

AVAILABILITY AND ADEQUACY OF SUPPORT FOR YOUNG PEOPLE FROM VULNERABLE GROUPS FOLLOWING CRISIS EVENTS

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Abstract: *This paper addresses the critical issue of understanding the perceptions of young people from diverse vulnerable groups on the availability and effectiveness of support systems during and after crisis events. While existing literature explores the impact of crises such as earthquakes, pandemics, and war on the mental health and education of young people, it lacks insight into the subjective experiences of young people, especially those from different vulnerable groups, regarding the support systems available to them during and after such events. The SPONA project, titled “Solidarity in Supporting Young People at Risk of Poverty, Social Exclusion and Violence, as well as Young People in Crisis Situations”, sought to bridge this gap by conducting a survey involving 24 young people from various vulnerable groups, such as those facing difficulties at school, those with behavioural problems, conflicts with the law, those belonging to the LGBT group, or the Roma national minority, those experiencing young parenthood, or violence, and those residing in geographically isolated areas.*

Thematic analysis indicates that, despite belonging to a vulnerable group, these young people perceive the recent crises they are facing as a situation that does not directly affect them to a significant extent: in fact, they attribute greater effects of the crises on other groups. The study reveals a lack of awareness about the available psychosocial support systems, a pervasive mistrust in the support system, and a belief that help is inaccessible due to high costs and increased demand after crisis events. The recommendations resulting from the study underscore the necessity for free and easily accessible professional psychosocial support tailored to the specific needs of young people from diverse vulnerable groups.

In conclusion, the findings of this study not only provide valuable insights into the subjective experiences of young individuals in vulnerable groups, but also offer practical recommendations for enhancing support systems and interventions. These recommendations aim to create inclusive and effective measures to address the needs of young people at risk of social exclusion in the aftermath of crisis situations.

Keywords: *young people, vulnerable groups, crisis events, personal experience, support systems, availability, qualitative analysis*

1. INTRODUCTION

Recent global crises have affected individuals to differing extents. In the case of the Republic of Croatia, several crises occurred during 2020 and 2021: the COVID-19 pandemic affected the majority of the population, while a strong earthquake in Zagreb in 2020 and an even stronger earthquake near Petrinja at the end of 2020 directly affected certain population groups, depending on the geographical area. The Russian invasion of Ukraine had no direct impact on the territory of the Republic of Croatia:

there was an influx of refugees into the country and certain individuals experienced psychological disturbance as a result of the war. Such global crises have a negative impact on the daily lives of children and young people, especially those from vulnerable groups, by restricting their access to crucial interventions aimed at mitigating adverse life conditions. Lange et al. (2013, as cited in Kamenshchikova, 2017) identified three types of vulnerability: inherent vulnerability - tied to human nature; situational vulnerability - stemming from specific socio-polit-

ical contexts; and pathogenic vulnerability - resulting from adverse social events. This paper explores how inherently and situationally vulnerable youth, who are already engaged in support interventions, are affected when pathogenic vulnerability emerges across the general population.

Borić and Mataga Tintor (2022) highlighted that vulnerable youth include children from the Roma national minority, children without adequate parental care, children with developmental difficulties, children in the healthcare system, children in the justice system, refugee and migrant children, children living in impoverished conditions, and children living in remote areas. In assessing intervention needs, it is also important to consider young people exposed to various forms of violence (domestic or peer violence), as well as those facing discrimination or learning difficulties. According to Gabrielli and Lund (2020), three distinct high-risk youth populations deserved special attention during the COVID-19 pandemic: children living in impoverished conditions, children with disabilities, and children in families experiencing high levels of conflict. Additionally, the concept of intersectionality underscores the intricate interplay among these groups, indicating that young individuals often struggle with vulnerability on multiple fronts, given that vulnerability in one domain often compounds their susceptibility in others (Lund & Vaughn-Jensen, 2012).

In relation to multiple vulnerability, additive and cumulative risk models provide a framework for understanding how various risk factors interact to influence child development, particularly in vulnerable populations during large-scale crises such as the COVID-19 pandemic. The Additive Risk Model assumes a linear relationship between the number of adversities and developmental outcomes, where each additional risk factor gradually deteriorates overall well-being (Bondi et al., 2020). In contrast, the Cumulative Risk Model suggests that risk factors interact exponentially, meaning that when a certain threshold of risks is surpassed, the negative impact on development is disproportionately amplified (Lamela & Figueiredo, 2020). During such crises, the cumulative burden of adversity intensifies, disproportionately

affecting children who are already in vulnerable positions (Snetselaar et al., 2022). This cumulative risk model has been empirically demonstrated in previous studies. In conflict-affected regions, a higher index of combined risks (e.g., low socioeconomic status, parental mental illness) has been found to predict significantly higher levels of emotional and behavioural problems in adolescents (Kara & Selcuk, 2024).

When a crisis strikes an entire population, for example, a pandemic, natural disaster, or armed conflict, it tends to hit vulnerable youth the hardest. Crises are often described as “stress multipliers” for young people who are marginalised, compounding pre-existing disadvantages. Evidence suggests that, during large-scale emergencies, some children and adolescents are significantly more vulnerable to crisis-related challenges than others (Habermann et al., 2025). Those with pre-existing mental health conditions, family dysfunction, or social marginalisation are at heightened risk of negative outcomes under crisis conditions (Habermann et al., 2025). The COVID-19 pandemic represents an “acute-on-chronic crisis”, during which pre-existing vulnerabilities among at-risk youth were exacerbated by new stressors such as social isolation, financial instability, and disruptions in education and support services (Power et al., 2020; Gabrielli & Lund, 2020).

Studies examining the consequences of crisis exposure during adolescence, broadly defined as the phase between ages 15 to 30 years, highlight the importance of sensitive periods (i.e.,) distinct phases of heightened neuroplasticity where environmental factors critically shape neural development and behavioural trajectories (Knudsen, 2004; Reh et al. 2020; Uhlhaas et al., 2023).

