



# **Background Guide**

## **World Health Organization**

### **NVMUN 2025**

## Director's Letter

Dear delegates,

My name is Alyssa Chan, and I am honoured to welcome you all to the World Health Organization committee for NVMUN 2025. On behalf of your other dais team members, Ethan Leung—your chair, and Anderson Loo—your vice-chair, we hope you will all enjoy reading about and researching this committee's topic: The Mental Health Epidemic in the Digital Age.

As entertaining and intertwined social media and technology is in our lives, its negative mental health consequences can often outweigh the benefits. Thus, the World Health Organization is becoming increasingly concerned with the correlation between poor mental health and overuse of social media. In this committee, delegates will have to tackle this concern, while keeping in mind the socioeconomic statuses and viability of solutions implemented.

It doesn't matter if you are a new delegate, shakily raising your placard for the first time, or a seasoned delegate who knows the ins and outs of debate—I hope you gain new experiences, step out of your comfort zone, and see the world from a new perspective at this conference.

A reminder that position papers are required to be considered for an award, due on **October 17th by 11:59pm** at [who@nvmun.org](mailto:who@nvmun.org). Should any questions regarding position papers or the committee in general arise, please feel free to contact the email address. We look forward to seeing all of you raising your placards and hearing you speak!

Sincerely,

Alyssa Chan  
World Health Organization Director, NVMUN 2025

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## Committee Overview

During a United Nations Conference in 1945, Chinese and Brazilian delegates motioned to set up an international health organization. Though health was originally not supposed to fall under the United Nation's jurisdiction, the suggestion was unanimously agreed upon.<sup>1</sup> Thus, on the 7th of April 1948, the very first global health organization—the World Health Organization—was born.<sup>2</sup> At the time, there were still regional health organizations, such as the Pan-American Sanitary Board and the Office International d'Hygiène Publique. Eventually, some of these organizations became autonomous and regional bodies of the World Health Organization.<sup>3</sup>

The World Health Organization operates under guiding principles outlined in its Constitution, which emphasize that health is a state of complete physical, mental, and social well-being, not just the absence of disease. The enjoyment of the highest attainable standard of health is considered a fundamental right for all people, regardless of race, religion, or social status. Achieving global health is crucial for peace and security, relying on cooperation between individuals and nations. The progress made by any country in promoting and protecting health benefits all, and unequal health development, especially in controlling communicable diseases, poses a common global threat. The healthy development of children is essential for adapting to a changing environment, and the extension of medical, psychological, and related knowledge to all people is crucial for attaining full health. Active public cooperation and informed opinions are key to improving health worldwide. Finally, governments are responsible for ensuring the health of their populations by providing adequate health and social measures.

Every year in the World Health Organization, its 192 member nations meet together at the World Health Assembly. Here, the budget is approved and reviewed, the focus of the year is determined, and the executive board and director-general are elected. Members elected for the executive board serve three-year terms and are well-qualified in the health field. These executive board members are the driving force behind the choosing of which areas to focus on, as well as the nomination of the director-general.<sup>5</sup> Decisions made by the board and director-general are then carried out by the 8000+ public health experts of the World Health Organization, from doctors and nurses, to scientists and managers.<sup>6</sup>

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1. <https://health.howstuffworks.com/medicine/healthcare/who.htm>

2. <https://www.who.int/about/history>

3. Ibid.

4. <https://www.who.int/about/governance/constitution>

5. Ibid.

6. <https://www.who.int/about/who-we-are>

## Topic Overview

The advent of technology has brought forth efficient systems, influenced the way in which humans transfer and access information, and overall, is now inseparable from our daily lives. Most importantly, communication has become globalised with the increasing popularity of social media. Creating, sharing, and aggregation of ideas and interests are more convenient than ever—messages can reach users across the world in a matter of seconds; media is spread faster than conventional methods; businesses advertise and sell a plethora of products.<sup>7</sup>

As convenient social media has made life, the increasing presence of digital technologies has directly contributed to the rise of mental health disorders, which are especially prevalent among adolescents.<sup>8</sup>

## Timeline of Events

**[April 7th, 1948]** - The World Health Organization was created, signed by all 51 countries in the United Nations at the time.<sup>9</sup>

