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Mental Disorders in Children and Adolescents in Crisis Situations: The Impact of the COVID-19 Pandemic and Armed Conflicts – Types of Disorders, Effects, and Intervention Strategies

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ABSTRACT

Introduction. The deterioration of mental health in children and adolescents is a serious medical problem, and the number of mental disorders has been increasing in recent years. In every part of the world, children and adolescents suffer from mental health problems, and their needs are not adequately taken care of. In addition, the outbreak of the COVID-19 pandemic and armed conflicts have had a significant impact on the emergence of disorders in children and adolescents. Loneliness, fear, anxiety and lack of emotional support and access to appropriate medical and psychological care are the basis of these problems. Support for young patients, psychological and pharmacological interventions and raising awareness about the importance of mental health are the basis for improving the mental health of adolescents.

Aim of study. The aim of this study is to investigate the increasing prevalence of mental disorders among children and adolescents and to examine their correlation with the occurrence of pandemics, wars and traumas.

Materials and methods. A non-systematic review of the scientific literature was conducted using specific keywords such as “children’s mental health”, “youth mental health”, “COVID-19 pandemic”, “war in Ukraine”, “armed conflicts”, “mental disorders”, “depression” and “anxiety”. The review was conducted in the Pub Med database, analyzing a total of 39 sources published by the end of 2024.

Conclusions. Both the COVID-19 pandemic and armed conflicts have a negative impact on the mental health of children and adolescents worldwide. The occurrence of previous mental health problems significantly increases the risk of anxiety disorders, PTSD, depression. The basic strategy for preventing the occurrence and reducing the severity of these disorders are preventive programs, psychoeducation, psychotherapy, if necessary combined with pharmacotherapy. Supportive interpersonal relationships, a sense of security and access to medical care have a significant impact on the proper and unwavering mental development of children and adolescents.

KEYWORDS: children's mental health, youth mental health, COVID-19 pandemic, war in Ukraine, armed conflicts, mental disorders

INTRODUCTION

According to the definition of the World Health Organization (WHO), mental health is a state of good mental, physical and social well-being, as well as the possibility of development and self-fulfilment. Thanks to mental well-being, children and adolescents can effectively cope with the pressures of life, achieve excellent results in school and work, and have a positive impact on the communities around them. Mental health is a fundamental component of the basic definition of general health and well-being, thanks to which a person is able to make good decisions, take care of interpersonal relationships, and participate in shaping the environment and the world in which they live [1]. Weakening of mental health, the appearance of specific symptoms that can cause impairment of the functioning of the body and lead to the occurrence of mental disorders. Mental disorders are defined as a state in which there are clinically significant disorders of thoughts, feelings and behaviors, which may be temporary or permanent. These problems are usually understood as categorical, which is related to their severity, whether they are above or below the clinical threshold of symptom scales or impairment. The most common disorders in children and adolescents include: anxiety, depression, attention deficit disorder (ADHD) and conduct disorders [2]. The poor mental health of minors negatively affects their development and adult life. More than 50% of mental disorders occurring in adulthood have their beginning in childhood or adolescence [3]. Childhood and adolescence are critical stages for psychological interventions and mental health promotion. Currently, there is an increase in the incidence of mental disorders among adolescents and children worldwide, according to the WHO, 14% of people aged 10 to 19 experience mental disorders. In addition, many of these people do not receive adequate medical care [4].

The Covid-19 pandemic has had a significant impact on the exacerbation of problems and the deterioration of the mental health of children and adolescents. In addition, the outbreak of the war in Ukraine has negatively affected the mental well-being of children and adolescents in many European countries. Currently, mental health problems are becoming a special case all over the world. Only recently has the global significance of this problem been understood. Mental health disorders are responsible for 32.4% of YLDs (years lived with disability) and 13.0% of disability-adjusted life years (DALYs), which means that these problems are of comparable importance to cardiovascular diseases [5]. Mental health disorders affect the overall health of the population, mental health is significantly associated with immediate and long-term physical health conditions and chronic diseases throughout the lifespan, and it also has a significant impact on social determinants of health, including race and ethnicity, interpersonal

relationships, crime, prejudice, education, future income and employment status of an individual. Mental well-being has a significant impact on the determinants of health of children and adolescents, and health disparities often result from inequalities in the environments in which children are raised [2].