Recent global research (such as Ravens-Sieberer et al., 2023; Pepe & Farina, 2023) have indicated a decline in the mental health of children and adolescents during the pandemic. Most studies on young people that were conducted during the COVID-19 pandemic and earthquakes in Croatia were carried out with the general youth population, with research samples primarily accessed through the educational system. These studies predominantly focused on indicators of mental health (Kereseteš, 2020; Rezo

Bagarić, Sušac, & Rajhvajn Bulat, 2023; Ajduković & Kožljan, 2022) and the impact of the crisis on specific aspects of daily life (Filipović & Rihtar, 2022; Jokić & Ristić Dedić, 2021). The majority of their findings centred on the perceived quality of teaching and learning processes during these crisis events (Jokić, Ristić, & Dedić, 2021; Zovko, Vukelić, & Miočić, 2022). Some of these studies also addressed the earthquake-related dimension of the crisis (Ajduković & Kožljan, 2022; Keresteš, 2020). However, none of these studies explored the impact of such crises on vulnerable populations.

International research that was conducted during the COVID-19 pandemic and focused on vulnerable youth have identified several key indicators. These include increased financial difficulties among 18- to 29-year-olds, particularly those from lower socioeconomic backgrounds, along with more pronounced mental health symptoms, including anxiety, depression, and post-traumatic stress - especially among girls, older adolescents, and LGBTI+ individuals (OECD, 2021; Magson et al., 2021). Disruptions in school attendance affected those with poor school attachment (Addis & McNulty, 2021). Since the COVID-19 pandemic exacerbated academic and social risk factors, students who were already struggling fell further behind or disengaged from education entirely, placing them at greater risk of permanent dropout (Addis & McNulty, 2021). The crisis amplified academic and social vulnerabilities, increasing the likelihood of permanent school exclusion. By the end of 2020, Organization for Economic Co-operation and Development (OECD) reported an average NEET (Not in Education, Employment, or Training) rate of 12% among 15- to 29-year-olds, with an additional 2.9 million youth classified as NEETs compared to the previous year. Justice-involved youth represent a highly vulnerable group even under normal circumstances, frequently carrying histories of trauma and mental health difficulties. A study of incarcerated adolescents during the COVID-19 pandemic found that those incarcerated during the pandemic were more likely to experience mental health problems in confinement (Liu, 2024). During the same period, reports of domestic violence also rose, posing a serious risk to

vulnerable young people trapped in unsafe households (Power et al., 2020). A longitudinal study in Chile found that a severe earthquake significantly worsened children's psychosocial functioning, especially among those who had several adverse childhood experiences at home (Dutta et al., 2022). Both acute disasters and ongoing household stressors had independent negative effects on children, but their combined impact resulted in the most adverse outcomes. Teen parents, who were already in a precarious position, faced intensified burdens during the pandemic. School and daycare closures and limited access to public benefits disproportionately affected them, threatening both their well-being and caregiving capacity (Aparicio et al., 2023). These examples collectively illustrate how acute crises exacerbate existing vulnerabilities among marginalised youth.

Studies on the accessibility of psychosocial support for youth during the pandemic are extremely rare. Brühlhart et al. (2023) analysed the data from 3 million calls to youth helplines in Germany between January 2019 and February 2023. The study tracked changes in distress level in calls made by young people before the COVID-19 pandemic, during the pandemic, and after the outbreak of the Russia-Ukraine war. The results showed increased call volumes and content shifts. Prior to the pandemic, conversations predominantly centred on education and peer relationships. During the pandemic, topics shifted toward family and mental health.

These findings suggest that young people are generally adaptable, embracing digital communication and seeking opportunities in virtual domains for education, work, and social interactions. However, not all young people have been able to benefit from these changes due to differences in internet access and digital device availability, particularly among the Roma population and people in geographically remote areas. While the results on the pandemic's impact on young people's mental health are conflicting, there is consistent evidence of reduced service availability during and after the pandemic (Butterworth et al., 2021; Korczak, Madigan & Vaillancourt, 2022; von Soest, 2022).

The OECD (2021) conducted a review of member states' actions to support young people during the crisis and proposed five types of support: (1) youth strategies to guide cross-sectoral and employment policies, (2) emergency income support for young people, (3) hiring subsidies to promote youth employment, (4) work-based learning opportunities and apprenticeships, and (5) expanded mental health services and financial support for young people. It is noteworthy that less than 20 out of 37 OECD member states have implemented measures related to mental health support for young people. This focus on psychosocial interventions for vulnerable youth underscores the need for more comprehensive action in this area.

Despite growing awareness of how global crises disproportionately affect vulnerable youth, existing research has primarily focused on psychological outcomes such as mental health indicators and educational disruptions. In Croatia, the available studies have largely relied on school-based samples and generalised youth populations, and little attention is paid to youth who deal with multiple and intersecting vulnerabilities. Furthermore, although international evidence highlights the increased needs of high-risk youth, it lacks qualitative insight into how support services are experienced on the ground. The present study addresses this gap by focusing on the voices of vulnerable youth themselves and their perceptions of institutional support during and after crisis events. Existing reviews lack insights into young people's perspectives on the support and assistance systems accessible to them during or after specific crisis events. Therefore, the aim of this study is to present the perceptions of young people from different vulnerable groups regarding the availability and effectiveness of support systems during and after crisis events.

2. METHODOLOGY

2.1. Research questions

To achieve the aim of this study, the following research questions have been formulated:

1. How have young people experienced the crises that have occurred over the last three years?
2. What is the level of knowledge among young people about the available forms of support and assistance?
3. How do young people describe the assistance that was available to them during and after crisis events?
4. What kind of assistance did they require?

2.2. Sample

The participants in the present study comprised of young users of psychosocial support services in non-governmental organisations involved in the SPONA project - Solidarity in Supporting Young People at Risk of Poverty, Social Exclusion and Violence, as well as Young People in Crisis Situations. These organisations include the following: the Nansen Dialogue Centre, the Association for Promotion of IT, Culture, and Coexistence (IKS), SOS Rijeka - Centre for Nonviolence and Human Rights, the Lesbian Organisation Rijeka (LORI), and the Association for Human Rights and Civic Participation ("PaRiter"). The inclusion criterion for young people in the study was their participation in psychosocial support/psychoeducational programmes of the aforementioned organisations and the fact that they belong to one or more vulnerable groups. These vulnerable groups included young people with learning difficulties at risk of early school dropout, young people with behavioural problems, and young people who have been in conflict with the law, i.e., who have engaged in criminal behaviour. In addition, the study included young victims of violence, young individuals from LGBTQ+ groups who had experienced social exclusion, rejection, and violence in their surroundings, young members of the Roma national minority facing poverty and educational difficulties, as well as young parents belonging to one of the aforementioned vulnerable groups.