**[1997]** - The first genuine social media site, Six Degrees, was born, allowing users to upload profile pictures, send messages, post bulletin board items, and connect with others.<sup>10</sup>

**[January 1st, 2000]** - The first ad-financed social media site, Lunar Storm, was launched.<sup>11</sup>

**[May 5th, 2003]** - LinkedIn emerged, a new form of social media entirely for business and creating networks between employers and employees.<sup>12</sup>

**[February 4th, 2004]** - Facebook is launched as a social media platform, gaining popularity and becoming a staple of modern social platforms.<sup>13</sup>

**[February, 2005]** - Youtube emerged as a form of video creating and sharing, the beginning of what would become the default for video-playing nowadays.<sup>14</sup>

**[October, 2010]** - Instagram, or originally known as Burbn, took advantage of the increasing popularity of photo-sharing by introducing visually-oriented content and filters.

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7. <https://interestingengineering.com/culture/a-chronological-history-of-social-media>

8. <https://www.who.int/europe/news/item/25-09-2024-teens--screens-and-mental-health>

9. Ibid.

10. Ibid.

11. Ibid.

12. <https://www.historytools.org/companies/the-complete-history-of-linkedin>

13. <https://www.thoughtco.com/who-invented-facebook-1991791>

14. <https://www.historytools.org/docs/youtube-history>

15. <https://www.investopedia.com/articles/investing/102615/story-instagram-rise-1-photo0sharing-app.asp>

**[June 28th, 2011]** - Google created Google+ as a social networking tool, which has since been discontinued.<sup>16</sup>

**[January 6th, 2013]** - In the 66th World Health Assembly, the *Mental Health Action Plan 2013-2020* was adopted, setting global targets for mental health and awareness.<sup>17</sup>

**[September 20th, 2016]** - Tiktok, originally named Douyin for the Chinese market, revolutionised social media by introducing shorter and engaging content, driven by personalised algorithms.<sup>18</sup>

**[May, 2018]** - In the 71st World Health Assembly, *Resolution WHA71.7* is adopted regarding digital health, encouraging the integration of digital technology into healthcare systems.<sup>19</sup>

**[May, 2019]** - “Gaming Disorder” is recognised as a mental health condition in the International Classification of Diseases (ICD-11).<sup>20</sup>

**[April 17th, 2019]** - The World Health Organization released its first guideline on digital health interventions.<sup>21</sup>

**[January 30th, 2020]** - COVID-19 was officially declared as a Public Health Emergency of International Concern (PHEIC) by the World Health Organization, which later contributed to an increase in technology usage and consequently poorer mental health in adolescents.<sup>22</sup>

**[August 18th, 2021]** - The World Health Organization adopts the *Global Strategy on Digital Health 2020-2025*, promoting usage of technology in health, and the appropriate use of digital technologies.<sup>23</sup>

**[October 4th, 2023]** - The World Health Organization and the British Medical Journal discussed guiding principles for appropriate usage of technology for youth and the effects of mental health.<sup>24</sup>

**[February, 2025]** - *Addressing the digital determinants of youth mental health and well-being* was a policy brief released by the World Health Organization Regional Office for Europe.<sup>25</sup>

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16. <https://techcrunch.com/2018/10/08/looking-back-at-google/>

17. <https://www.who.int/publications/i/item/9789241506021>

18. <https://historycooperative.org/who-invented-tiktok/>

19. <https://www.who.int/publications/i/item/10665-279505>

20. <https://icd.who.int/browse/2025-01/mms/en#1448597234>

21. <https://www.who.int/news/item/17-04-2019-who-releases-first-guideline-on-digital-health-interventions>

22. <https://www.who.int/publications/m/item/covid-19-public-health-emergency-of-international-concern-%28pheic%29-global-research-and-innovation-forum>

23. <https://www.who.int/publications/i/item/9789240020924>

24. <https://www.who.int/news/item/02-11-2023-who-and-bmj-convene-global-experts-to-discuss-potential-guiding-principles-for-developmentally-appropriate-mental-health-content-for-youth-on-digital-platforms>

25. <https://iris.who.int/handle/10665/381496>



## Historical Background

When the World Health Organization was established in 1948, mental health was encompassed in its constitution under health as “ a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”.<sup>26</sup> Unfortunately, mental health has often been stigmatised and underfunded worldwide in the years since, diminishing its overall importance in the public view.<sup>27</sup>

In the 2000s, the plethora of emerging digital technologies and social media platforms transformed communication and relationships between people. This trend started with MySpace and Facebook in the early 2000s, and further solidified with the popularity of YouTube, Instagram, and Tiktok.<sup>28</sup> In essence, global connectivity was amplified, and social media became the dominant force in shaping youth identity and mental well-being.