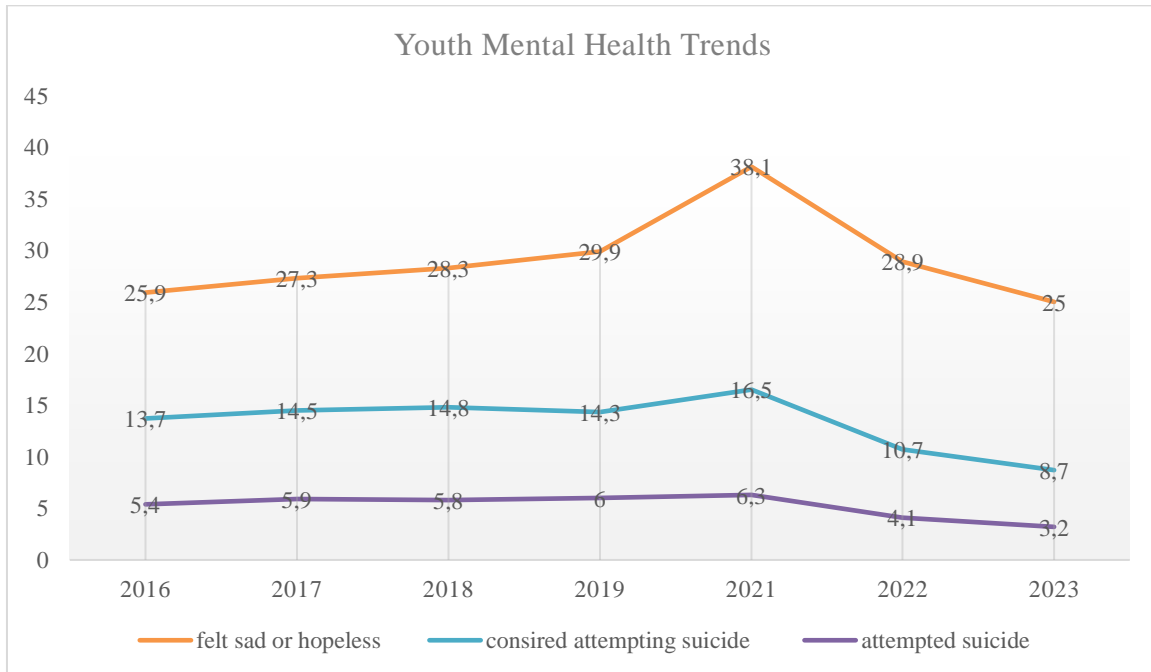


Fig. 1 % reported mental health concerns between 2016 and 2023 year (Youth Surven was not administrated in 2020) [6].

COVID-19 PANDEMIC AND MENTAL HEALTH OF CHILDREN AND ADOLESCENTS

The coronavirus disease (COVID-19) epidemic that broke out in Wuhan, China, has affected all continents and by 2024 caused the death of over 7 million people [10]. It was a huge challenge for health care in all countries, as well as a significant challenge for mental health care, especially for children and adolescents, at the same time focusing on preventing the spread and transmission of the SARS-CoV-2 virus. During the pandemic, the popularity of mental health services using communication systems increased significantly, unfortunately patients with severe mental disorders could not use this type of help [9]. Children and adolescents are a group that is particularly sensitive to changes and difficult times. The pandemic and lockdown caused many episodes of depression and mental disorders in these social groups. The most common consequences of this period include: acute and chronic stress, worry about loved ones, unexpected mourning, loss of contact with peers, unexpected break from school, forced stay at home, increased use of the Internet and social media, anxiety about the future of loved ones and

one's nation [10]. Being isolated, secluded and lack of social contacts is an individual threat, even without a coexisting epidemic. Separation from the environment can cause significant social consequences significantly affecting entire families, especially children and adolescents. Scientific research shows that isolation during a pandemic can exacerbate symptoms in people with mental disorders [7]. The impact of the pandemic on the mental state of children and adolescents manifested itself in various ways, some people experienced severe disorders such as generalized anxiety or depression, others experienced a long-term period of reduced well-being, temporary problems in relationships with peers and family or problems with learning [8]. According to the definition, stress is a process by which environmental factors threaten or disturb the body's balance, and by which the body responds to the threat. Following the transactional model of stress, the negative effects of exposure to stressful events, such as mental disorders, occur when the body's resources are unable to respond adequately to the stressor. This is related to the individual's adaptive capabilities, previous experiences, and susceptibility to stressors along with protective factors and mental resilience. During the pandemic, it was particularly emphasized that people with previously occurring mental disorders are much more sensitive to its negative effects on their mental health [11].