A total of 24 young people participated in the study, eight of them from Zagreb, five from Osijek, three from Petrinja, and eight from Rijeka (all towns in the Republic of Croatia). The young-

est participant was 16 years old, while the oldest was 30 years old, with the average age of participants being 19 years and 11 months. In terms of gender distribution, there were 7 girls, 10 boys, and two non-binary individuals. Among the 24 young people, 14 had educational difficulties and behavioural problems, including conflicts with the law. Three identified as members of the LGBTQ+ community and three belonged to the Roma national minority, with one individual being a young parent. Some individuals were at risk of poverty and 14 of them reported experiencing violence.

2.3. Data collection and ethical aspects of research

Before the research study was conducted, ethical approval was obtained from the Ethics Committee of the Ambidexter Club (lead partner). The data were collected using semi-structured face-to-face interviews between December 2022 and March 2023. Trained collaborators from partner organisations - typically one or two individuals per organisation - conducted the interviews. These collaborators worked directly with the young people participating the study and therefore, had prior knowledge about their life circumstances.

A structured protocol for conducting semi-structured interviews was used to ensure a systematic and consistent approach when conducting, recording, and transcribing the interviews. The introductory part of the semi-structured interview included researcher introduction, a presentation of the project, and an explanation of the study's purpose and process, as well as a clarification of key ethical issues (audio recording, anonymity of participation, confidentiality, the right to withdraw, the right of access to their own interview and research results). Each interviewer familiarised the research participant with the content of the introductory section before they signed the informed consent form to participate in the study. After their consent was obtained, the recording began. For recording purposes, the participants chose a nickname to ensure anonymity.

The main part of the semi-structured interview consisted of blocks of questions that were posed

to all participants regarding the following topics: I. Self-care, risk and protective factors, problems; II. Coping with crisis; III. Recognising vulnerable youth; IV. Education; and V. Something about you. The remaining questions, including those from group VI. Vulnerable youth, were selected based on the vulnerable group that the young person belonged to, which depended on their experiences and the problems they faced. These questions focused directly on the experience of vulnerability, such as living in geographically isolated areas or young parenthood.

The interviews lasted 36 minutes on average. After the interviews were conducted, they were transcribed, resulting in a document with 355 pages of text (Calibri font, size 12, 1.5 line spacing).

2.4. Data analysis

Based on the preceding sections on participants and data collection methods, it is evident that a qualitative methodological framework was employed. An inductive thematic analysis was used in the data analysis process, with predefined key themes that formed the basis of our study questions. These themes included the experience of crisis events, knowledge about available forms of assistance, characteristics of available forms of assistance and support, and recommendations for appropriate assistance for young people from various vulnerable groups. Each thematic area corresponded to a research question. Throughout the analysis process, individual codes and corresponding categories were identified following the standard methodology outlined by Ritchie and Spencer (1994). This method allows researchers to identify, analyse, and report patterns (themes) in qualitative data, while providing a detailed description of the data and interpreting various aspects of the topic under question (Guest, MacQueen & Namey, 2012).

Credibility and consistency were maintained by adhering to the recommendations of Clarke and Braun (2013) for assessing the quality of thematic analysis. Although the analysis was conducted by a single researcher, efforts were made to maintain reflexivity and minimise bias through

the use of analytical memos, journaling, and iterative reading of the data. To enhance trustworthiness, interpretations and preliminary themes were discussed with the interviewers involved in data collection, allowing for a comparison of perspectives and clarification of contextual nuances.

The data were validated with the research participants after the analysis, allowing them to assess and confirm the credibility of the results and conclusions.

3. RESULTS AND DISCUSSION

The results of the analysis will be categorised and presented based on the four aforementioned themes: experience of crisis events, knowledge about available forms of assistance, characteristics of available forms of assistance and support, and recommendations for appropriate assistance for young people from various vulnerable groups.

3.1. Experience of crisis events

When describing crisis events, the young people participating in this study primarily remember and describe the COVID-19 pandemic. They also describe the recent war in Ukraine as a crisis event, albeit to a lesser extent, mainly because of the threat of the war spreading. In addition, they mention that they have observed direct consequences such as an increase in prices. Although they describe the earthquake as a crisis event, they report no impact beyond a sense of fear.

The first category identified in the analysis is titled **It hit us, but it's over now**, which discusses the changes young people had to make. The participants talked about these changes in the past tense, as belonging to an earlier time. They also talked about their desire for the society as a whole, as well as themselves, to draw life lessons from this event (primarily referring to the pandemic).

The next category that describes young people's experience of crisis events is **Feeling insufficiently affected**. The participants describe how they had expected the crises to affect them more than they actually did. They talked about the predominant emotions that they felt, such as feelings

of fear, anxiety and uncertainty, and mentioned that, apart from these, they did not experience any unexpected or significant consequences. A notable code describes a situation in which young people were not forced to change their communication and socialising habits, which contributes to the feeling that they did not experience any significant consequences. Consequently, the young people identified which groups were more affected by the crises and which groups have had their lives changed to a greater extent than theirs: they mentioned those who did not have enough support in their primary environments, such as school and family, those who are poor, or sick, those without stable housing, as well as those belonging to the Roma community and other marginalised groups. In addition, the codes indicate that young people are aware that such crises can further endanger and affect the vulnerable and marginalised segments of the population.

The next category **Recognition of consequences and impact on others, but not on themselves** describes how young people do not recognise the potential consequences, primarily from the pandemic, on their own lives. The participants expressed that they may have developed a certain character and behaviours to help them handle difficult crisis situations, so they were personally not shaken by them at all. However, they know people who still feel a hint of fear when they hear loud sounds, reminding them of the earthquakes. Personally, they experienced it as being quite normal - they left the building, returned later, and that was it. Once again, they identified groups that were or are affected by the earthquake and those who are directly threatened by the ongoing war, and they mentioned how they discuss these events with friends, but do not feel directly affected by them.

Furthermore, these young people have arrived at general (and sometimes generalised) conclusions about what happened after the crisis events, such as increased nervousness among people, alienation and discord, greater laziness and slowness, especially after the pandemic. They also notice an increased presence of hate speech as a general consequence of wartime events.

