

UNICEF



## Research Report

Forum: UNICEF

Issue of: Addressing the mental health crisis among children in conflict areas

Written by: Edward Robertus

## INTRODUCTION

Children in conflict zones face increased risk of mental health issues due to increased exposure to trauma inducing events such as displacement, loss of family members and violence. Due to their increased exposure, they are susceptible to many severe mental health and psychological issues, such as but not limited to PTSD, anxiety and depression. For example, studies among children affected by the Israeli–Palestinian conflict report post-traumatic stress disorder (PTSD) prevalence ranging from 18% to 68.9%. In one study among children exposed to the Syrian Civil War, 60.5% meet the criteria for at least one psychological disorder.

Such high rates of mental health disorders cannot continue. Children affected by such mental health disorders can have many lasting effects that last until well into adulthood, causing them to have difficulty when looking for a job or trying to form healthy relationships. This is added to the fact that children in conflict zones already have their education disrupted and their childhood uprooted.

Due to these hinderances children from conflict areas may even be looked down upon by teachers and/or fellow students when seeking refuge in other countries, causing unfair treatment.

It is imperative that we, to reduce inequalities throughout the world, eliminate all instances of unfair, unjust, or inaccessible treatment.

### Definitions of Key Terms

**Post-Traumatic Stress Disorder (PTSD):** A severe mental health condition triggered by experiencing or witnessing a traumatic event. Symptoms include intrusive thoughts, nightmares, flashbacks, severe anxiety, and avoidance of reminders of the trauma

**Depression:** A common mental health disorder characterized by persistent sadness, loss of interest in activities, and a range of emotional and physical problems. It can significantly hinder daily functioning.

**Anxiety:** A mental health condition involving excessive worry, fear, or nervousness. It can manifest as generalized anxiety disorder, panic disorder, social anxiety disorder, and other forms

**Psychosomatic Symptoms:** Physical symptoms that arise from or are exacerbated by mental factors such as stress and anxiety. Common examples include headaches, stomach aches, and fatigue

**Displacement:** The forced movement of people from their homes due to conflict, violence, or natural disasters. Displacement can lead to loss of social support and increased stress

**Psychosocial Support:** Interventions that address both psychological and social needs. This can include counselling, support groups, and community activities.

**Community-Based Interventions:** Programs and strategies implemented within communities to support mental health and well-being. These often involve local leaders and resources

**Cognitive Behavioural Therapy (CBT):** A type of psychotherapy that helps individuals identify and change negative thought patterns and behaviours. It is effective for a range of mental health issues, including PTSD and depression.

**Resilience:** The ability to recover from or adapt to adversity. Building resilience is a key goal in supporting children in conflict areas

**Intergenerational Trauma:** The transmission of trauma effects from one generation to the next. This can occur through parenting practices, communication patterns, and behavioural responses

**Child Protection:** Efforts and policies aimed at safeguarding children from abuse, exploitation, and violence. This includes ensuring their physical and emotional well-being.

**Educational Disruption:** Interruptions in schooling due to conflict, displacement, or other crises. This can have long-term effects on children's development and future opportunities

**Social Isolation:** The lack of social connections and support. This can exacerbate mental health issues and hinder recovery

**Cultural Sensitivity:** Awareness and respect for cultural differences in understanding and addressing mental health issues. Effective interventions must be culturally sensitive to be successful

**Long-Term Psychological Impact:** The enduring effects of trauma on mental health, which can persist long after the initial event. These impacts can affect an individual's overall quality of life

### General overview

Mental health always matters. Everyone should have a right to treatment and a correct and fair diagnosis. When speaking about children in conflict zones it is even more imperative that we make sure treatment is available, as they are at an increased risk of these mental health issues.

Studies by the WHO and other NGOs show us that children in conflict areas suffer significantly higher risks of suffering from mental health issues, such as PTSD, anxiety disorders and other effects of violence and displacement. These studies also show us that accessibility to the right treatment and care is extremely limited in these situations where the help is indeed so direly needed. This is all together is the cause of the mental health crisis of children in conflict areas.