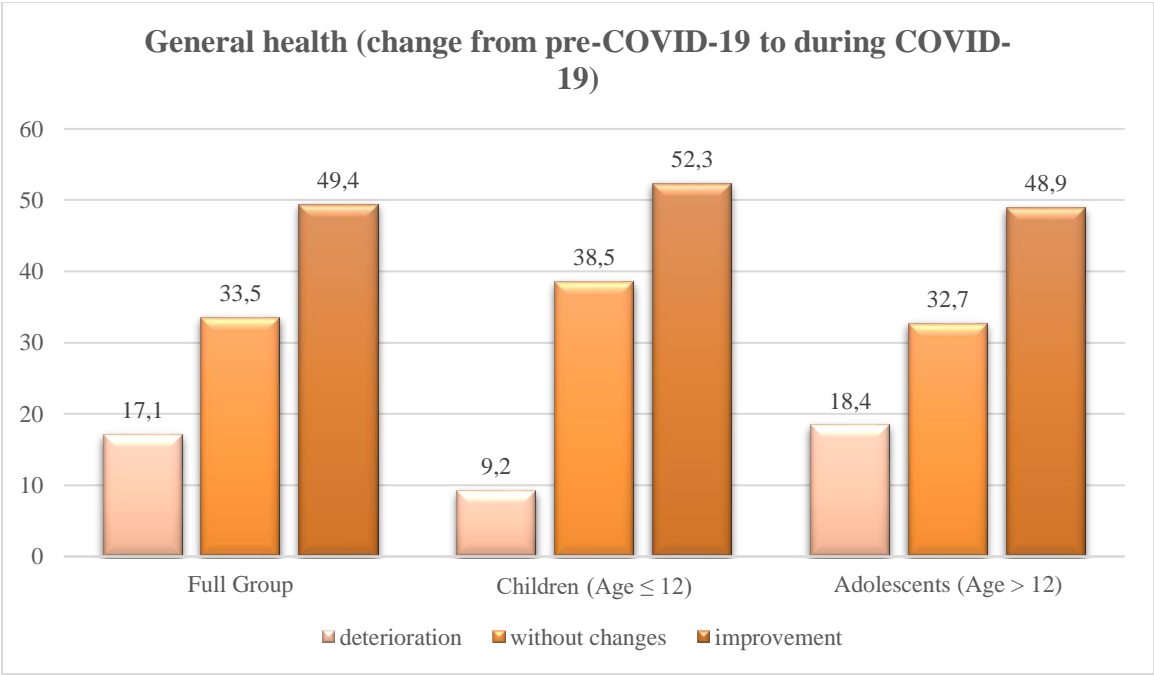


Fig. 2a Changes in general and mental health from before to during the COVID-19 period.

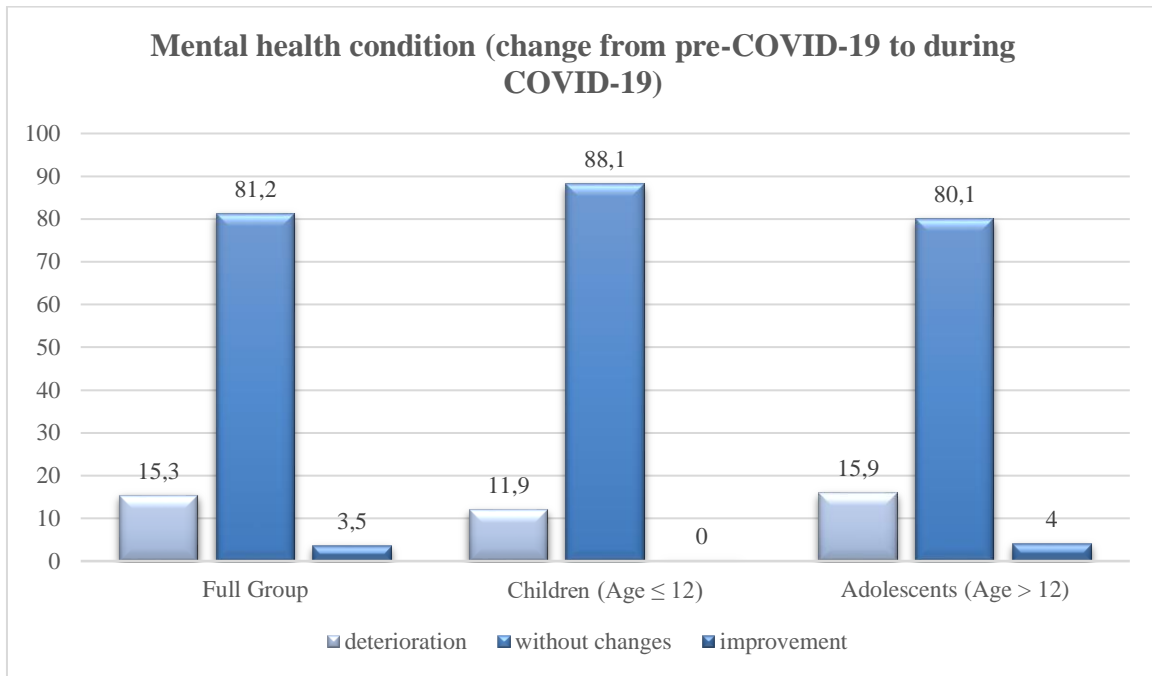


Fig. 2b Changes in general and mental health from before to during the COVID-19 period. Data presented as number of cases % [12].

During the COVID-19 epidemic, many families had to face new situations and demands, and their daily lives were disrupted. Schools and organizations that provided a place for children and adolescents to learn and spend their free time were closed, and parents had to reorganize their previous family life, which could potentially cause tension among its members. The sudden need to adapt to new requirements, maintain social distance, and additional responsibilities related to caring for children during school hours resulted in more mental health problems being reported by parents and guardians of adolescents than before the epidemic. The increased stress level in parents affected the quality of the relationship between caregivers and their charges, and consequently worsened the children's adaptation to the new situation. Some of the mental health problems of children and adolescents during the COVID-19 pandemic were clearly related to conflicts and tense situations in households [11].