Recognition of life areas affected by the pandemic explores how young people identify aspects of their lives that are directly influenced by crisis events. The pandemic is the predominant topic in their descriptions, while the war is mentioned less often. Codes describe its impact on education, particularly academic performance and reduced quality of education. It also had an impact on their personal experience of completing their general education. In these descriptions, feelings of loss and missed opportunities are prevalent. Unemployed youth struggled to find or keep work, or to secure stable employment. Social life also suffered due to restrictions. Another area in which young people felt the consequences of the pandemic was socialising with friends and the limited opportunities for entertainment. When talking about the impact of the war, they are primarily aware of the rising prices and they feel that this circumstance affects them significantly because they have low incomes, if any at all.

The next category describes a range of **unpleasant emotions** that have emerged under the influence of crisis events, including fear, nervousness, worry, boredom, as well as states of shock, panic, stress, and constant pressure.

The category **Advantages of altered conditions resulting from crisis events** highlights perceived benefits of crisis-related changes. It is evident from the codes that the pandemic was welcomed by young people who are generally not fond of socialising and going out, because they no longer needed to constantly come up with excuses to avoid social gatherings or certain school obligations (internships). Some found schooling and exams easier, while others appreciated having more time for themselves, such as exercising, playing video games, and even studying. Furthermore, the code “The pandemic imposed an online world and the attitude that it’s okay not to socialise” reflects how some youth embraced online communication and found comfort in a lifestyle where reduced social interaction became acceptable and even valued.

The pandemic contributed to the development of new skills and habits highlights how the pandemic encouraged young people to increase their self-regulation and self-control skills, as well as to occupy their thoughts, primarily through playing video games, and to find ways to stay in touch and socialise with close friends, mainly through video calls.

The last category, **Passed by them**, refers to young people who were aware of the crisis, but did not experience changes in their lifestyle. This primarily applies to those living in large households or institutions, where the opportunity to socialise continued to be available, reducing the impact of isolation. Furthermore, individuals who describe themselves as unsociable enjoyed staying in their rooms. Given the fact that they identified as introverts meant that they could enjoy time alone and maintain their routines.

Individuals who decided not to follow the rules that were put in place organised their lives in such a way that the circumstances passed them by (“*So, maybe it sounds silly what I’m talking about, like “nerds” perhaps. Because they mostly believe whatever you tell them. It’s not an insult, but I don’t know how else to call them, those who really like, studying, enjoy watching the news and all of that stuff gets into their heads and they believe it. I didn’t watch any of that and lived my life the way I did.*”). Another group, such as those with NEET status, found themselves in a situation where the circumstances surrounding the pandemic passed them by. As they are young people who did not work or attend school, the impression is that they were unaffected and the pandemic did not impact them. Young people felt the most significant effects of the pandemic in employment and education, whereas those who were less socially engaged had the impression that the pandemic simply passed them by.

Table 1. Codes and categories corresponding to the theme titled experience of crisis events

Categories	Codes
It hit us, but it's over now	<i>It's over now</i> <i>It didn't affect me, but it shocked me</i> <i>Feeling that they endured, coped</i> <i>It was tough, but with time, things returned to normal</i>
Feeling insufficiently affected	<i>It didn't hit me/us hard, it could have been worse</i> <i>There was no need to change socialising and communication habits</i> <i>Recognition of groups that were more affected</i>
Recognition of consequences and impact on others, but on themselves	<i>Unawareness of the impact on their lives</i> <i>Inability to recall what it was like during the pandemic (lockdown)</i> <i>Events were a topic of conversation with friends</i> <i>The pandemic slowed people down and made them lazier</i> <i>Isolation changed people</i> <i>War contributes to hate speech</i> <i>Alienation and discord among people</i>
Recognition of life areas affected by the pandemic	<i>Deterioration of the quality of education, learning, and internships, along with an accompanying feeling of loss</i> <i>The pandemic affected academic success</i> <i>The pandemic affected the perception of graduation</i> <i>Changed circumstances led to the inability to work or find a job</i> <i>The pandemic led to lockdowns</i> <i>For those who work with people, it was challenging to work normally</i> <i>The pandemic affected socialising with friends</i> <i>Prices increased because of the war</i>
Unpleasant emotions	<i>The pressure associated with daily tasks during online learning</i> <i>Unexpected shock that has not been experienced before</i> <i>Fear, nervousness, negative emotions</i> <i>Boredom</i> <i>Fear after earthquakes and when discussing crises</i> <i>Information about the war created panic</i> <i>It was stressful to change the way the work is done</i> <i>Concern about rising prices</i>
Advantages of altered conditions resulting from crisis events	<i>The pandemic was welcomed as it eliminated the need for excuses</i> <i>Schooling and taking exams were easier</i> <i>Time for oneself</i> <i>Extra time for other activities</i> <i>Self-care because there was enough time</i> <i>Changed conditions suited them</i> <i>The pandemic imposed an online world and the attitude that it is okay not to socialise</i>
Pandemic contributed to the development of new skills and habits	<i>Finding ways to endure, occupy one's thoughts</i> <i>Finding ways to socialise with close friends</i> <i>Shaken because it changes habits</i>
Passed them by	<i>Life rhythm as it was before due to living in a large family or institution</i> <i>"Introverts" found their groove</i> <i>Not adhering to the newly imposed rules</i> <i>Disconnecting and not keeping up with current affairs</i> <i>Not engaged in education and employment - unaffected</i>

3.2. Knowledge about available forms of assistance

This theme explores young people's knowledge of available support and it is described through six categories. Overall, their understanding is limited, despite being part of support systems due to various vulnerabilities. The first category, **Unspeci-**

fied experts, shows that while the participants expect professional help after crisis events, they are unclear about who these experts are. Sometimes they mention the profession of the person, sometimes the institution or workplace, and sometimes what should be done by these experts.

The next category is called **Ignorance** because it comprises of responses in which the young people say that they do not know where to seek help or who to seek help from, meaning they are not familiar with the sources of support and assistance available to them after crisis events.

The next category discusses the **systems and groups young people expect help from** after crisis events. The codes describe almost all the systems that they know of related to helping young people with different problems. These include psychiatrists or the healthcare system, experts from the education system or the education system by itself, and finally, social care, although they were hesitant to seek help from that system. Namely, young people have had negative experiences with the help received in the social care system, for example, they mentioned that they would *approach hesitantly* and felt as if the social system was *looking for somebody to blame*. Family, parents, and friends are also named as expected sources of support, along with some alternative methods.