Social media and digital technologies have undoubtedly brought forth many positive outcomes, from social connection, international access, and identity and expression. However, the negative effects can often outweigh the positives, such as increased rates of anxiety and depressive symptoms, sleep disruption, online harassment, addictive use, and body image issues.<sup>29</sup>

## Past UN/Committee Involvement

The World Health Organization’s *World Health Report* in 2001 focused its agenda on mental health, particularly calling for stronger national strategies and stigma reduction as a whole.<sup>30</sup> The report featured a wide array of topics, such as understanding mental and behavioural disorders from biological, psychological, and social factors; identifying, diagnosing, and the prevalence of disorders; solving mental health problems via diagnosis, care services, partnerships, and integration into primary healthcare; and developing mental health policy and implementing legislation.<sup>31</sup>

In 2013, the World Health Assembly adopted the *Mental Health Action Plan 2013-2020*,<sup>32</sup> outlining the need to strengthen information systems for mental health worldwide, provide community-based services, and targets to improve leadership. This established mental health as a global health priority, though it did not yet mention the effect of social media and technology

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26. Ibid.

27. <https://pmc.ncbi.nlm.nih.gov/articles/PMC5007563/>

28. Ibid.

29. Ibid.

30. [https://iris.who.int/bitstream/handle/10665/42390/WHR\\_2001.pdf?sequence=1&isAllowed=y](https://iris.who.int/bitstream/handle/10665/42390/WHR_2001.pdf?sequence=1&isAllowed=y)

31. Ibid.

32. Ibid.

directly.

The World Health Organization has also recognised the role and potential of technology in healthcare systems, which was addressed in the *World Health Assembly Resolution WHA71.7* in 2018.<sup>33</sup> Specifically, the use of “digital technologies to advance the Sustainable Development Goals, and in particular to support health systems in all countries in health promotion and disease prevention, and by improving the accessibility, quality and affordability of health services”.<sup>34</sup> This resolution laid the framework for the *Global Strategy on Digital Health 2020-2025*, which emphasised the need to integrate digital solutions into healthcare delivery.<sup>35</sup>

In 2019, the World Health Organization took a significant step in recognising the role of social media in mental health issues. The *International Classification of Diseases (ICD-11)* formally included “gaming disorder” with its symptoms, clinical features, and related disorders featured in its categorisation.<sup>36</sup> It is “a pattern of persistent or recurrent gaming behaviour” which is “manifested by:

1. Impaired control over gaming
2. Increasing priority given to gaming to the extent that gaming takes precedence over other life interests and daily activity
3. Continuation or escalation of gaming despite the occurrence of negative consequences”

The COVID-19 pandemic then exacerbated the link between mental health issues and social media, which the World Health Organization highlighted, issuing several advisories on the concern. This was mainly due to isolation, uncertainty, and lack of face-to face contact, creating the perfect environment for screentime in youth to skyrocket. Though the World Health Organization focused the majority of its efforts on the immediate physical health impact, mental health was acknowledged as a risk for youth.<sup>37</sup>

Recently, the World Health Organization has taken more steps towards reversing and preventing the effects of digital technologies on mental health, most notably in a partnership with the British Medical Journal. In 2023, the two organisations convened experts to create a guideline for developmentally appropriate online mental health content for youth.<sup>38</sup>

A bigger leap was taken in February 2025, where the World Health Organization’s Regional Office for Europe addressed the situation via a policy brief titled *Addressing the Digital*

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33. Ibid.

