



SNISMUN VII

WHO

BACKGROUND GUIDE



WORLD HEALTH ORGANIZATION (WHO)

Addressing the Impact of Social Media on the Mental Health of Children and Adolescents

Letter from the Executive Board Dear Delegates,

Welcome to the World Health Organization committee for SNISMUN 26'. Whether this is your first conference or your fifteenth, we hope you leave having learned something about how the world's health authority actually works. Our agenda this year touches almost every delegate in this room personally: what should the world do about the effect social media is having on the mental health of children and adolescents? Nearly every teenager alive today has grown up with a phone in their pocket and a feed that never stops. Doctors, parents, governments, and tech companies disagree sharply about whether that is a crisis, a manageable risk, or something in between and about who should be responsible for fixing it if it is a problem at all. This guide covers the science, the arguments on each side, and the laws and court cases that have already tried to deal with this issue. Your job as a delegate is not to repeat what your country's newspapers say, and it is not to decide who is "right." Your job is to represent your country's actual position, back it with real evidence, and work with other delegates to draft a resolution WHO could plausibly adopt. Some of the best speeches in this committee will come from delegates who can explain why a country skeptical of banning social media, or one that has already banned it for under-16s, holds that view not from delegates who simply agree that social media is "bad" and stop there. A few practical notes. Treat every fact in this guide as a starting point you could look up and go deeper on, especially anything specific to your country. If you get stuck, reach out to us before the conference. See you starside, delegates.

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WHO

Introduction to the Committee:

Origins and establishment :

The World Health Organization was created on 7 April 1948, when its Constitution came into force after signature at the International Health Conference in New York in 1946. WHO was established as a specialized agency of the United Nations, taking over functions previously held by smaller bodies such as the League of Nations' Health Organization. Its founding document made a claim that was unusual for its time: health is not simply "not being sick." The WHO Constitution defines health as a state of complete physical, mental, and social well-being placing mental health on equal footing with physical health nearly 80 years ago, well before most governments treated mental health as a serious policy area.

Mandate and objectives:

WHO's constitutional objective is simple to state and enormous in scope: "the attainment by all peoples of the highest possible level of health." In practice, this means WHO sets global health norms and standards, coordinates international responses to health threats, supports countries in building their health systems, and shapes the research agenda for global health. WHO cannot pass binding laws the way a national parliament can. Its influence works through technical guidance, recommendations, model policies, and the scientific authority that comes with being the WHO.

Organizational structure:

WHO has three main decision-making layers. The World Health Assembly (WHA) is WHO's supreme decision-making body, made up of delegations from all 193 member states; it meets every May in Geneva to set policy, approve the budget, and elect the Director-General. The Executive Board, made up of 34 members technically qualified in health and elected for three-year terms, meets in January to prepare the agenda and recommendations for the WHA. The Secretariat, led by the Director-General (currently Dr Tedros Adhanom Ghebreyesus, in his second term since 2022), carries out the day-to-day technical and administrative work. Regional offices including the WHO Regional Office for Europe, which runs the adolescent health survey discussed later in this guide adapt global guidance to local conditions.



How WHO's authority actually works :

Almost everything WHO produces on adolescent mental health and social media is non-binding. A WHO guideline, action plan, or resolution recommends that member states act; it does not compel them to. States remain free to ignore WHO advice entirely, and much of internet and technology regulation falls outside WHO's own technical expertise, overlapping instead with telecommunications regulators, data protection authorities, and education ministries. WHO's power in this space is the power of evidence and coordination, not enforcement, so this committee's resolution will need to rely on persuasion, funding incentives, and technical support rather than punishment to get anywhere.

WHO, with respect to the Agenda :

WHO already works on child and adolescent mental health through programmes such as the Comprehensive Mental Health Action Plan and the mental health Gap Action Programme (mhGAP), and it co-runs the Health Behaviour in School-aged Children (HBSC) survey a study of roughly 280,000 adolescents across more than 40 countries that has, in recent years, started tracking social media use directly. WHO is not coming to this topic cold: it already collects some of the best cross-national data on how adolescents use social media and how they say they feel. What WHO has not yet done is bring those pieces together into a coherent policy framework. That is this committee's task.