The next category describes **strategies for seeking help**, with young people mentioning that they would “Google”, inquire, or ask people close to them for help, for example, their mother. One code highlighted seeking help within a small trusted circle, since professional support was considered unnecessary. Those who had experienced psychosocial support described personal strategies for finding adequate help. One young man described how his personal experience of seeking

help changed his attitudes. He mentioned that, in the past, he would rely on the healthcare system and asked for a referral, whereas after his personal experience, he would directly seek out psychosocial professionals. This shows that there is an “informal” network based on personal stories and experiences.

The next category is called **stigma about getting professional help**. During discussions about whether the participants know who helps young people after crisis events, a stigma was revealed about seeking help itself. Young people expressed concern about being judged by others, since seeking help may be perceived as labelling oneself as ‘crazy’. They mention how they avoid seeking help because of stereotypes associated with what happens during counselling, what is said in these sessions, and whether they can trust the counsellors.

The last category relates to **young people’s awareness of the difficulties in accessing adequate help**. The participants noted that support is limited, often private and unaffordable, and generally inaccessible. Stigma adds to the challenge, highlighting the need to inform youth about how seeking help actually works. They identified difficulties with the available methods of help related to the way institutions operate, with the perception that they provide superficial assistance and cannot help adequately. They also recognised that crisis events further reduce the availability and accessibility of assistance.

Table 2. Codes and categories corresponding to the theme titled knowledge about available forms of assistance

Categories	Codes
Unspecified experts	<i>The term “professional” - without explanation or specification</i> <i>“Some counselling centre, some organisation”</i> <i>Some school staff, educators, psychologists</i> <i>“Some psychologist, some therapist to talk to”</i>
Ignorance	<i>Lack of knowledge about where to seek help</i> <i>Lack of knowledge about any sources of help and support</i>
Systems and groups from which young people expect help	<i>Psychiatry can help when needed</i> <i>School and experts in the educational system can be most helpful</i> <i>Social care approached hesitantly</i> <i>Friends and family can give encouragement to seek help</i> <i>Belief in alternative methods (bioenergy), sports</i>
Strategies for seeking help	<i>“I would google”, inquire</i> <i>Having a small personal circle, so professional help is not needed</i> <i>Necessity to talk to many professionals to find someone who is okay</i> <i>Mother knows</i> <i>Those with experience know where to seek help and what type of assistance to expect</i> <i>Experience changes perception</i>
Stigma about getting professional help	<i>“Fear of what other people will say”</i> <i>Using counselling service is seen as self-declaring madness</i> <i>Young people do not seek help due to stereotypes</i> <i>Lack of trust discourages people from seeking help</i> <i>Discomfort prevents young people from seeking help</i>
Young people’s awareness of the difficulties in accessing adequate help	<i>Not much support available for young people with problems</i> <i>Lack of availability and accessibility</i> <i>Services are primarily private, inaccessible, and expensive</i> <i>Official institutions provide superficial assistance and cannot help adequately</i> <i>Crisis changes the availability of assistance</i>

3.3. Characteristics of available forms of assistance and support

The theme concerning the characteristics of available forms of assistance and support during and after crisis events is described through six categories. The first category describes how young people mostly receive help from **individuals within their primary environment**. Codes mention family members (mothers, sisters), partners, and close friends. The respondents acknowledge that such support lacks the qualities of professional help, but they still find it meaningful (*I turn to someone for help, like a friend or someone and then we talk about it, find a solution or something like that. Or just talking helps me express what’s bothering me at that moment*). Interestingly, one young man anticipated that, without such help, in his case, help from friends, he would be in a more difficult life situation.

The next category describes the **perception and/or experience that professionals care when there is a lack of support in the primary en-**

vironment. They turn to teachers, school staff, counselling services, and healthcare providers when support from their primary environment is lacking. Young people also value support from institutions and civil society organisations, which is unsurprising given that the sample was recruited through such groups. It is worth noting that the sample of young people was gathered through civil sector organisations, so it is to be expected that their experiences with these types of organisations are predominantly positive. The participants specifically highlighted teachers and class tutors who they perceived as caring, understanding, helpful, and trustworthy (*I’m in a situation where some teachers care more about me than my parents...*).

Another interesting pattern is the creation of a personal support network through activities such as sports, hobbies, and preparation for college. Young people rarely seek formal help, and when they do, their requests to the providers of professional help include basic characteristics such as

showing compassion, listening, and providing support. The codes make it clear that young people expect family members, relatives, and friends to offer kind words, listen, and be ready to talk. They also want to be sure that someone will be there for them if needed. Two codes describe the need for comfort and a positive outlook and/or perspectives. In addition to this, the next code highlights peace, silence, and solitude as important aspects of help and support.

The code related to support from friends with similar problems indicates the value that young people place on avoiding loneliness and connecting with others facing similar challenges. Other codes emphasise the need to build relationships with professionals before a crisis, thus ensuring trust. Important elements of such assistance include learning, discussing problems, providing a different perspective, and broadening horizons, while also helping young people realise that they are not alone in experiencing such problems (working in a group with others who have similar issues).

The next category discusses **proactivity and independence in problem-solving**. Young people express a strong desire for self-sufficiency and recognise that, regardless of available support, they must resolve problems on their own. The codes that support this idea express the desire for self-sufficiency and an awareness that one must pull oneself out of certain situations (*This is my path, I chose this path. Now I'm here to reap what I have sown for myself and that's it.*), as well as the understanding that such independent problem-solving can lead to happiness and satisfaction. Some emphasise the need for a conscious decision to change, while others describe self-help strategies such as engaging in activities that divert their thoughts (*Positive thoughts, having a hobby or something, being able to disconnect from everything, playing games, exercising, anything that helps you take your mind off it*).

The category of **negative experiences in seeking help** emerged when discussing available support. The social welfare office was perceived not as a source of support, but as a place where young people felt dismissed, blamed, and discriminated

against. One youth, seeking refuge from violence at home, was discouraged by a social worker because safe houses were “for partner violence”. Another code indicates that general practitioners sometimes lack an understanding of mental health issues in times of crises, that they show no empathy, and do not refer young people to specialised professionals. The last code in this category emphasises the necessity of overcoming certain “gatekeepers” to receive adequate help, for example, classroom teachers or parents who must have a positive attitude towards seeking further assistance: this leaves young people feeling dependent on the attitudes and intentions of others.

