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RELATIONSHIP BETWEEN EMERGENCIES AND CHILD MENTAL HEALTH

Abstract

The world we live in is affected by increasing emergencies and disasters. The increase in the number of crises is significantly affected by climate change, which is also one of the significant problems of today. Earthquakes, droughts, floods, snowfall, hail, storms and fires are natural emergencies. They can also be technical-technological or caused by the consequences of the war. Regardless of the cause, emergencies disrupt social and material goods. Therefore, it is necessary to better prepare for crisis situations to preserve human life and reduce harmful consequences. Emergencies cause many consequences for the mental health of people, especially children. A child in any crisis needs acceptance, understanding and support; thus, mental health care is crucial because it ensures adequate growth and development and has positive effects on their lives and the life of society. Mental health promotion should be carried out from an early age because regular care for mental hygiene makes it easier to cope with difficulties throughout life, prepare for crisis events and faster recovery. This paper aims to examine the impact of emergencies on children's mental health, i.e., to present a review of domestic and international professional literature that promotes the importance of preserving children's mental health in specific situations such as emergencies in Croatia and worldwide.

Keywords: children, emergency, mental health

Introduction

According to the European Commission reports (2021), climate change, which is the cause of emergencies, has become an increasing global problem and threat today, especially for children and young people who are particularly vulnerable to their impacts. Children's mental health has become a growing concern in recent decades, especially in times of unexpected situations that call into question their own and others' safety. Mental illness is thought to begin at an early age and appear before the age of 14, according to a study showing that one in four people had a mental health problem that disproportionately impacted young people in complex social-economic situations (MIND, 2020). Emergencies have a substantial impact on the economic, political, environmental and, above all, health components, the consequences of which are the least discussed. Stress, depression, fear, anxiety, aggression, and tense social relationships are just some possible mental health consequences, the American Psychological Association (2017) notes. Accordingly, it is necessary to ensure transparent systems and processes for early identification and intervention followed by referral to experts. Therefore, school institutions are obliged to "ensure healthy mental and physical development and social well-being of students" (Committee on Legislation of the Croatian Parliament, 2012: 21). The educational institution should provide a strong foundation for strengthening children's mental health and academic success and an essential link between the two concepts. Creating a safe environment in the school community improves children's mental health and makes students more resilient to effectively manage stressful situations (Department of Education, 2018).

Burke et al. (2018) emphasize knowing the consequences of extraordinary circumstances on children's mental health. From experiencing a crisis situation, children bear the burden of negative consequences in later life. If the detrimental impact of emergencies is identified, a mental and physical adjustment must include unique and professional knowledge and approach to alleviate the child's psychophysical condition. It is essential to consider that children are the future representatives of society and that all their lived experiences will impact present and future decision-making. What is the impact of emergencies on children and their mental health? What can be done to mitigate the damage of the crisis situation? These are the questions that will be addressed in this paper. As we have witnessed emergencies in recent years, what prompted us to do this research is the emergence of visible mental health problems in children and young people that are not identified in time and are often neglected. For example, after three

major earthquakes that hit Croatia in 2020, several publications have been issued seeking to help and provide support to reduce anxiety, fear and suffering in times of crisis. One of the available brochures is *Djeca i obitelj prije, tijekom i nakon potresa* of the Zagreb Child and Youth Protection Center, which describes reactions to traumatic events in children and youth and gives advice and procedures for dealing with children. This paper emphasizes the importance of reacting to and treating children who have directly or indirectly experienced the effects of emergencies. This research highlights theoretical insights and conceptual frameworks that can serve scientists, educators, and parents. It emphasizes strengthening community responses to emergencies and improving mental health.

The significance of an emergency or crisis situation

Extraordinary events in human history are a problem and a challenge, primarily wars and numerous natural disasters such as earthquakes, floods and fires. Emergencies are, in most cases, called crisis events. Ajduković, Bakić and Ajduković (2016: 8) define an emergency as “an event that requires immediate measures to reduce its consequences to the lowest possible level.” In an emergency, safety is a priority, including caring for the injured, meeting basic needs, protecting property and saving lives. After a short time, psychosocial needs are visible, such as caring for oneself and a close person or disturbing emotional reactions that indicate that the person is not emotionally stable, which are the first signs of possible mental crisis (Ajduković, 2000: 93-119). Furthermore, Arambašić (2012) states that a crisis event is a sudden and/or rare event that is extremely disturbing and stressful for the majority of the population and can impact an individual, group or organization of the entire community. When we mention the notion of an emergency or crisis in everyday speech, we most often describe it as threatening and urgent, so it requires important decisions.