Introduction to the Agenda :

Social media use among adolescents went from rare to nearly universal in under fifteen years. In the United States, surveys now find that up to 95% of 13-to-17-year-olds use some social media platform, and more than a third say they use it "almost constantly." This is not confined to one country; smartphone ownership and social platform use have spread through middle- and lower-income countries as fast as, or faster than, in wealthy ones, often without regulation or digital literacy programs to match.

At the same time, rates of anxiety, depression, and self-harm among adolescents, particularly girls, have risen sharply in many high-income countries since around 2010, roughly when smartphones with social media became commonplace among teenagers. Some researchers, most prominently the social psychologist Jonathan Haidt, argue this is not a coincidence. Haidt's case, laid out in his book *The Anxious Generation*, is that social media use directly causes rising adolescent anxiety and depression rather than merely correlating with it. Other researchers, including psychologist Candice Odgers, argue the evidence for a strong causal link is much weaker than Haidt claims, and that focusing on social media distracts from other likely causes of economic stress, school pressure, or the pandemic. This disagreement matters for your debate: the right policy response to "we're not fully sure yet, but the risk looks serious" is different from the right response to "this is a proven, direct cause of harm."

What is not seriously disputed is that social media carries both real benefits and real risks. On the benefit side: it helps adolescents stay connected to friends, find communities of people who share their interests or identities (this matters especially for LGBTQ+ youth and adolescents with disabilities, who may struggle to find in-person communities), and access information and support they might not get elsewhere. On the risk side: exposure to content promoting self-harm, eating disorders, or suicide; cyberbullying; disrupted sleep; social comparison and body-image pressure; and business models built around keeping users, including children, scrolling for as long as possible.



Four tensions will come up again and again in this guide. You should have a position on each before you arrive:

- **Protection vs. autonomy.** Adolescents are not adults, but they are also not small children. They have a right to participate in public life, express themselves, and make some decisions for themselves. How much should governments restrict a 15-year-old's online life "for their own good"?
- **Acting now vs. waiting for certainty.** Should the committee recommend strong action based on the evidence available today, or wait for clearer proof of cause and effect first?
- **Whose job is it?** Is this a problem for governments to regulate, for tech companies to fix voluntarily, for parents to manage at home, or some mix of the three?
- **One world, many rules.** Social media platforms operate across borders instantly; national laws do not. How much can any single country accomplish alone?

This committee's job is not to settle these tensions in the abstract; they will still exist after this conference ends. Your job is to build a resolution that gives WHO member states a workable way forward despite them.

Key Definitions:

1. Adolescent: WHO defines an adolescent as a person between the ages of 10 and 19 wider than the "teenager" category most people think of, and inclusive of the developmental window (roughly ages 10–14) when brains are especially sensitive to social feedback and peer approval, the mechanism social media is often accused of exploiting.

2. Social media platform: A digital service whose primary purpose is letting users create accounts, connect with others, post content, and see content chosen for them by the platform. Australia's social media law, for example, exempts messaging apps, gaming platforms, and educational tools specifically because they are not built around open content-sharing and algorithmic feeds the way similar to Instagram or TikTok.



3. Algorithmic recommender system: The software that decides what content a user sees next, based on what keeps them engaged rather than what they asked to see. Most of the policy debate in this guide is really a debate about design, not content critics argue the problem is not that harmful content exists somewhere online, but that recommender systems are built to find and repeatedly surface the content most likely to keep a young user scrolling, which is not always the content best for their well-being.

4. Problematic or compulsive social media use: A pattern of use that a person finds difficult to control, that interferes with sleep, schoolwork, or in-person relationships, and that continues despite the person wanting to cut back. WHO and most researchers treat compulsivity and interference with daily life, not hours alone, as the marker of a problem.

5. Cyberbullying: Repeated, intentional harm carried out through digital devices or platforms including harassment, humiliation, or exclusion that follows a child from school into their home, and often into the middle of the night, in a way traditional bullying could not.

6. Age assurance: Any method a platform uses to determine or verify a user's age, ranging from simply asking a user to self-report their birthdate (the current global norm, and easy to falsify) to government ID checks, facial-age-estimation software, or behavioral inference. Almost every regulatory proposal in this guide depends on some form of age assurance working, and, as the case studies below show, that is currently the weakest link in the whole system.

