagers.

History:

The surge of the internet, computers, smartphones, and various electronic gadgets has brought undeniable benefits to users but has also become a substantial public health concern. 62.3% of the world's population uses social media. The global number of social media users saw an 8% annual increase in 2023, reaching 5.04 billion as of January 2024.

Excessive screen time is correlated with an increase in depression, anxiety, disrupted sleep patterns, diminished self-esteem, body dysmorphia, eating disorders, and suicidal ideation. There is also a potential association between excessive social media usage and attention-deficit/hyperactivity disorder in adolescents. Such risks are more pronounced among girls, LGBTQ individuals, and those grappling with preexisting mental health challenges.

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Since 2014, the WHO has been actively addressing the public health implications of excessive screen time and digital engagement. At the inaugural WHO meeting in Tokyo, Japan, in 2014, global experts convened to review existing evidence concerning the health conditions stemming from excessive internet and smartphone usage. In 2015, the second WHO gathering in Seoul, Republic of Korea, examined the clinical profiles of behavioral disorders arising from excessive digital engagement. The third WHO meeting in 2016 emphasized prevention and treatment strategies to mitigate social media-related public health challenges. In 2017, the fourth WHO Assembly on addictive behaviors, convened in Istanbul, Turkey, examined the conceptual and clinical validity of gaming and gambling disorders and discussed strategies for clinical management.

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Current situation/Discussion:

The latest data indicates that all teens (95%) ages 13 to 17 use social media, and more than 1 in 3 reports that they use it "almost constantly." 40% of children ages 8 to 12 use social media, despite the minimum user age of 13 years on most U.S. platforms. In 2019, a study found that teenagers who spent over three hours daily on social media doubled their likelihood of suffering from mental health conditions. In fact, 67% of teenagers claimed that using social media made them feel worse about themselves. 59% of teenagers report experiencing cyberbullying and online harassment. Even more disturbing is that 40% of teenagers using social media have received, and 52% have sent, explicit content on such platforms.

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The WHO is actively engaged in devising strategies, programs, and resources aimed at assisting governments in meeting the mental health needs of adolescents. One notable initiative in this regard is the Helping Adolescents Thrive (HAT) Initiative, a collaborative effort between WHO and UNICEF. The primary focus of this initiative is to bolster policies and programs to foster mental well-being, prevent mental health disorders, and mitigate risky behaviors such as substance abuse and self-harm.

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The WHO has also developed a module dedicated to child and adolescent mental and behavioral disorders, which offers evidence-based clinical protocols for the assessment and treatment of various mental health issues within non-specialized healthcare settings. Moreover, WHO is actively engaged in the development and testing of scalable psychological interventions targeted at addressing emotional disorders prevalent among adolescents.

Furthermore, WHO's Regional Office for the Eastern Mediterranean has crafted a comprehensive mental health training package designed for educators. This package aims to enhance understanding of mental health within educational settings and to provide educators with the necessary tools to promote, safeguard, and restore mental well-being among students.

Key Stakeholders:

• WHO seeks to address social media-related mental health issues, advocate for evidence-

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based interventions, and collaborate with member states and

- National governments can regulate digital platforms to protect teenagers from harmful content and cyberbullying and promote mental health education.
- Social media companies have implemented measures to address cyberbullying and promote digital well-being, but more stringent regulations and transparency are

Questions to consider:

- What are the primary factors contributing to the negative impact of social media on teenage mental health?
- How can governments and social media companies collaborate to regulate harmful content and cyberbullying on digital platforms?
- What role can schools and communities play in promoting digital well-being and resilience among teenagers?
- What strategies can be employed to empower teenagers to navigate social media responsibly and mitigate its adverse effects on their mental health?
- How can international cooperation and knowledge-sharing facilitate the development of effective interventions to address the impact of social media on mental health globally?

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Topic 2: Managing Health Misinformation in a Post-COVID World

This committee delves into the critical issue of health misinformation in the post-COVID era, exploring strategies to counter false narratives and advance correct scientific knowledge to the public. The committee will emphasize public health efforts and the importance of societal measures, including policy interventions and technological innovations.