In addition to the above, Kovačević (2020) defines a crisis, such as an earthquake, as an absolute traumatic situation, shock as a state of overcoming our defence mechanisms and a consequence of our mental and physical state as trauma. He also points out that a large part of a person’s response to trauma and consequent problems is related to the functioning of his nervous system and that in situations of severe stress and trauma, it is best to seek professional opinion and professional help.

Hitrec (2007: 8) points out that today few people can say they do not live under stress because there are many events that people find disturbing and dangerous. As much as one tries to stay calm or control oneself due to a stressful situation, a traumatic experience, according to Hitrec (2007: 8), causes a reaction due to its character and intensity. A state of crisis is inevitable due to the pressure a person is exposed to while experiencing an unpleasant event. Each crisis develops several states: a crisis event, a feeling that we cannot cope with the situation and emotional response. It is important not to spread panic or fear during crisis events and act effectively and safely to save human lives and reduce harmful consequences.

Children's reactions to emergency situation

The impact of an emergency on a child's mental health depends on their age, gender, personality, socioeconomic status, previous exposure to a traumatic event and relationship with family (Masten, Narayan, 2012). Damage to one's own home, displacement, loss of loved ones, seeing family and loved ones and interruption of education are consequences of emergencies that cause mental health problems in children (Kousky, 2016). Another essential characteristic of a crisis or catastrophe is that it threatens the security of the whole community and its members. Common emotional reactions after a disaster are temporary shock, fear, anxiety and disbelief. However, feelings of anger, sadness, irritability, even guilt and shame and helplessness are widespread (Datillo and Freeman, 2011).

Plummer (2011) warns that a child's life is inevitably full of change and insecurity and that some changes bring excitement and relief while others cause sadness, frustration, confusion and fear. Some children tolerate change well, while some may find the slightest change difficult or stressful. The way a child experiences and expresses emotions is determined by their developmental level, reactions of the family and people from the environment, cultural influence and experiences. He also notes that interactions with children should always be careful and based on understanding children as unique individuals. Their emotional development can best be supported by listening carefully to children and observing their self-discovery, development and improvement. Datillo and Freeman (2011) state that children often have symptoms and actions that include increased alertness to danger, confusion, nightmares and fear of separation from adults that provide them with security. Therefore, there is a possibility

of helplessness and passivity in younger children. For example, children who have experienced a disaster find it challenging to talk about the event they have experienced and have difficulty recognizing their feelings.

UNISDR (2015) emphasizes that it is crucial to understand disaster risk and strengthen the disaster management system. Investing in disaster reduction and prevention plays a significant role, including increased preparedness to respond to disasters. For example, Arambašić (2012) states what happens during a state of emergency: daily functioning is difficult or even impossible, and control over life is lost, which causes helplessness in people. People are primarily focused on survival while thinking about psychological maintenance. He emphasizes that the signs of the crisis are universal and present in most people. However, the crisis experience is a personal experience that everyone experiences differently. The intensity and type of reactions, the signs of a crisis, vary from person to person.

Hitrec (2007: 10) cites regressive behaviour, loss of interest in special activities, problems in behaviour, sleeping and dealing with other children, fear that such situations will continue to occur and everything that reminds children of their concern. Clearly, in different childhoods, reactions are also different. According to Buljan Flander et al. (2020), reactions are divided according to the children's age, thus highlighting the difficulty in controlling crying, fear of separation, loneliness and darkness, changes in appetite, irritability, regressive behaviours and sensitivity to sounds in preschool children. For example, elementary school students react to the earthquake by emphasizing withdrawal, difficulty sleeping, sadness, refusal to go to school, new fears, headaches, nausea and aggression. At the same time, adolescents notice irritability, helplessness, inability to calm down, indifference, isolation from the environment, and preoccupation with earthquakes and similar disasters. Ahdoot and Pacheco (2015) state that post-traumatic mental health problems in children decrease within one year after experiencing an emergency. Although according to Kousky (2016), more severe crisis situations are more dangerous because the consequences on a child's mental development can last a lifetime or even be passed on to the next generation. Children are very vulnerable, so the caregivers' responsibility is even more remarkable. Namely, if the caregiver is not prepared or does not manage their stress and workload, this is reflected in their behaviour and thus transmitted to children.

Action in crisis situation

Gislason et al. (2021) point out that the crisis is one of the biggest challenges for human rights today: a safe life, including housing security, necessities such as food and water and the right to health. However, the usual way of solving problems in crises is not present. Consequently, Arambašić (2012) describes the crisis as a period of significant life changes. He notes that it is unknown whether these changes will go in a positive or negative direction. However, after a crisis, an individual may return to a normal lifestyle or a lifestyle that may improve or worsen compared to the time before the emergency.