34. Ibid.

35. Ibid.

36. Ibid.

37. <https://www.who.int/teams/mental-health-and-substance-use/mental-health-and-covid-19>

38. Ibid.



*Determinants of Youth Mental Health and Well-Being*, highlighting the severe effects of technology on youth, providing recommendations for the curating of online content, and fostering healthy digital environments.<sup>39</sup>

## **Current Situation**

According to the World Health Organization, one in seven 10-19 year olds experience a mental disorder, with the leading causes being depression, anxiety, and behavioural disorders. In addition, suicide is the third leading cause of death for older youth, ranging from 15-29.<sup>40</sup>

As for social media, 11% of adolescents exhibit problematic social media behaviour and consequently negative repercussions, with a higher amount in girls, 13%, compared to the 9% in boys. Likewise, 36% of youth reported being in contact with friends online frequently, with rates being highest at 44% for 15 year old girls.<sup>41</sup>

Problematic gaming is also a risk, with 12% of youth exhibiting signs and a higher proportion of boys than girls at 16% and 7% respectively. Gaming as a whole is also prevalent among youth, with 34% engaging in digital games daily, and 22% playing for more than 4 hours at a time when gaming.<sup>42</sup>

Overall, more than one billion people worldwide are living with mental health disorders, yet lack of funding is an issue internationally—out of the total health budget spending, a median of 2% is spent on mental health. Large ranges of spending also vary depending on the country, with higher income countries spending around \$65 USD per person compared to \$0.04 USD per person in low income countries. In addition, extreme shortages of mental health workers are significantly prevalent among the low and middle income countries.<sup>43</sup>

While many countries have updated mental health policies and plans, few have implemented the rights-based legislation to actually align with international human rights standards. Only 45% of all countries comply with these criteria. As for integrating mental health into primary care, 71% of countries meet the World Health Organization's standards, indicating strong progress. Disparities exist in this area as well, especially in the amount of affected individuals who receive care—10% versus 50% in low-income and higher-income countries respectively.<sup>44</sup>

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39. Ibid.

40. <https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health>

41. Ibid.

42. Ibid.

43. <https://www.who.int/news/item/02-09-2025-over-a-billion-people-living-with-mental-health-conditions-services-require-urgent-scale-up>

44. Ibid.

## **Potential Solutions**

### **Policy & Regulation**

Member states and governments of the World Health Organization could work together to pass legislation that would require social media and gaming companies to limit addictive features, monitor harmful content, and promote safe digital environments. This would ensure age-appropriate standards for different age groups, minimising possible exposure of harmful material to youth. Countries could also collaborate with companies to enact time limits on apps or games to prevent misuse and addiction, along with potentially establishing age limits and verification for certain apps if necessary. Laws could be passed or strengthened to further ensure the safety of the data of minors, which could prevent misuse or abuse of it, ensuring transparency and greater security.

### **Education & Awareness**

Governments could collaborate with the education sector, to promote healthy use of technology and online safety. This could include integrating digital literacy programs into school curriculum or workshops, teaching students appropriate and responsible online behaviour, coping strategies, and skills to evaluate online content critically. Parents could also be involved in this process, to best learn the ways to support youth in safe content consumption and usage. The stigma surrounding mental health could be another aspect that is addressed, with campaigns coordinated to promote seeking help when necessary, or the reporting of unsafe behaviours such as cyberbullying.

### **Healthcare Systems & Intervention**

To reduce the mental health issues in those currently affected, services and health systems could be adapted to ensure accessibility. Governments could provide more funding to the mental health sector of health systems, or if lacking it, could integrate mental health support in public healthcare. In particular, online mental health services for youth could be expanded upon, especially in areas which lack or have limited mental health infrastructure. To identify emerging mental health issues in youth, screenings could be done in school to identify risks earlier, or automatic online systems which flag possible signs of it in content consumed.

### **Research & Data Collection**

Monitoring and analysing trends in digital technology usage in youth could be a viable course of action, to fully figure out the extent of its causes and effects. Countries would need to collaborate in order to form a large database of statistics to fully paint an accurate picture of the situation.

This information could also be extended to the prevention of mental health disorders in youth, where it would be used to best determine the next course of action.