Challenges with respect to the current Agenda

1. Is social media actually causing the harm, or just correlated with it?

Before any policy question, there is a scientific one. Jonathan Haidt's collaborative reviews with researchers Zach Rausch and Jean Twenge argue that once you look closely at the data particularly for girls, and particularly for heavy daily use the link between social media and depression, anxiety, and self-harm is too consistent across countries to be a coincidence. Critics, led by Candice Odgers, argue that most individual studies find only small correlations, that Haidt's conclusions rely heavily on selecting studies that support his case, and that adolescent mental health has worsened for reasons that have little to do with any one app economic anxiety, climate anxiety, the aftereffects of the COVID-19 pandemic, reduced in-person socializing generally. The U.S. Surgeon General's 2023 advisory tried to split the difference: it stated plainly that the evidence is not yet strong enough to call social media "safe" for children, without going as far as declaring it a proven cause of harm. This unresolved question is why some delegations will push for immediate, forceful restrictions while others will argue for continued research and lighter-touch measures and neither position is scientifically indefensible.

2. How platforms are designed to keep young users engaged

A large part of this debate is not about what content exists online but about how platforms are built. Design features such as infinite scroll (no natural stopping point), autoplay, streaks, and push notifications are built by design teams whose job is to maximize time spent on the app, because more time means more advertising revenue. Internal Meta research disclosed by whistleblower Frances Haugen in 2021 found that Instagram made body-image issues worse for a meaningful share of teen girls who were already struggling research the company had not made public well before it made significant changes. The EU's Digital Services Act and the UK's Online Safety Act both now legally require large platforms to assess and reduce these design-driven risks specifically for minors, rather than simply moderating individual harmful posts after the fact.

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3. Age limits and age verification

Several governments have concluded that some risks cannot be designed away, and that the safest response is to keep children off these platforms below a certain age. Australia's approach of a hard minimum age of 16, with no parental override, backed by fines of up to roughly AUD \$50 million for non-compliant platforms is currently the most aggressive model in the world and is being closely watched elsewhere. Its central weakness is enforcement: platforms are required only to take "reasonable steps," verifying age reliably online is technically difficult, and reports from the law's first weeks already describe children using VPNs or fake birthdates to get around it. This gap between a rule that sounds simple in a headline and one that is hard to enforce in practice will come up in almost every age-related proposal your committee considers.

4. Exposure to self-harm, suicide, and eating-disorder content

Beyond design and age limits is the direct question of harmful content reaching vulnerable adolescents sometimes because they searched for it, sometimes because a recommender system pushed it toward them unprompted. The Molly Russell case, covered in detail below, remains the clearest example of a coroner's court formally concluding that content exposure contributed to a child's death. Platforms have made real changes since Instagram, for instance, now restricts graphic self-harm imagery even in stylized or non-graphic form but researchers and advocacy groups continue to find gaps. This remains one of the most emotionally difficult issues for any resolution to address without overreaching into censorship on one hand or underreacting to a genuine, documented risk on the other.

5. Cyberbullying and peer harm

Unlike playground bullying, cyberbullying does not stop when a child leaves school grounds, and it often happens through the same platforms adolescents use to maintain their friendships meaning victims frequently cannot simply "log off" without also losing access to their peer group. WHO's HBSC survey has tracked cyberbullying alongside traditional bullying for several survey cycles and found it to be a persistent, cross-national problem rather than one confined to any particular country's culture or platform mix. The EU's DSA and the UK's Online Safety Act now specifically require platforms to build in reporting and blocking tools aimed at this problem, though enforcement is new enough that its real-world effectiveness is still being measured.

6. Body image, social comparison, and gendered impact

Much of the strongest evidence of harm is concentrated among adolescent girls specifically, centered on image-based platforms like Instagram. Meta's own leaked internal research found that a meaningful share of teen girls already struggling with body image said Instagram made those feelings worse. This is not simply a story about screen time critics argue it is specifically about platforms built around curated photos, follower counts, and algorithmically surfaced comparison points, which affect boys and girls differently and affect different platforms differently. A resolution that treats "social media" as one undifferentiated category may miss this: the risks of a photo-and-follower-based platform are not the same as the risks of a messaging app or an educational video platform.