On the other hand, an emergency situation arises suddenly, without warning, so the affected person feels vulnerable and afraid. According to Bujišić (2005), a crisis situation is caused by a change in several segments of an individual's material or socio-cultural reality or a change in the individual themselves who cannot establish psychosocial balance for a certain period. He also warns that the changes caused by the crisis in most cases indicate a loss, be it a material loss or a loss at the socio-cultural level of living.

Hitrec (2007: 9) notes that earlier preparation for a crisis event means that it must be accepted that such an event is possible, so it includes informing all responsible persons about a possible crisis event, its psychological consequences, mitigation and the like. Good preparation also increases the likelihood of a more successful confrontation with the event and more effective assistance to those in need. Such actions would primarily include forming a crisis team, defining and distributing tasks, identifying possible crisis events, developing a general plan for such an event and obtaining the necessary literature.

Pokos (2007: 20-22) points out how important the atmosphere in kindergarten is for the quality development of children and states that the child should be in an environment where they feel safe, welcome, warm, friendly, understanding, respectful and diverse. Furthermore, the environment should be stimulating so that the child can express their opinions, ideas, feelings and desires autonomously to fully perform activities, create, communicate and explore.

According to Hitrec (2007: 10), a child in any crisis needs acceptance, understanding and support the most, and they must have a person they can trust. Moreover, for recovery from trauma, says Kovačević (2020), relaxation techniques, staying in nature, meditation, dancing, socializing, drawing, modelling, and the like can also help.

According to Pokos (2007: 20-22), people who work with children can act preventively by constantly checking the space where children will stay before their arrival, informing responsible persons about deficiencies and eliminating them, and not using the space if it is not safe for children to stay. In terms of ensuring quality conditions as a prerequisite for the children's protection and progress, Pokos (2007: 22) quotes Maria Montessori with the words "only the best is good enough for children." Kousky (2016) advises that it is necessary to prepare in advance for a possible disaster, for example, to improve the construction of school buildings and houses substantially. In addition to the above, it is necessary always to know the location of firefighting equipment, practice evacuation and handling in case of fire, remove all potentially dangerous means, materials or plants out of reach of children, provide sockets (covers), check first aid kit and allow unimpeded movement in space. Furthermore, it is necessary to enable control over the entry and exit from the room and into the outdoor space. Buljan Flander et al. (2020) point out that adults, especially parents, play an essential role in healing trauma, while Hitrec (2007: 11) concludes that there is no absolute safety. However, if those responsible prepare well and learn to respond effectively, they may be willing to provide children with appropriate psychological help and reduce stress.

Children's mental health

Mental health is part of our general health; unfortunately, we only take mental health care seriously when something terrible happens. Buijišić (2005) explains that children are born with similar basic abilities, so during adolescence, they undergo various, usually dramatic, changes. The concept of a child's mental health, according to Wenar (2003), during early childhood growth and development includes factors that protect and factors that eliminate or reduce possible risks.

The World Health Organization (WHO, 2001) defines mental health as a state in which a being builds his or her abilities and meaningfully performs daily activities and obligations in which he or she can contribute to their environment. However, if we put this definition in the context of children's mental health, Vorkapić, Vlah and Vujičić (2012: 132) define a child's mental health as a general condition of a child in which a child can adequately face challenges, spend time in play, exercise their abilities and contribute themselves and community. Additional attention should be paid to the fact that young children observe the

current situation only in the present, says Bujišić (2005), because it is harder to understand how a particular action will happen. Children want to talk immediately about what is bothering them and not over time. As a result, there is a mixture of imagination and reality, so they believe that if they want something, it will happen. Since not every individual experience a specific experience, in the same way, various factors can cause traumatic experiences where there is an inability to express emotions and feelings (Kilic, Sayil, Devrimci, 2003: 492-494). However, Bujišić (2005) states that children's reactions to the crisis are more pronounced than adults'. Behaviour change and regression are the most common indicators of trauma and stress in children. Many variables determine whether a crisis will affect emotional health. That cannot be controlled due to, for example, the severity of one's experience, psychological function and previous exposure to stressful or complex life circumstances.

Regarding the impact of crises on children, Winch (2018) warns that the traumas people experience are so deep that they require the skills of mental health professionals. Nevertheless, it should be noted that it is still a subjective experience that varies from person to person. Some will experience this mildly, while others will conclude that their lives are disrupted, which can last for years.

Consistent with all the above, Winch (2018) points out that teaching children to take care of mental health or hygiene can positively affect their lives and the life of society as a whole. Mental health needs to be turned into something unavoidable and vital, so children can find it easier to face life's difficulties and be more ready to react and recover faster. One of the first steps in responding to the children's mental health crisis is to provide training such as mental health first aid and new research that will point to a growing policy shift towards increased attention to school interventions for mental, emotional and behavioural problems (Brown, Carr, 2018). When a student is suspected of having a mental health problem, a complete process is required; assess - plan - do - review. At first, emotional disorders appear, reflected through behaviour, then developmental disorders and attachment disorders that include eating disorders, stress disorders and psychotic disorders (American Psychiatric Association, 2013).