TYPES OF MENTAL DISORDERS AMONG CHILDREN AND ADOLESCENTS DURING THE COVID-19 PANDEMIC

During the COVID-19 pandemic, an increase in various mental disorders was observed among minors. The most common problems included anxiety disorders, depression, post-traumatic stress disorder (PTSD), symptoms related to experiencing grief, and sleep and appetite problems. Children and adolescents who were under the care of psychologists and psychiatrists

before the epidemic were exposed to interruptions and changes in treatment and care, which often resulted in the exacerbation of their symptoms [10]. Fear of infection, consistent lockdown and isolation exacerbated symptoms in some patients. It has been proven that teenagers who suffered from mental disorders before the pandemic showed greater problems with tolerating the lockdown and new rules. In addition, people affected by depression were exposed to prolonged suffering in the event of the sudden loss of a parent [10].

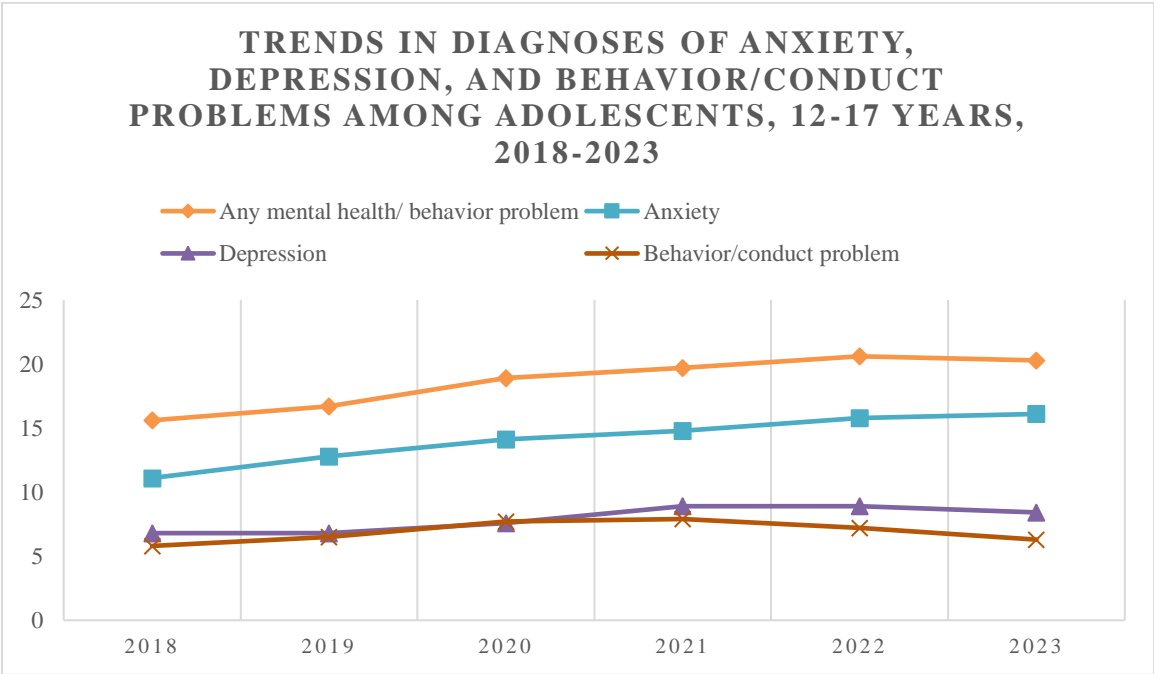


Fig. 3 Trends in diagnoses of anxiety, depression, and behavior/conduct problems among adolescents, 12-17 years, 2018-2023 [13].

ANXIETY

Experiencing anxiety is a well-known mental disorder that begins in childhood and adolescence, occurring in about 6.5% of people under the age of 18. This emotional state has a direct negative impact on a person's life later on. Experiencing anxiety in childhood negatively affects social and professional life, and can cause problems in achieving academic and scientific goals. Untreated anxiety disorders can lead to negative health effects and complications. During the COVID-19 pandemic, children and adolescents had more negative, anxiety-producing stressors than before. Adolescents had to face a difficult social situation, lockdown, separation from peers, a sudden change in lifestyle, and were forced to adapt to harsh conditions of isolation and social distancing. In addition, access to providing them with basic social and health needs was limited. Spreading disinformation, social anxiety, and panic significantly increased anxiety symptoms among children and adolescents [15]. Studies describing the mental state of children from

around the world comparing their condition before and during the COVID-19 pandemic showed a significant increase in anxiety levels during the lockdown [15].