As far as help in the virtual environment is concerned, young people are aware that the kind of help they will receive is uncertain and therefore, this method of seeking help brings significant risks. In some cases, it can be good and of high quality and contribute to their well-being, but messages from others on the internet can also worsen their condition. Several codes reflect attitudes about help within the family circle. One code reflects a belief that families are indifferent to seeking help, while another shows that families prefer to keep their problems private. These perceptions contribute to the view that help is often inaccessible, inconsistent, and unreliable, thus discouraging young people from reaching out for support.

The last category discusses the young people’s **attitudes regarding the characteristics of available assistance and support**, which, though not always based on personal experience, continue to shape help-seeking behaviour. Professional assistance was seen as less accessible during or after the pandemic, due to institutional closures, long waiting lists, and high costs. The participants also noted that the sources of support were inconsistent and unsystematic. The prevailing belief among young people that professional help is ineffective and will not actually help is indicated in the codes.

Although all participants are part of the support system and they view such organisations as being helpful, they often speak of available assistance in terms of what “others” receive, distancing themselves from the experience of actually seeking or using such support.

Table 3. Codes and categories corresponding to the theme titled characteristics of available forms of assistance and support

Categories	Codes
Individuals within their primary environment	<i>Partners - the greatest support during crises</i> <i>Family members as a source of support</i> <i>Experience of mutual support within the family</i> <i>Friends as source of support - present both before and during the crises</i> <i>Family support is not professional support</i>
Perception and/or experience that professionals care when there is a lack of support in the primary environment	<i>Orientation towards professional help when family support is lacking</i> <i>Helpfulness, support, and trust in teachers when things are not going well</i> <i>Exclusively positive experiences with civil society organisations</i> <i>Assistance from healthcare institutions was present during and after the crises</i> <i>Creating a personal support network through other activities (sports, hobbies, preparation for college)</i>
Useful elements of provided assistance	<i>Expectation of support from family and relatives</i> <i>A shoulder to cry on – comfort</i> <i>Positive talk, positive attitude, positive words, hugs, contact...</i> <i>Along with the support of loved ones, peace and quiet, as well as solitude are necessary</i> <i>Support from friends with similar problems</i> <i>Useful elements of professional help: learning, discussing problems, group work</i> <i>Established relationship before the crisis improves the quality of help during the crisis</i>
Proactivity and independence in problem-solving	<i>Proactivity and independence in problem-solving leads to happiness</i> <i>Activities that divert thoughts</i> <i>Hobbies as a source of personal support</i> <i>A sense of self-sufficiency and self-support</i> <i>One must pull oneself out of an unfavourable situation</i> <i>The individual must decide to change themselves</i>
Negative experiences in help seeking	<i>Negative experience in receiving help from the Centre for Social Welfare</i> <i>Discrimination by social welfare workers in cases of domestic violence</i> <i>Mental health is a taboo topic for general practitioners</i> <i>A series of “gatekeepers” need to be overcome to access professional help</i>
Attitudes towards available assistance	<i>After the pandemic, assistance was unavailable - organisations were closed or inoperative</i> <i>Long waiting lists after the mentioned crises</i> <i>Less support available during and after the pandemic</i> <i>Unsystematic and unreliable sources of support during crises</i> <i>Professional help was available to those who could afford it</i> <i>Assistance of professionals was unsuccessful</i> <i>Uncertainty about online help</i> <i>Family does not care about getting help</i> <i>Family makes sure that the problem stays within the family circle, and not “go outside”</i>

3.4. Recommendations for appropriate assistance for young people from various vulnerable groups

Prior to analysing this theme, it is worth noting that responses without specific suggestions were excluded from coding. Silence or vague references to “professionals” or “experts”, which were addressed in section 3.2., will not be further elaborated here. In summary, young people’s recommendations for appropriate assistance for young vulnerable groups during and after crisis events

include help that is easily accessible, free, simple, professional, and informal.

The first category suggests that assistance for young people should be **easily accessible, readily available, and short-term**. This includes the constant availability of someone for conversation, access to information on the internet, or assistance in a virtual environment. Young people value timely help, even from non-professionals, especially when they feel ready to seek support. They believe that such assistance should primari-

ly be short-term, for example, they mentioned that some young people may only need one conversation with someone who is not from their primary environment. Another important aspect is integrating support within groups they already belong to, making help more natural and less formal, while still providing comfort and relevant information.

The assistance for young people should be **free** or at least more affordable in terms of cost. The following quote illustrates young people's awareness of the need for continuous support, which is often inaccessible due to high cost (*I don't know if I can afford it, I believe that regular sessions with a psychologist would be really helpful because of various situations in life, some of which I sometimes struggle to cope with, but finances don't allow it*).

The next category is called **simple, professional, and informal help** because these three characteristics encompass everything young people say would be appropriate in terms of assistance for them during or after crises. On the one hand, it seems that young people believe that they need quite "ordinary" things. They express a need for compassionate, trained professionals, often in familiar formats such as school workshops. At the same time, they value support from paraprofessionals or volunteers with lived experience. They mention that this assistance should be informal and embedded in youth-focused activities such as study trips, workshops, informal events, gatherings, youth clubs, or sports events. The core characteristic of these codes is new experiences. An indispensable element of these codes is the involvement of other young people.

The next category discusses the **potentials of the education system** to provide information and

guide young people towards systematic forms of support. Many of the young people's responses are related to the accessibility of assistance, which they see as a significant obstacle. Therefore, the following category addresses the potential of the education system to inform young people about support systems and types of assistance, as well as provide screening of young people with specific problems and offer further assistance, which is in turn related to the findings from the previous theme.

Another key recommendation is that support for vulnerable youth during and after crisis should be **based on compassion**. The codes highlight the importance of praise, comfort, understanding and listening, reducing loneliness, and contributing to increased self-confidence. This leads to the conclusion that young people primarily need compassion or an initial understanding of the situations they are in. This view of assistance is to be expected, as the primary need of individuals is to be supported and for professionals to show understanding. Such compassion is a core feature of crisis support, since it allows individuals the time and emotional space to begin addressing their problems with a sense of being understood and supported.