7. Company self-regulation vs. binding government law

Facing lawsuits, congressional pressure, and new laws, Meta introduced "Instagram Teen Accounts" in September 2024, automatically applying stricter privacy defaults, message restrictions, and content filters to under-18 accounts a case of industry self-regulation responding to outside pressure rather than a legal requirement. Independent research published in 2025 found that a majority of young teen users surveyed still reported experiencing unsafe content or unwanted contact within the past six months, despite the new settings being in place. That gap between an announced safety feature and its measured effect is why some delegations argue self-regulation cannot substitute for binding law with independent enforcement, while others argue government mandates move too slowly and industry can iterate faster.

8. Data privacy and profiling of children

Every recommender system runs on data about what a user watches, likes, and lingers on, and children's engagement data is collected and used to shape what they see next just like anyone else's, unless a law specifically says otherwise. The EU's DSA Article 28 directly bans platforms from showing targeted ads to a user they know, with reasonable certainty, to be a minor, and the European Commission's 2025 guidelines go further, recommending that platforms avoid persuasive design features like infinite scroll for young users and give minors clear, unavoidable warnings before they change privacy settings. Very few countries outside the EU currently have anything as specific in binding law as a gap this committee could address.



9. Whose responsibility is it parents, platforms, or the state?

Every proposal in this guide implicitly assigns responsibility to someone. Age-verification laws put the burden on platforms. Parental-control tools put the burden on families, but only work if parents have the time, knowledge, and involvement to use them, which is not equally true across income levels or family structures. Content-moderation laws put the burden on governments to define and enforce standards. Most real national laws, including the ones profiled in this guide, mix all three, but disagree sharply about which one should carry the primary weight of a genuine, values-based dividing line your delegation will need a position on.

10. Equity: this is not only a wealthy-country problem

Almost every high-profile law and lawsuit in this space so far has come from wealthy, high-connectivity countries Australia, the UK, the EU, the United States. But smartphone and social media adoption in many lower- and middle-income countries has grown just as fast, often without the digital literacy programs, mental health infrastructure, or regulatory capacity that wealthier countries are drawing on to respond. A resolution built only around the tools available to rich countries sophisticated age-verification technology, large regulatory bodies like Ofcom, expensive public health campaigns risks being unworkable for the majority of WHO's 193 member states.

11. Borders don't stop platforms

A law passed in one country applies, at most, to users physically located there, but the same platform, the same recommender system, and often the same harmful content exist everywhere at once. Australia's government has explicitly said it expects platforms to use methods such as behavioral analysis to catch a child who uses a VPN to appear to be logging in from another country, an enforcement approach that is both technically difficult and raises its own privacy concerns. Any resolution that assumes national laws alone can solve this problem is not accounting for how borderless these platforms fundamentally are.



Case Studies:

1. The Molly Russell Inquest (United Kingdom, 2022)

Molly Russell, a 14-year-old from London, died by suicide in November 2017 after viewing a large volume of content related to self-harm, depression, and suicide on Instagram and Pinterest. In the six months before her death, she had saved, shared, or liked over 16,000 posts on Instagram, of which more than 2,000 related to depression, self-harm, or suicide much of it reaching her through the platforms' own recommendation systems rather than her own searches. In September 2022, following a two-week inquest at which senior Meta and Pinterest executives were compelled to give evidence in person, senior coroner Andrew Walker ruled that Molly "died from an act of self-harm while suffering from depression and the negative effects of online content," and that the material she viewed was "not safe" and "shouldn't have been available for a child to see." This was one of the first times a court anywhere in the world formally concluded that specific platform content contributed to a child's death, rather than treating the platforms as neutral bystanders.

How it bears on the committee's tensions: This case sits squarely inside the content-exposure debate (Issue 4) and the platform-responsibility debate (Issue 9). It also cuts against "acting now vs. waiting for certainty" in an interesting way: the ruling did not wait for a large statistical study it treated one well-documented individual case as sufficient grounds for legal and moral judgment. Some delegations will want that standard reflected in international guidance; others will resist it as too case-by-case to build broad policy on.