DEPRESSION

Depression, by definition, is characterized by low mood, loss of pleasure or interests, accompanied by a sense of guilt, low self-esteem, sleep and appetite disorders, fatigue and poor concentration [16]. People experiencing depression struggle with a significant decrease in the functioning of the body and a deterioration in the quality of life, this condition is often associated with suicidal thoughts and self-harm. Among the results of researchers, many indicate that the COVID-19 epidemic has worsened the mental state of children and adolescents, at the same time significantly intensifying depressive symptoms [15]. Among the depressive symptoms in children, long-term low mood, loss of desire and interest in playing, sad facial expression, crying attacks predominated. Adolescents experienced a significant decrease in self-esteem and an increased sense of guilt. Among children and younger adolescents, one could observe screaming fits, raising their voices, slamming doors, entering into verbal conflicts with other household members. In addition, they often suffered from eating disorders and sleep problems. Depression among children and adolescents can be divided into three types: mild - in which psychological support is sufficient, moderate - sometimes requiring pharmacological treatment, and severe - in which the use of antidepressants is necessary in almost every case [17]. The highest intensity of symptoms occurred in children who had previously been diagnosed with depressive disorders, among children and adolescents with personality disorders, and among people whose caregivers/parents also experienced depressive symptoms [15].

POSTTRAUMATIC STRESS DISORDER (PTSD)

Posttraumatic stress disorder (PTSD) is a mental disorder that can be caused by a traumatic event [18]. It can occur as a result of personal experience, witnessing or otherwise confronting a traumatic event that involves a real or rationally potential threat, physical harm, sexual violence, and the possibility of loss of life. This event can affect both the person experiencing the disorder and someone from their environment. The most common symptoms include: excessive arousal, persistent intrusive thoughts and feelings, and attempts to avoid them. People experiencing this disorder repeatedly relive and relive traumatic events, while trying at all costs to avoid stimuli and situations that are associated with the traumatic events. In addition, negative cognitive and emotional modifications occur, and people suffering from PTSD are

hypervigilant. PTSD has a significant impact on the mental state and social life, seriously disrupting and worsening the quality of life of the individual [15]. Scientists have proven that children and adolescents who were forcibly isolated and quarantined during the epidemic were significantly more sensitive to acute stress disorders, and 30% of them met the criteria for post-traumatic stress disorder symptoms.

OTHER SYMPTOMS RELATED TO MENTAL HEALTH

The effects of the COVID-19 pandemic also included other negative feelings and behaviors among children and adolescents. Adolescents suddenly had to face the threat of death and unexpected mourning for loved ones. Many of them were not prepared for this, because they had never experienced such a situation before. In addition, the experiences of rigor and stress during the pandemic negatively affected the quality and quantity of sleep. Depending on the age group, there were different mental disorders and symptoms. Children under 7 years of age most often experienced feelings of anxiety, also felt an increased need for physical contact, were more "sticky". Additionally, they were not willing to cooperate, got bored quickly and required more attention. Among children aged seven to thirteen, episodes of rude behavior, attention deficit were more frequent, they required more attention and emotional reassurance, and experienced more frequent problems with learning. In older children and adolescents, behavioral difficulties, anxiety, depressive symptoms, deterioration of behavior, attention deficits, and significant impulsivity were observed [15].

The mental health of children who already had mental disorders before the pandemic is of particular concern. The COVID-19 epidemic has intensified existing symptoms of obsessive-compulsive disorder (OCD) and was a revelation for the appearance of new ones. Among non-neurotypical children and adolescents and with attention deficit hyperactivity disorder (ADHD), a worsening of symptoms and a weakening of the general mental state were demonstrated [15]. Overall, the COVID-19 pandemic has most likely contributed to the worsening of existing mental health problems in children and adolescents, as well as to the emergence and evolution of stress disorders, especially exacerbating symptoms in children who were already ill [15]. Suicide is the second most common cause of death among children and adolescents in developed countries after accidents. Self-harm is the strongest predictor of suicide, especially when the injuries require medical care. The number of self-aggressive behaviors has increased during the COVID-19 pandemic, as has the number of suicidal thoughts and tendencies among

children and adolescents, but there has been no evidence of an increase in the number of completed suicides as a result of the pandemic [19].