The last category complements the previous one by **focusing on strengthening personal resources for self-care**. Indeed, the assistance provided to young people should encourage personal engagement and prepare them to solve problems independently in the future (*First, you need to take care of yourself. That's number one. If we wait for someone else's help, we're already in trouble. We have to fight for ourselves because if a person doesn't stand up for themselves, they're in trouble.*)

Table 4. Codes and categories corresponding to the theme titled recommendations for appropriate assistance for young people from various vulnerable groups

Categories	Codes
Easily accessible, readily available, and short-term	<i>Easily accessible, online</i> <i>Always having someone available to talk to</i> <i>Free from formality and professionalism</i> <i>One conversation with someone who is neither family nor a friend</i> <i>Support within the groups young people belong to</i>
Free of charge	<i>Young people should not have to pay for services</i> <i>Services should be made more affordable in terms of cost</i>
Simple, professional, and informal help	<i>Service providers should be compassionate and trained</i> <i>School workshops and talks with trained professionals</i> <i>Volunteers who have personal experience with the issues young people face</i> <i>Support based on socialising with other young people</i> <i>Groups that bring young people together</i> <i>New experiences through study trips that involve new people, different cultures</i> <i>Centres where young people can gather</i> <i>Combining sports and talks on how to deal with a crisis</i>
Based on compassion	<i>Boosts self-confidence</i> <i>Praise, comfort</i> <i>Understanding and simply listening to problems</i> <i>Reduces loneliness</i>
Potentials of education system	<i>Information about support systems through the education system</i> <i>Schools should recognise when a child is struggling with a crisis</i> <i>Screening of young people with problems in school</i>
Focused on strengthening personal resources for self-care	<i>Services can be improved, but the decision to change is up to the individual</i> <i>Support that encourages personal engagement</i> <i>Prepare for the future</i>

4. DISCUSSION AND CONCLUSIONS

This study offers valuable insight into how young people from vulnerable groups perceive the availability and effectiveness of psychosocial support during and after crises events, revealing a discrepancy between theoretical models on cumulative vulnerability and the responsiveness of support systems. While previous research has focused on the psychological effects of crises on young people (Kereseteš, 2020; Rezo Bagarić, Sušac, & Rajhvajn Bulat, 2023; Ajduković & Kožljan, 2022; Filipović & Rihtar, 2022; Jokić & Ristić Dedić, 2021; Zovko, Vukelić, & Miočić, 2022), the present study extends the current knowledge on the availability of support in order to confront these risks, highlighting the voices of young people from vulnerable groups. The content of the extracted themes indicates that young people mainly talk about crises that directly affect their daily routine or have an impact on their everyday life.

In response to the research question “*How have young people experienced the crises that have oc-*

curred over the last three years?”, it can be said that young people belonging to vulnerable groups have the impression that the crises of the last three years have not significantly affected them. This impression could be described as the feeling that the crises have passed them by, a feeling of insufficient impact, or a feeling of impact that has gone unnoticed. They also recognise other groups of individuals who have been affected by these crises, but do not see themselves as members of these groups. This is consistent with previous research findings, e.g., Brühlhart et al. (2023) pointed out that the pandemic had a greater impact on adults than on young people, and the results are based on total population indicators, observation of young people’s behaviour, and their help-seeking behaviour during crises. Young people are aware of the events and changes that have occurred, but as a group they feel that other groups were “more affected”, especially the vulnerable and marginalised groups. It should be noted that the inclusion criterion for young people was vulnerability, and the majority were also considered marginal-

ised. Although it was initially assumed that crises such as the COVID-19 pandemic and earthquakes would further exacerbate the position of vulnerable youth, the findings of the present study suggest a more nuanced reality. Contrary to expectations, many participants did not perceive these crises as significantly worsening their situation. This muted perception indicates that, for some, the crises were experienced as distant or having minimal personal impact, suggesting that the recent crises may not have added substantially to the existing burden of adversity. These findings align with the Cumulative Risk Model, which posits that risks accumulate over time and interact in an exponential manner (Lamela & Figueiredo, 2020). However, the model also implies that once a certain threshold is surpassed, additional stressors may have a diminishing visible impact, not because they are less harmful, but because the cumulative burden has already reached a saturation point. Interestingly, the most notable concerns were not tied to the pandemic or the earthquakes specifically, but to broader existential threats such as war, rising prices, and economic instability.

When answering the research question “*What is the young people’s level of knowledge about the available forms of support and assistance?*”, it is important to emphasise that the study participants were young individuals already involved in some form of systematic support and assistance through non-governmental organisations. Summarising all the identified categories, it is clear that young people lack sufficient knowledge about the psychosocial support system, in the sense that they do not have comprehensive information about where and how to seek help. Only a few individuals discuss the process of seeking help and there is a general lack of trust in the support system, as well as certain expectations about who should help and how. It is worth discussing whether this is a mechanism by which these young people have become accustomed to not receiving help when they need it, especially since they belong to vulnerable groups who should receive additional support to overcome the risks associated with their vulnerability. It is extremely important to highlight what was identified in the codes, namely, that the belief

of young people regarding the unavailability of help is associated with two factors - the high cost that they cannot afford and the increased need and demand for help after crisis events from individuals in the general population, resulting in long waiting lists. This confirms the “acute-on-chronic” perspective (Power et al., 2020; Gabrielli & Lund, 2020), in which an acute crisis affecting the entire population intensified the effects of pre-existing chronic crises in the individuals’ lives, introducing sudden stressors to young people who are already vulnerable. Through their narratives, it becomes evident that support was largely inaccessible since the entire system redirected its resources, i.e., although the need for support had increased, its accessibility had reduced.