2. The 2021 Facebook/Instagram Internal Research Leak

In 2021, former Facebook product manager Frances Haugen left the company with tens of thousands of pages of internal documents, which she gave to the Wall Street Journal and later to the U.S. Congress. Among the most damaging revelations was internal Instagram research finding that 32% of teen girls who felt bad about their bodies said Instagram made those feelings worse, and that meaningful shares of teens linked the app to worsening suicidal thoughts and eating-disorder symptoms research the company had not made public before the leak. Haugen testified before the U.S. Senate in October 2021 that Facebook had "repeatedly" chosen profit over user safety.



How it bears on the committee's tensions: This is the clearest example in the guide of the self-regulation problem (Issue 7): a company with internal evidence of harm that did not act on it publicly until outside pressure forced its hand. It is a useful counterweight to Australia's case study below, where the response has been legally binding and government-led rather than voluntary.

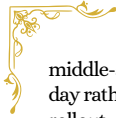
3. Australia's Under-16 Social Media Ban (2024 law; effective 10 December 2025)

In November 2024, Australia's parliament passed the Online Safety Amendment (Social Media Minimum Age) Act with rare bipartisan support, setting a hard minimum age of 16 for accounts on major platforms including Instagram, TikTok, Snapchat, Facebook, X, and YouTube. Unlike most age-limit laws elsewhere, parents cannot consent to let a younger child use these platforms, and the burden falls on companies which face fines of up to roughly AUD \$50 million to take "reasonable steps" to keep underage users off their services. The law took effect on 10 December 2025. Early implementation reports describe over 200,000 TikTok accounts deactivated in Australia within the first day, alongside widespread reports of children using VPNs, falsified birthdates, or drawn-on facial hair to defeat age-estimation software, and government officials publicly acknowledging that "100% universal" compliance was never realistic.

How it bears on the committee's tensions: This is the strongest real-world test of the protection-vs.-autonomy tension (Issue 1) and the enforcement problem running through Issue 3. A government willing to act decisively despite scientific uncertainty still ran, within weeks, straight into the "one world, many rules" problem and the limits of enforcement even with strong political will and serious financial penalties behind the law.

4. France's School Phone Ban (2018, expanded 2024–2025)

In August 2018, France banned mobile phone use in nurseries, elementary schools, and middle schools nationwide, going further than an earlier 2010 rule that had only banned phone use during class time. Independent economic research published afterward found that schools with the ban saw improved test scores, with the largest gains among previously low-performing students, leading researchers to describe restricting phone access as "a low-cost policy to reduce educational inequalities." Building on that result, France piloted an expanded "digital pause" program in 2024, requiring roughly 50,000



middle-schoolers across 180 schools to hand in their phones for the entire school day rather than merely keep them switched off, ahead of a possible nationwide rollout.

How it bears on the committee's tensions: Unlike the other three cases, this is a restriction that is both measurably effective and relatively easy to enforce, precisely because it operates in a physically bounded space in a school building rather than trying to regulate an unbounded online platform. It is useful evidence that some interventions in this space work far better than others, and a caution against assuming every proposal in your resolution will be as hard to enforce as an online age-verification system.

Legal and Normative Framework

1. The UN Convention on the Rights of the Child (1989):

The CRC is the most widely ratified human rights treaty in history and is legally binding on the states that have ratified it. It guarantees children's rights to health, protection from harm, freedom of expression, and participation in matters affecting them all directly relevant here, since restricting a teenager's social media access touches both their right to protection and their right to participation and expression. Written in 1989, decades before social media existed, it says nothing specific about recommender systems, age verification, or online content design.

2. General Comment No. 25 on Children's Rights in the Digital Environment (2021).

To close that gap, the UN Committee on the Rights of the Child adopted General Comment No. 25 in March 2021, after consulting with over 700 children across 27–28 countries. It is the most direct authoritative guidance connecting the CRC's binding obligations to digital life specifically, stating that children's best interests must be a primary consideration in the design, regulation, and use of digital services, and calling for "child rights impact assessments" before governments or companies make major digital-policy decisions. A General Comment is an interpretive guide, not a binding treaty provision in its own right; it carries real weight in how the CRC is interpreted, but no state can be formally found in violation of it the way it can be found in violation of a treaty article.