ARMED CONFLICTS AND MENTAL DISORDERS OF CHILDREN AND ADOLESCENTS

Children in a war environment

Armed conflicts have a very negative impact on the mental health of the societies affected by them. The most common illnesses are post-traumatic stress disorder (PTSD) and depression, which occur in 30% of children and adults exposed to traumatic experiences. In addition to the typical symptoms of illnesses, children also experience problems with school and general development. Children who have experienced war trauma achieve poorer results in school and have lower life satisfaction [20]. The development of children in a war or post-war area requires a multi-faceted perspective that includes forced changes in the child's environment. Armed conflicts currently occur mainly in countries with low resources, causing a number of neglect and social problems such as poverty, torture, lack of access to medical care, destruction of the school system, and increased experience of violence. These are not adequate conditions for the proper development of children, exposure to the above-mentioned stressors causes disorders in their functioning and impairment of their mental state [20]. In addition, the experience of war trauma generates behavioral problems in later life, as proven by studies of past wars. There is ample evidence that organized violence and armed conflict act as catalysts for later domestic violence and child abuse [20]. Military attack and conducting warfare in the presence of children violates basic human rights, generates mental disorders and suffering related to isolation from parents and anxiety about the safety of oneself and loved ones [21]. Russia's attack on Ukraine on February 24, 2022 showed how difficult and difficult experiences children and young people are exposed to in countries affected by war. Constant feeling of threat to the health and life of oneself and loved ones, sudden, drastic changes in living conditions - hiding in shelters, escape, lack of access to education, medical assistance, separation from loved ones, hunger, lack of hygiene, poverty. Children and young people are first forced to flee and be forcibly resettled for their own well-being. In addition to protecting the lives of children, attention is also paid to the sudden separation and lack of contact with parents who serve in the army. Some children know that they will never see their loved ones again, others live in constant ignorance and uncertainty about what happened to their parents [22]. Studies have shown that children and adolescents who have experienced war-related trauma have a significantly

increased risk of developing mental disorders, internalizing problems, and cognitive impairments. It is estimated that among adolescents in Ukraine, whose country is affected by war, the incidence of PTSD is estimated at 47%, depression at 43%, and anxiety disorders at 27% [22]. Separating children from their parents has long-term, negative consequences. Studies have shown that underage refugees without parental care experience problems with controlling emotions, sleeping, and learning. Of particular note is the fact that these problems may persist even after the parents return and they are able to function together with their children again [23]. These situations concern not only Ukrainian children, but also other young people from countries where armed conflicts last a long time and are not widely reported, such as Ethiopia, Haiti, Myanmar, Sudan. It should be taken into account that Russia's attack on Ukraine took place already in 2014, and mental problems and disorders among children and young people had their beginnings already in that period. As a consequence, the repeated invasion could have caused the accumulation of psychological stress and the intensification of symptoms [23].

Children and adolescents are a group that is particularly sensitive to threats resulting from war experiences; their susceptibility to stress and ability to cope with these problems is not yet fully developed. Situational stress and war trauma have a stronger impact on them because they are not yet fully emotionally mature, and their cognitive agency is limited. Their immaturity may result in incomplete understanding of stressful situations, failure to understand the broader perspective of the conflict or a full sense of threat. Adolescents do not have fully developed coping mechanisms with stress. Difficult experiences, such as war, may increase their neuroticism and emotional reactivity, which in consequence will be a predisposing factor to the development of anxiety and depressive disorders. Teenagers with a higher level of neuroticism are more vulnerable to mental disorders. Neurotic people show an increased tendency to experience negative emotions, return to stressful situations in their thoughts, and more often react with inappropriate anxiety. As a result, children and adolescents grow up to be neurotic individuals who have a constant tendency to negative thinking and experience negative emotions with a high level of anxiety. These individuals are characterized by problems with coping with challenges, because they can transform any task into a stressful experience [24].

A significant burden on the mental health of children and adolescents has been documented among child soldiers. Studies have shown that people who were conscripted into the army in adulthood showed a higher level of aggression and a tendency to domestic violence [27].

Armed conflicts undoubtedly have a significant impact on the health and life of children and adolescents in countries affected by war. Direct presence in an armed conflict zone generates

an increased risk of experiencing physical and mental injuries, disability, and even loss of life. Among the consequences of being in a war zone, the most common effect is PTSD, which was experienced by 87%-97.5% of children during the war in Kosovo, Iraq, and Lebanon. The incidence of post-traumatic stress disorder depends on the scale and intensity of the level of exposure to armed conflict. Studies show that PTSD affects 5% to 8% of children and adolescents in Israel, while among Palestinian children, the rate is 23% to 70%. During armed conflicts, minors face many losses and threats to their personal development, are deprived of basic goods, their family relationships are disrupted, experience stigmatization, discrimination, witness the normalization of violence, and often experience a negative attitude to the future and loss of dreams [27]. Children and adolescents who have been exposed to armed conflict show different reactions to stress and suffering, have various fears, appear dependent behaviors, inconsolable crying, are not interested in the surroundings, sometimes show aggressive mannerisms and experience symptoms of psychopathic problems. During play, they may unconsciously show interest in macabre topics, withdraw from others [25].

A significant problem that is worth paying attention to is the loss of a sense of security by children. These include the loss of a safe place to live, such as home, school, familiar places. This exposes children to long-term stress. Psychology emphasizes that cognitive patterns regarding the sense of social security are formed during childhood and adolescence, when a child can assess themselves, the world and imagine the future. Children and adolescents who experience violence and are exposed to armed conflicts lose their sense of security on many levels - they lose their home, move out of their city/village, experience the loss of life with their family, are separated from their peers [26].