All identified categories within the theme titled characteristics of available forms of assistance, in response to the question “*How do young people describe the assistance that was available to them during and after the crisis events?*”, suggest that young people primarily turned to individuals in their primary environment for problems during crisis events and only sought formal forms of help when support was lacking in their primary environment. Every young person belonging to at least one vulnerable group could name at least one person who provided them with help and support during recent crises. As a rule, these were people in their primary environment, and when such support was lacking, young people found support in other environments that they belonged to (education, hobbies, counselling and psychotherapy). In addition to receiving support from their families, they emphasised the importance of addressing issues independently, which fosters a sense of self-reliance. As expected, experiences with professional help are diverse - both positive and negative. It was recognised that, on the one hand, there are certain attitudes of young people that do not contribute to self-help and systematic search for support, but, on the other hand, there are certain attitudes of parents that discourage young individuals from seeking help. The stigma about seeking help was recognised, which is reinforced by the belief that there is not enough professional support available and that such sup-

port is expensive, or by stigmatising attitudes of parents that such help is not needed. Furthermore, young people from the Roma national minority may face multiple forms of discrimination. They encounter rejection as a minority group when they seek assistance from the majority population and they may also experience discrimination from their own minority population when they seek help from the majority population.

There is also a fear among young people that they will not be understood by professional help and will not receive the support they need. Sometimes “searching” for adequate help through the system ended up being an unpleasant and negative experience. The general conclusion is that young people who are vulnerable for multiple reasons have more difficulties finding help and support services, especially during periods of acute and stressful crisis events, when there is an increased demand on support systems from the entire population.

Summarising the codes from the category of support elements, it becomes clear that young people seek minimal, basic, short-term, and ubiquitous support. This raises the concern that basic support for young people is often unavailable and, as a result, they do not expect it to be available.

If we summarise the categories that answer the question “*What kind of assistance did they require?*”, it is evident that such assistance should be free of charge, easily accessible, readily available, short-term, simple, professional, informal, and based on compassion. It can be said that young people need psychosocial support, since the elements they have described are characteristics of psychosocial assistance. Such responses also highlight what young people value and what should be essential. What is worrying, and remains a question that future research will need to examine, is the impression that young people did not receive this kind of help after the crises. There is no need to emphasise the necessity for free assistance, since many young vulnerable individuals have insufficient financial resources.

As for the final conclusions and recommendations, it is important to emphasise that the young

people involved in this study perceive themselves as tough and resilient. Consistent with previous studies (Borić & Mataga Tintor, 2022), the research participants did not see themselves as vulnerable, deprived, or excluded, even though they talked about feeling discriminated against, especially if they were victims of violence and unequal treatment.

A particularly worrying finding is their limited knowledge about where and how to seek professional assistance that could contribute to their mental well-being in general, especially in times of crisis. Although the results might suggest that such assistance is not needed - because they do not seek it, or that they are not informed and consequently do not know how to seek help - it is important to keep in mind that, in adolescence, there is a pronounced need for autonomy and self-sufficiency (National Academies of Sciences, Engineering and Medicine, 2019), which can result in such an attitude. The developmental timing of mental disorders and the unique social-cultural context that today’s youth find themselves in highlights the need for innovative service models that address the fact that young people have the most limited access to mental health services compared to individuals in other age groups (Radez et al., 2021).

Consistent with recent research on vulnerable youth (OECD, 2021; Magson et al., 2021), the present study confirms the presence of psychological symptoms such as anxiety, depression, and post-traumatic stress, while also highlighting additional emotions such as fear, worry, panic, and a sense of constant pressure. Financial instability and family conflict were frequently mentioned, but some participants also described coping strategies and a positive outlook. However, despite such challenges, some participants also demonstrated resilience, reporting an ability to cope with stressors and maintain a positive perspective on crisis events. The findings align with international studies on NEET youth and those in high-conflict households, who tend to report the most negative experiences due to limited access to support. While schools were the main channels of assistance, they were inaccessible to those outside the education

system, and formal support for youth without family safety nets was often absent. This raises an important question for future research: did these crises affect all vulnerable subgroups equally, or were certain groups disproportionately impacted? The present findings suggest that youth in NEET status, those from ethnic minorities, and survivors of domestic violence were more likely to report direct and distressing experiences, highlighting the need for a more disaggregated and intersectional analysis of vulnerability in future studies.

Based on these findings, it is possible to make the following recommendations for the development of intervention programmes:

1. Ensure that spaces and activities are available for young people in local communities. These activities should include information services, psychosocial counselling, and support services that are youth-friendly, informal, and easily accessible.
2. Promote activities that enhance the mental health of young people. These activities should be easily accessible, free of charge, integrated into the school system, specifically targeted at young people, and, whenever possible, involve other young people to demonstrate that their struggles are shared by others in similar situations.
3. Adapt services to the needs of different groups of young people, such as safeguarding the identity of victims of violence, young LGBTIQ individuals, or other minorities who have experienced unequal treatment.
4. Ensure that services are free of charge, tailored specifically for young people, easily available, and readily accessible.
5. Develop interventions that are non-stigmatising, considering that young people often depend on adults to access support systems.
6. Create interventions that promote autonomy and self-confidence in young people, building on their personal resources for self-care, support, and assistance.

In conclusion, these results prompt us to consider access to social support as a strategy for coping with situational stress. We can use the metaphor outlined by Uhlhaas et al. (2023) for times of crisis: “we are all on the same sea”, but it is equally important to keep in mind that “everyone has a different boat”. The results from the present study support this metaphor, as they indicate that crises have affected, shaken, or touched everyone to some extent. However, they also show that young people who have positive and satisfying familial and non-familial relationships have resources that can potentially protect them from stress. On the other hand, those who have experienced marginalisation, dysfunctional family relationships, or vulnerability before the onset of the COVID-19 pandemic may find it more challenging to access and utilise social protective resources because they are either lacking or not as effective.

Finally, it is important to highlight the limitations of this study. Firstly, a methodological limitation of this study relates to the way in which participants were recruited. The findings obtained in this study are specific to a very particular group of young individuals who were involved in the SPONA project and were actively using various psychosocial services within the civil sector. This convenience sample limits the possibility of generalising research findings to a broader population of vulnerable young people. Although generalisability is not the primary aim of qualitative methodology, it does not capture the experiences of vulnerable youth in general. Therefore, to get a broader perspective and diverse experiences, it would be essential to include young people who receive assistance from different systems, not only from the non-governmental sector, as well as those who are not connected to any support system. Another methodological limitation is the wide age range of the study participants - 16 to 30 years. Some needs discussed by certain groups of young people relate to their specific age (e.g., young individuals finishing their regular schooling). In order to gain a clearer understanding of the needs of specific age groups, it would be advisable to narrow down the sample or focus the research on specific groups of young people.

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