3. WHO's Comprehensive Mental Health Action Plan (2013–2030).

This is WHO's own core policy framework for mental health, adopted by the World Health Assembly and built around a "life-course approach" that explicitly includes adolescence as a distinct stage requiring its own strategies. It calls on member states to build mental health promotion and prevention into national policy and to pay particular attention to at-risk groups, including youth. It is a broad framework covering all mental health issues across every age group and says nothing specific about social media, digital design, or online content; it gives this committee's resolution an institutional foundation to build on, not a ready-made answer.

4. The EU Digital Services Act, Article 28 (2022; Commission guidelines, 2025).

Article 28 legally requires platforms accessible to minors to put in place "appropriate and proportionate measures" to protect their privacy, safety, and security, and bans targeted advertising to users a platform knows, with reasonable certainty, to be minors. In July 2025, the European Commission issued detailed guidelines non-binding in themselves but treated by regulators as the benchmark for compliance recommending private-by-default settings for minors' accounts, limits on manipulative design features like infinite scroll, and restrictions on default-activated AI chatbots for young users. It binds only the 27 EU member states (plus the EEA), leaving the rest of the world, including some of the largest markets for these platforms, outside its reach.

5. Australia's Online Safety Amendment (Social Media Minimum Age) Act (2024).

Covered in detail in the case studies above, this is currently the single most restrictive binding national law in this space, a hard minimum age with no parental override and among the largest platform fines anywhere in the world. "Reasonable steps" is a legally vague standard, enforcement against determined workarounds is genuinely difficult, and the law binds only Australia, meaning a platform's obligations, and a child's actual level of protection, still depend entirely on which country they happen to be logging in from.



Conclusion

Put these frameworks next to the issues discussed above, and the gap is clear. The CRC and General Comment No. 25 offer the right values protection, participation, and the best interests of the child but neither was written with enough technical specificity to tell a platform, a parent, or a government exactly what to do about a recommender system or an age-verification loophole. WHO's own mental health framework gives adolescents institutional priority but says nothing about digital design specifically. And the laws that do get specific to the EU's DSA, Australia's ban, the UK's Online Safety Act only bind the countries that passed them, leaving most of WHO's 193 member states to work this out with far fewer resources and far less legal infrastructure than Brussels, Canberra, or London have used.

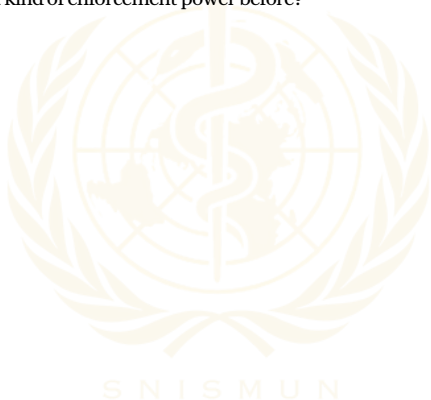
Real, evidence-backed harms; strong human-rights language; and a patchwork of binding law covering only a fraction of the world's adolescents; that is what this committee has to work with. WHO cannot pass a binding global law. What it can do is turn the evidence it already collects through programs like HBSC into technical guidance specific enough to be useful, and give lower-resource member states a realistic path to protecting their adolescents that does not depend on Ofcom-sized regulators or Australia-scale enforcement budgets.

Questions a Resolution Must Address

1. Should WHO recommend a specific minimum age for social media use, or leave age policy to national governments while focusing on design and content standards instead?
2. Given how weak self-reported birthdates are as an age-verification method, what should WHO recommend as a realistic, privacy-respecting alternative especially for member states without the technical capacity of the EU or Australia?
3. How should responsibility be divided between platforms, governments, and parents in a WHO framework, and does that division need to look different in high-income and low-income countries?

4. What should WHO recommend for adolescents who rely on social media for genuine benefits peer support, community for LGBTQ+ youth, connection for adolescents with disabilities so that any restriction does not simply remove those benefits along with the risks?

5. Should WHO's role be limited to research and technical guidance, or should it more actively coordinate binding international standards, even though it has never had that kind of enforcement power before?





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