Children and youth indirectly affected by war

Research shows that the repercussions of armed conflicts affect not only the countries involved in the war, but also indirectly affect people from other countries. The DSM-5 diagnostic criteria for PTSD explain that even indirect exposure to traumatic events can cause symptoms. The most important catalyst for indirect impact is the media, which exposes people to disturbing news, leading to heightened feelings of anxiety, fear, and vulnerability. The Russian attack on Ukraine in 2022 resulted in over 7.6 million Ukrainian refugees in Europe. Most of them stayed in Poland, where they initially lived in private homes, some eventually returned to Ukraine, and the rest stayed. In order to improve their well-being, 128,000 Ukrainian children were accepted into Polish schools and preschools, where they attend alongside Poles. The presence of so many

foreigners in the country began to be felt, which made the armed conflict more real and tangible for most Poles, including children. In addition, the war in Ukraine was widely commented on and publicized in the media [27]. The media cover war topics almost every day, especially at the beginning of the war. Children and young people have very easy access to them, and the news is often watched in private homes in the presence of children. As a result, children are unable to distance themselves from the topic of war, and are not protected from images of war presented on television, in newspapers, and on the Internet. Children are able to sense the fear of war in their parents, which leads to a loss of their own sense of security. If parents do not feel safe and secure, they do not create appropriate conditions for children, and a sense of security is formed already in childhood. Children and young people who indirectly experience armed conflicts are not separated from their loved ones, do not lose their homes, schools, or friends, but they can still experience threats on a mass level - by watching images and hearing information about attacks, bombs, death, torture. In the current situation, after the COVID-19 pandemic, which has generated an increased sense of anxiety and the occurrence of mental disorders, the presence of another sense of threat of armed conflict may generate a double threat to their mental health. Studies have shown that children who are indirectly affected by war also experience problems with social and mental functioning, especially emotional problems [23]. Among teenagers indirectly experiencing crises, including wars, there is a decrease in mental well-being, a reduced sense of joy and the desire to enjoy life. They feel less safe and are more vulnerable to anxiety disorders and depression [27].

NON-MEDICAL INTERVENTION STRATEGIES

Research shows that programs aimed at the mental well-being of children and adolescents have a beneficial effect on their functioning in adulthood and can also prevent the occurrence of disorders. Promoting mental health and increasing public awareness are the foundations of mental well-being [2]. Children react to violence and stress differently than adults, depending on their age, their level of development is different, and consequently, depending on their own level of development, their reactions may differ. Special attention should be paid to the socio-emotional development of children, because their stress reactions depend on their experiences, capabilities and subjective perception of the world [24]. Each new stressful situation, such as a pandemic or the outbreak of an armed conflict, is a new, alien reality for a child, which can generate problems and mental disorders. Among children and adolescents, promoting well-being, talking, and ensuring a sense of security is particularly important. The focus should be

on increasing self-confidence, providing verified information and showing actions that reduce the level of stress. Dialogue is recommended, which will increase the level of understanding of the problem and reduce the level of anxiety, as well as a balanced lifestyle, with particular attention to sleep hygiene. The World Health Organization (WHO) has published recommendations for parents and guardians on how to talk to children and recommendations addressed directly to teenagers. The recommendations include information on coping with stress, recognizing one's feelings and emotions, conversation, maintaining social contacts, taking care of a healthy lifestyle, avoiding stimulants, and in the event of a crisis, finding help. Particular attention was also paid to verifying reliable sources of information, limiting exposure to media news, and developing one's own strategy for regulating emotions [12]. In the crisis of war, it was emphasized that when talking to children, it was necessary to find a balance between telling the truth and conveying hope, emphasizing signs of physical and emotional safety. Attention was paid to separating children from the flood of information, unpleasant images of war, and drastic descriptions. Children should be encouraged to talk about their own feelings and share their thoughts and concerns. It is possible to provide ad hoc help to war victims by providing material goods and monetary donations, which will make children and young people feel that they are also helping someone. Moreover, when children and young people see that their parents or guardians are involved in helping refugees, it can help transform their stress into a desire to act, not fear [12].

BASIC METHODS OF TREATING MENTAL DISORDERS IN CHILDREN AND YOUNG PEOPLE EXPERIENCING CRISIS SITUATIONS

Different strategies of coping with stress among children and young people are significant protective factors that have a positive effect on their mental state. These mechanisms vary depending on age, emotional maturity, own experiences and possibilities. Developing proper mechanisms of coping with stress in childhood and adolescence has a significant impact on regulating emotions in adulthood [30].