Ledinski Fičko et al. (2017: 61-72) recall that promoting children's mental health is crucial because it ensures the proper growth and development of the child. The prevention of mental disorders in children is still developing. However, it is necessary to implement programmes from an early age. Educating children is equal to the importance of educating parents, who genuinely play a crucial role in solving their own child's mental problems. Moreover, the interaction between

educators, teachers and professors is an essential indicator of maintaining mental health. Therefore, it is mandatory that educators can timely recognize and identify various mental health problems and disorders in children. For example, the project *Healthy Living* in Croatia provides the opportunity for educational workers to improve their health literacy in the field of mental health of children and youth and also to strengthen and take control of their own but also the health of people in our community (Croatian Institute of Public Health, 2020: 5-11).

Conclusion

Every child is different; he or she feels, behaves, and experiences the world around them differently, so there are no universal rules that will fully help every child in every situation. Moreover, the most important thing is that the child feels safe and respected. During childhood, a child's mental health dramatically affects his or her health in old age; besides, mental health problems can be short-term or long-term. The existing literature deals with psychosocial support and assistance in mental health; moreover, it provides information, seeks to improve knowledge and skills in identifying problems, and provides assistance and support.

Adverse and sudden changes in the environment directly affect life components, creating a lack of control over life. Such situations endanger health, nutrition, identity, socialization and more. If the consequences of experiencing emergencies are discovered, neglecting them will put the risk of further damage to mental and emotional health, as well as the functioning and quality of everyday life. Therefore, it takes much time to focus on the problem of children's mental health through prevention and promotion of mental health so that children can fully have adequate development to achieve and strengthen their potential and abilities.

The scale of mental illness among children and young people should encourage more research to focus on mental health at every stage of a person's life, not only in hospitals but also in classrooms, at work and in communities. That will ensure that children and young people receive the help and support they need, as mental illness often begins in childhood and, if left untreated, can be life-threatening.

This paper indicates the importance of continuing research on the impact of emergencies on children's mental health, so the further goal is to inform and

strengthen the community regularly. The existing literature reviews have an essential role in building basic knowledge and highlight the need to expand this research and knowledge further and encourage deeper and fuller understanding. Questions that include what a parent, teacher, educator, caregiver and others should do when they notice a child's mental health problem after a crisis situation, whose help they can rely on and how to act are open for new research. It is recommended to design additional programmes to promote and protect children and young people's mental health and well-being, enabling the most outstanding possible protection of mental health in experiencing emergencies.

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POVEZANOST IZVANREDNIH SITUACIJA S MENTALNIM ZDRAVLJEM DJECE

Sažetak

Svijet u kojem živimo zahvaćen je sve većim brojem izvanrednih situacija i katastrofa. Na porast broja kriznih situacija značajno utječu klimatske promjene koje su, ujedno, i jedan od većih problema današnjice. Potresi, suše, poplave, snježne oborine, tuča, olujno nevrijeme i požari prirodne su izvanredne situacije. One još mogu biti i tehničko-tehnološke ili uzrokovane djelovanjem posljedica rata. Bez obzira na uzrok, izvanredne situacije narušavaju društvena i materijalna dobra te se zbog toga potrebno što kvalitetnije pripremiti na krizne situacije kako bi se očuvao ljudski život i smanjile štetne posljedice. Izvanredne situacije uzrok su brojnih posljedica na mentalno zdravlje ljudi, a posebice djece. Dijete u bilo kojoj kriznoj situaciji treba prihvaćanje, razumijevanje i podršku, a briga za mentalno zdravlje važna je jer osigurava odgovarajući rast i razvoj te ima pozitivne učinke kako na njihov život, tako i na život društva u cjelini. Promociju mentalnog zdravlja potrebno je provoditi od najranije dobi jer redovita briga o mentalnoj higijeni omogućuje lakše suočavanje s poteškoćama kroz život, spremnost na krizne događaje te brži oporavak. Cilj je ovoga rada istražiti utjecaj izvanrednih situacija na mentalno zdravlje djece, odnosno prikazati pregled domaće i svjetske stručne literature koja promiče značaj očuvanja mentalnog zdravlja djece u specifičnim situacijama kao što su izvanredna stanja kojima smo u posljednje vrijeme svjedočili u Hrvatskoj i svijetu.

Ključne riječi: djeca, izvanredna situacija, mentalno zdravlje