The long-term consequences of conflict on children's mental health can be severe and far-reaching. Some of the most prevalent effects will be listed here:

- **Chronic Mental Health Issues:** Without proper intervention, children may carry mental health issues into adulthood, affecting their overall quality of life. Conditions such as PTSD, depression, and anxiety can become chronic, leading to ongoing psychological distress.
- **Developmental Delays:** Chronic stress and trauma can interfere with normal brain development, affecting cognitive functions and emotional regulation. This can lead to developmental delays and difficulties in learning and social interactions.
- **Intergenerational Trauma:** The effects of trauma can be passed down to future generations, perpetuating a cycle of mental health issues within families and communities. Children who grow up in conflict zones may struggle with parenting and relationships later in life, further impacting their children.
- **Social and Economic Impact:** The long-term psychological impact of conflict can hinder children's ability to achieve their full academic potential and dreams, which in turn affects their educational and employment opportunities. Whilst less important, on large scale this can even have broader social and economic implications for communities and countries recovering from conflict.

*Of course, it is notable that all these issues and long-term effects can be negated when simply "ending all conflict", however, this is not truly within the power of any individual and always goes paired with many discussions.*

In conclusion, the mental health crisis in conflict zones must be addressed, as its long-term effects are those of large impact to not only individuals but the ones surrounding them. Solving this issue requires a comprehensive approach that includes immediate psychological support, long-term mental health care, and community-based interventions.

By prioritizing mental health in humanitarian responses and integrating it into broader social and educational frameworks, we can help prevent the long-term impact of conflict on children's mental well-being.

### Major parties involved

**WHO:** the WHO has conducted many studies on the mental health of children in conflict areas and delivers emergency help and guidelines on the matter.

**UNICEF:** Work on providing psychosocial support and integrating mental health services into broader humanitarian efforts.

**Save the Children:** Implements programs focused on child protection and mental health support in conflict-affected areas.

**War Child:** War Child provides education and psychosocial support to children affected by conflict, helping them cope with trauma and continue their education.

**International Rescue Committee (IRC):** has started initiatives such as Healing Classrooms, an initiative that integrates mental health support into educational programs, training teachers to provide psychosocial support and create a safe learning environment.

**EU Humanitarian Aid:** The EU funds mental health and psychosocial support programs in conflict areas, working with international organizations and NGOs to deliver services.

**Médecins Sans Frontières (MSF):** MSF integrates mental health care into its medical programs in conflict areas, providing counselling, therapy, and support for trauma-related conditions.

**International Committee of the Red Cross (ICRC):** The ICRC is an independent organisation that tries to ensure humanitarian protection and assistance for people affected by armed conflict and other violence.

**Local NGO's:** Local organizations often try and provide culturally tailored mental health services, leveraging local resources and leaders to support the mental health of children. They may also function as a training ground for local health workers and individuals looking to help children in need.

### Timeline of Key Events

**1945-1950s:** Post-World War II, studies begin to document the long-term psychological effects of war on children, including those who survived the Holocaust and Japanese internment camps.

**1975-1979:** The Cambodian genocide under the Khmer Rouge leads to significant mental health issues among surviving children, with intergenerational trauma observed in subsequent decades.

**2001:** The Afghanistan conflict intensifies, leading to widespread displacement and severe mental health issues among children

**2003:** The Iraq War begins, resulting in trauma among Iraqi children

**2011:** The Syrian Civil War starts, causing massive displacement and a mental health crisis among Syrian children. International organizations begin integrating mental health services into humanitarian aid

**2014:** The conflict in South Sudan escalates, with children experiencing severe psychological distress.

**2015:** The European migrant crisis peaks, with many children fleeing conflict zones in the Middle East and Africa, leading to increased focus on their mental health needs.