There is a lot of empirical evidence for the beneficial effects of psychotherapy in the treatment of psychiatric disorders such as anxiety disorders, PTSD, and depression in children and adolescents. In addition to reducing symptoms, psychotherapy improves the overall functioning of the body, enhances cognitive and adaptive processes in young people, but does not have a significant effect on improving academic results [39]. Currently, traditional methods are used in clinical settings to treat children and adolescents experiencing anxiety disorders. After

making a diagnosis, one of the methods is selected: pharmacological - using mainly selective serotonin reuptake inhibitors (SSRIs), cognitive-behavioral psychotherapy (CBT), or a combination of both. Pharmacological treatment is one of the basic therapies for anxiety in children and adolescents. The treatment includes drugs from the groups: all selective serotonin reuptake inhibitors (SSRIs) and selective noradrenaline reuptake inhibitors (SSNIs). However, the Food and Drug Administration (FDA) has officially approved the use of only two drugs, duloxetine and escitalopram. Cognitive-behavioral therapy (CBT) is a first-line treatment for anxiety disorders, achieving effects comparable to pharmacotherapy. CBT focuses on avoiding anxiety through gradual exposure to stimuli, while also providing psychoeducation and learning how to cope with stress. Unfortunately, more severe initial symptoms predict a worse response to treatment with both psychotherapy and pharmacotherapy. Moreover, when comparing both methods, psychotherapy has fewer side effects than medication [28]. The main goal of treating anxiety disorders is to reduce personal costs in order to improve the functioning of the individual and improve their social relationships [29].

There is evidence that being a child is a protective factor against experiencing anxiety. Regular physical activity has a similar effect during the pandemic. During the COVID-19 pandemic, exercises using video games and music were also recommended, which also reduce the feeling of anxiety [30].

Systemic promotion of mental health had a significant impact on reducing anxiety among school youth. Significant structural, school, social reserves, as well as good family relationships and self-awareness can reduce the negative impact of the COVID-19 pandemic on the mental state of children and adolescents and their academic and psychosocial achievements. A multifaceted clinical and educational approach was introduced to reduce anxiety disorders among adolescents caused by the pandemic. Screening tests were developed to identify people prone to anxiety disorders, psychiatric consultations were used, care was provided to young people experiencing grief, digital systems of preventive services were introduced, children and adolescents received psychological support in educational institutions, teachers working with students were supported, the ability to regulate and recognize one's own emotions was promoted (mindfulness, art, meditation, deep breathing were used, among others), the focus was on the implementation of evidence-based interventions, including cognitive behavioral therapy in educational institutions [31].

CONCLUSIONS

The COVID-19 pandemic has been a significant global crisis in terms of health, economy and interpersonal contacts. Many people have experienced a decline in their physical and mental health, which has consequently prompted more people to seek psychiatric consultations. A particular group that was at risk of a deterioration in their mental health were children and adolescents who experienced symptoms of depression and anxiety. A significant increase in self-harm was noted in the age group of adolescents over 12 years of age, and an increase in the frequency of suicidal thoughts in children under 12 years of age. A consensus was reached on the development of strategies to prevent the negative effects of the pandemic experienced by adolescents. It was considered that supportive interpersonal relationships: family and peers, as well as the availability of psychological and psychiatric help if necessary, are the most important [32]. Clear data indicate that rapid intervention is the best way to prevent suicidal behavior. Psychoeducation and prevention programs should be the basis for educating the public [37, 38]. Similar emotions accompany children during armed conflict, the events they experience during war significantly contrast with their developmental needs. They violate their rights to mature in a calm, safe environment, where their emotions are taken care of, and the environment is predictable and regular. Interventions in the area of improving the functioning of their mental health should be multidirectional, directed at the needs of a specific person, taking into account the child's trauma. These interventions should strengthen the child's strength and resilience [35]. Emergency interventions focus on meeting basic physical and emotional requirements, so that children regain peace and a sense of security. The best therapy is psychotherapy, with the possibility of parental participation and their support. Problems that affect children and adolescents affected by war zones should be solved collectively with the support of parents, guardians and specialists in mental well-being [34]. The presence of parents is essential in coping with anxiety and stress among children experiencing war trauma. Many of them experience internalizing problems, and the level of trauma may vary depending on age and developmental level – and consequently extend the treatment time [32]. It is very likely that the current war in Ukraine will have long-term negative effects on the mental health of children and adolescents from Ukraine and its neighboring countries [33]. Current armed conflicts in various parts of the world are causing mental disorders among children and adolescents, who are exposed to loss of security, uncertainty and fear. Joint work of medical, educational and sociological sectors is the basis for improving the health and well-being of children affected by mental crisis [36]. According to the Save the Children organization, 473 million children live

in armed conflict zones in the world. This is a huge challenge for the entire society. Every year, awareness of mental health, interventions during war and in the post-conflict period, is growing. Mental health specialists, doctors, psychologists and educators are trying to introduce coordinated psychological and psychosocial care to prevent the effects of trauma experienced by the youngest [39].

DISCLOSURE

Author's contribution

Katarzyna Gadżala: conceptualization, writing rough preparation

Sabina Przygodzka: writing rough preparation

Maciej Rutkiewicz: supervision, resources

Karolina Garbino: visualization, data curation

Katarzyna Brudniak: methodology

Katarzyna Gadżala: check

Karolina Garbino: investigation,

Magdalena Czyczerska: writing and editing

Antoni Szuścik: formal analysis

Sabina Przygodzka: software

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All authors have read and agreed with the published version of the manuscript.

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The authors deny any conflict of interest

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