Introduction:

The rapid dissemination of digital information has exacerbated health misinformation, leading to widespread confusion and mistrust, particularly during public health emergencies.

Pandemic-related disinformation had a profound impact on public health by fueling panic and

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Key Terms and Definitions:

- Misinformation: false or misleading information that was not created with the intention of hurting others. Everyone believes they are sharing crucial information to keep others safe and well, but the misinformation can be harmful.
- Disinformation: false information created to profit from it or cause
- Infodemic: Too much information, including false or misleading information, causes confusion and intensifies or lengthens outbreaks. It also leads to mistrust in health authorities and undermines the public health response.
- Vaccine hesitancy: delay in acceptance or refusal of
- Media literacy is the ability to critically analyze stories presented in the mass media and determine their accuracy or credibility.

History:

In the years leading up to the pandemic, there was a noticeable surge in false information circulating through social networks, accompanied by the emergence of various fact-checking

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initiatives. In the early months of the pandemic, the focal point of disinformation (and information) centered on COVID-19, which undermined public trust in health authorities, fueled vaccine hesitancy, and contributed to the spread of the virus.

The unprecedented government pandemic measures, such as lockdowns and quarantines, resulted in an increase in the dissemination of false content worldwide. False content was generated and propagated through social networks and instant messaging applications, particularly WhatsApp. The misinformation encompassed details about government measures, statistics, and economic impacts, fostering a growing distrust in official narratives. In 2022, a systematic review found that the proportion of health-related misinformation on social media was as high as 28.8%. It also found that 20–30% of YouTube videos about emerging infectious diseases contain inaccurate or misleading information.

In 2020, WHO passed a resolution recognizing that managing the epidemic was a critical pandemic response. The resolution called on member states and international organizations to address misinformation and disinformation in the digital sphere, work to prevent harmful cyber activities undermining the health response, and support science-based data dissemination. In the US, Section 230 of the Communications Decency Act, which grants online platforms legal immunity from the content shared by third parties, is currently being challenged.

Current Situation/Discussion:

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The WHO is collaborating with social media platforms to ensure robust content guidelines and utilizing reporting systems to swiftly identify and remove false or misleading content. The organization partnered with YouTube to offer clear guidelines to content creators to prevent pandemic-related disinformation. These policy enhancements resulted in the removal of approximately 850,000 harmful or deceptive COVID-19 videos.

WHO also leverages data insights through platforms like YouTube, Google, TikTok, and Facebook, as well as entities like NewsGuard. This collaboration allows WHO to access innovative insights on emerging misinformation trends and empowers the media platform to deploy sciencebased health information and messages from WHO or other authoritative sources. Tools to amplify public health messages, including the WHO Health Alert chatbot, which is accessible on WhatsApp, Facebook, and Viber, serve as a resource to deliver.

up-to-date news and information, offering guidance on how individuals can safeguard themselves and others from any pandemics.

Additionally, the WHO has developed guidance for navigating an infodemic, and it collaborates with member states to raise awareness regarding misinformation, urging individuals to report false or deceptive online content.

Key Stakeholders:

• The WHO is central to coordinating global efforts to combat health misinformation and

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providing guidance, resources, and technical expertise to member states.

- National governments can counter health misinformation to protect public health, maintain social cohesion, and ensure the effectiveness of public health.
- Social media platforms face pressure to implement stricter content moderation policies and promote accurate health information.
- NGOs and advocacy groups can raise awareness about the dangers of health misinformation, advocate for policy changes, and promote media literacy.
- Healthcare professionals have a stake in countering health misinformation to ensure that patients receive accurate information about their health and treatment options.

Questions to consider:

- What are the root causes of health misinformation, and how can they be addressed?
- What role do social media platforms play in spreading health misinformation, and how can they be held accountable?
- What strategies can be employed to promote accurate health information and combat vaccine hesitancy?
- How can governments and international organizations collaborate to coordinate efforts to counter health misinformation?
- What role can media literacy programs play in equipping the public with the skills to discern credible health information from misinformation?



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