**2017:** The Rohingya crisis intensifies as violence in Myanmar forces hundreds of thousands of Rohingya, including many children, to flee to Bangladesh. Mental health interventions are implemented in refugee camps.

**2021:** The conflict in the Sahel region worsens, with MSF reporting an increase in mental health issues among children.

**2022:** The war in Ukraine begins, leading to significant mental health challenges for children. International aid focuses on providing psychosocial support.

**2023:** The WHO and UNICEF launch new initiatives to integrate mental health services into primary health care in conflict zones.

### Previous attempts to solve the issue

Attempts have previously been made to solve the issues, however many of these are at small scale within member states. A few large attempts have been made such as establishing new programs in conflict areas to try and support children in these areas. This has been done by NGOs such as MSF, UNICEF and the WHO. Also, in recent years member states have been implementing their own regional programs and expanding on their current programs, making steps in the right direction. Activity of UNICEF, WHO and MSF have been able to spread to a wider audience due to increased awareness of the importance of mental health help for children in conflict areas.

### Possible solutions

When talking about this topic it is important to address one of the core concepts that comes into play within any discussion on the topic of mental health issues: The stigma that surrounds mental health issues. The importance of making children not feel left out or alone because of experiences (and their lasting effects) they may have had in their past is of extreme importance. When tackling this topic must look for ways to address and combat this stigma.

Secondly, we must make sure that there are enough places for children to seek refuge at and give them an opportunity to talk about what they have experienced to adults and individuals with the right training and experience. We must be able to treat them effectively, and not have them feel excluded from society.

Lastly, we must try and address the root cause of this issue as much as we can: The solving of the conflicts in the areas where we are trying to solve the mental health crises. It is of essential importance that, - whilst it may seem a daunting task-, that we try and cooperate with member states to help the children in these areas and make clear the lasting damage these wars are doing to future generations

### Further Readings

I would recommend all delegates to read the following:

***“The Relationship between War Trauma, PTSD, Depression, and Anxiety among Palestinian Children in the Gaza Strip”, Health Science Journal, Vol. 10, No. 5, 2016.***

- [Living through war: Mental health of children and youth in conflict-affected areas](#) - This article from the ICRC describes the mental health challenges faced by conflict-affected children and youth, the interventions designed to prevent or ameliorate the psychosocial impact of conflict-related experiences, and an example of the challenges and opportunities related to addressing the mental health needs of Rohingya children and youth.

[Living through war: Mental health of children and youth in conflict ...](#)

- [Mental health and psychosocial problems among conflict-affected children in Kachin State, Myanmar: a qualitative study](#) - This study published in Conflict and Health explores the mental health and psychosocial problems among conflict-affected children in Kachin State, Myanmar. It provides insights into the priority problems and the interconnectedness between various issues faced by these children.

[Mental health and psychosocial problems among conflict-affected ...](#)

- [Addressing the Global Crisis of Child and Adolescent Mental Health](#) - This examines the prevalence of clinically significant depression and anxiety symptoms among youth globally, highlighting the increased rates of these symptoms in conflict-affected areas.

[Addressing the Global Crisis of Child and Adolescent Mental Health](#)



### **Bibliography**

[American Psychological Association](#)

[Cognitive behavioural Therapy \(CBT\) for Treatment of PTSD](#)

*“How Personality Affects Vulnerability among Israelis and Palestinians following the 2009 Gaza Conflict”, PLoS One, Vol. 11, No. , 2016;*

[Mental Health Crisis – The Organization for World Peace](#)

[Mental health in emergencies](#)

[Mental health issues of children and young people displaced by conflict ...](#)

[More than 24 million children affected by conflict need mental health ...](#)

[Posttraumatic stress disorder in adults: Psychotherapy and psychosocial ...](#)

*“The Relationship between War Trauma, PTSD, Depression, and Anxiety among Palestinian Children in the Gaza Strip”, Health Science Journal, Vol. 10, No. 5, 2016.*