## **International Cooperation**

Social media operates globally, meaning no single country can regulate them alone effectively. To combat this issue, countries could collaborate to find the best solution by sharing resources and information. Databases and statistics could be compiled via cooperation, leading to increased accuracy and a larger sample size. Joint initiatives would allow countries to pool resources for programs mentioned above, reducing possible cost barriers for smaller nations. In addition, low to middle income countries which lack the resources to fund mental health services could benefit from such pooling, allowing them to provide their citizens with the necessary programs. Global tech industry partnerships could be created as well, collaborating to set standards for platform design, content moderation, and safety features.

## **Bloc Positions**

### **Bloc 1: Developed/High-Income Nations**

Countries such as Australia, Canada, Germany, Japan, the UK, and the US are better equipped to address the mental health epidemic, thanks to their advanced economies and established healthcare systems. These nations generally have strong mental health services, but rising concerns about mental illness, particularly among youth and due to societal pressures, have led to a focus on improving and expanding these services. The emphasis here is likely on integrating digital health solutions, such as telemedicine and mental health apps, enhancing research on mental health treatment, and addressing the growing demand for mental health care through regulation and policy. However, these countries are also grappling with increasing rates of anxiety, depression, and burnout, especially in the wake of the COVID-19 pandemic, prompting a call for systemic changes and a broader focus on mental well-being.

### **Bloc 2: Emerging & Developing Nations**

Countries like Brazil, India, Russian Federation, and Thailand are experiencing rapid economic growth but face significant disparities in mental health infrastructure. While urban centers are seeing an increase in mental health services, rural areas often remain underserved. These nations are more likely to push for international collaboration to build mental health systems tailored to their socio-economic realities. There is a growing recognition of the importance of addressing mental health, but resources remain limited, and cultural stigma often prevents open discussions on mental illness. The focus is likely to be on expanding access to affordable care, training mental health professionals, and leveraging technology to bridge gaps in service delivery. Mental

health programs in these countries would need to be adapted to their unique cultural and socio-economic contexts to be effective.

### **Bloc 3: Resource-Limited/Under-Resourced Nations**

Nations like Bangladesh, Nigeria, Ethiopia, and Egypt face the most acute challenges in addressing the mental health epidemic. These countries often struggle with inadequate healthcare infrastructure, limited access to digital resources, and deep social and economic challenges. Mental health care is typically underfunded, and there is a lack of trained professionals. The focus in these countries would be on basic mental health services, raising awareness, and reducing stigma surrounding mental illness. International partnerships and funding are crucial in providing resources, including low-cost, community-based mental health solutions. For many of these nations, tackling the mental health epidemic means creating locally relevant, scalable models that prioritize mental well-being while overcoming significant barriers like poverty and limited healthcare access.

### **Discussion Questions**

1. What is your country's history with mental healthcare systems, and if there is one, how does the system work?
2. What are the strengths and weaknesses of your country's mental healthcare systems, and how could it be improved?
3. What role should social media and gaming companies play in preventing mental health risks for youth, and to what extent should the World Health Organization involve them in policymaking?
4. What strategies can be used to ensure digital literacy and safe online behaviour among youth without limiting access to information and online opportunities?
5. Should there be international standards for online content targeting youth, and if so, how can they be enforced globally?
6. How can the World Health Organization best support low and middle income countries in implementing mental health support systems for youth?
7. How can the World Health Organization enact solutions without violating privacy, freedom of expression, and autonomy?
8. How can the World Health Organization balance solutions with socio-economic disparity and cultural differences among its member states?

## Further Resources

1. **Gaming Disorder** - International Classification of Diseases (ICD-11):  
<https://icd.who.int/browse/2025-01/mms/en#1448597234>
2. **Mental Health Action Plan (2013-2020)** - World Health Organization:  
[https://iris.who.int/bitstream/handle/10665/89966/9789241506021\\_eng.pdf?sequence=1](https://iris.who.int/bitstream/handle/10665/89966/9789241506021_eng.pdf?sequence=1)
3. **Global Strategy on Digital Health (2020-2025)** - World Health Organization:  
<https://iris.who.int/bitstream/handle/10665/344249/9789240020924-eng.pdf?sequence=1>
4. **Addressing the digital determinants of youth mental health and well-being** - World Health Organization Regional Office for Europe:  
<https://iris.who.int/bitstream/handle/10665/381496/WHO-EURO-2025-12187-51959-79685-eng.pdf?sequence=2&isAllowed=y>
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