

# The Impact of Armed Conflict on the Psychological and Developmental Well-Being of Adolescents: Comparing Ukrainian and Syrian Adolescents' Psychological Welfare

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## ABSTRACT

One widely popular topic of research for many adolescent psychologists is examining the field of war trauma in adolescents in nations in active conflict, and the effects of war on the psychological and developmental welfare of adolescents in different contexts. The aim of this synthesized, narrative review is to analyze studies of war-related stressors on adolescents' psychological health in the Ukrainian and Syrian contexts to map the pathways from how structural collapse, environmental trauma, and social stressors contribute to certain mental health outcomes. In this sense, the paper aims to make a further contribution to the array of studies comparing the adolescents' welfare from different psychological factors, while also addressing an underexplored intersection by maintaining an exclusive focus on comparing the mental welfare of adolescents in the Ukrainian and Syrian contexts. I conclude that war profoundly disrupts adolescence for Ukrainian and Syrian youth by dismantling essential developmental and social support structures; however, addressing trauma requires more than clinical treatment alone. Therefore, comprehensive interventions that rebuild educational, social, and psychological structures are crucial to fostering resilience and supporting healthy transitions to adulthood.

**Keywords:** Psychological Trauma; Developmental Well-being; Education Disruption; Digital Trauma, Psychosocial Stressors; Gender Norms; Post-Traumatic Stress Disorder

## INTRODUCTION

Some of the most lasting, severe trauma a human can experience involves witnessing violence, particularly during childhood (1, 2). In recent years, the escalation of the Russo-Ukrainian conflict into a full-scale invasion by Russia has catalyzed a wave of research

efforts focused on the mental health outcomes of youth exposed to warfare. Similarly, earlier studies conducted in Syria, within the context of the decade-long Syrian civil war, also examined this topic. While much of the existing research has explored the prevalence of post-traumatic stress disorder (PTSD), depression, and anxiety among child survivors, recent evidence has emerged suggesting that these clinical factors are shaped by exposure to conflict; however, outcomes depend on a unique combination of psychosocial, structural, and environmental factors.

This narrative review systematically evaluates and compares psychological war-related trauma in Ukrainian

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and Syrian children and adolescents, individuals ranging in age from 10 to 19 years old. In doing so, it examines peer-reviewed studies, meta-analyses, field reports, and news articles to highlight how intersecting stressors contribute to the clinical profiles that have been observed in war-affected youth. The review ultimately seeks to move beyond generalized models of trauma to identify a commonly understudied pattern: that war-affected children experience a psychological trajectory shaped by modern, technologically mediated, and structurally unique conditions, beyond merely war exposure.

By identifying the significant ways in which trauma responses are shaped by regional, temporal, and socio-cultural factors, this review seeks a recalibrated framework for interpreting war-related psychological outcomes in children. Such a framework can enhance clinical assessment and policy development and also facilitate the design of targeted interventions aligned with the specific lived experiences of Ukrainian and Syrian youth.

## **STRUCTURAL DISRUPTIONS TO ADOLESCENT DEVELOPMENT**

War-affected adolescents in both Ukraine and Syria face profound structural disruptions that negatively impact their psychological well-being. Displacement, disrupted education, and the collapse of healthcare and community infrastructure strip these youths of essential supports, creating vulnerabilities to trauma symptoms, anxiety, and depression. For instance, both Ukrainian and Syrian adolescents experience disrupted schooling, which research links to diminished emotional regulation, developmental derailment, and loss of future orientation (3, 4). Additionally, the loss of stable family attachment figures exacerbates risks for depression and post-traumatic stress disorder (5, 6). Both populations have been shown to suffer from elevated PTSD prevalence, anxiety, and learned helplessness as a consequence of prolonged exposure to traumatic stressors and deprivation (5).

The destruction of safe communal environments further unites the experiences of these adolescents. Children in war zones, whether in Ukrainian cities or Syrian towns like Aleppo and Homs, report intrusive memories and dreams involving destroyed homes, schools, and familiar neighborhoods, underscoring how the loss of place destabilizes identity (7, 8). The absence of community resources such as parks, cultural

centers, and sports facilities erodes collective coping mechanisms critical for resilience and social integration in adolescence (9, 10). Together, these forces deprive war-affected youth of the normal social roles and developmental platforms necessary for healthy growth, fueling cycles of psychological instability and risk of chronic mental health disorders (13, 6).

While Ukrainian and Syrian adolescents share many psychological stressors related to war, their experiences diverge notably due to differences in displacement patterns and cultural contexts. Ukrainian youth often face acute, rapid displacement, frequently crossing international borders into European countries, where they confront language barriers, xenophobia, and fears of deportation (12). In contrast, Syrian adolescents endure prolonged and repetitive displacement primarily within and nearby their country, often residing in protracted refugee camps or urban host communities, leading to extended exposure to deprivation and social uncertainty (5). This chronic displacement in Syria is further complicated by cultural coping mechanisms such as child marriage, which is much less prevalent in Ukraine, and can compound long-term psychosocial harm, especially among adolescent girls (13).

Another key difference lies in exposure to digital trauma. Ukrainian adolescents experience war not only through direct physical threats but also via constant access to social media, livestreaming, and algorithmically amplified violent content, which intensifies vicarious traumatization and emotional dysregulation (7). In contrast, Syrian adolescents, especially in earlier years of conflict, have had limited digital access, with war-related information harder to access in real-time and often mediated through delayed or controlled narratives (14). This divergence means Ukrainian adolescents may face amplified chronic stress and hypervigilance linked to persistent digital exposure, while Syrian youth's trauma is shaped more by direct violence and longstanding insecurity (15, 16) (Table 1).

## **ENVIRONMENTAL & EXPERIENTIAL STRESSORS**

In addition to the destruction of structural factors that promote well-being, the experiential harms of warfare exert a substantial toll on adolescents in both Ukraine and Syria. Environmental factors, including exposure to missile attacks, drone attacks, and sirens, directly affect the safety and mental health of young people, disrupting cognition and emotional regulation. This

**Table 1.** Conflict-Induced Disruptions and Mental Health Outcomes Among Adolescents

Disruption Domain	Disruption Scenarios	Adolescents in Ukraine	Adolescents in Syria
Structural Disruptions	Mass Displacement	1.7-2 Million	7.2-7.5 Million
	Educational Disruption	4.6-5 Million	2-2.4 Million
	Loss of Family & Community	7± Million	6-8 Million
Environmental Induced Experiential Disruptions	Exposure to Conflict	2.2± Million	6.75± Million
	Digital Trauma	6-7+ Million	4-5 Million
	Loss of Familial Figures	1.5± Million	1± Million
Psychosocial Disruptions	Fractured Family Structures	2-3 Million	5.3± Million
	Absence of Caregivers	17-20 K	>6 Million
	Cultural/Masculinity Norms	3.5-3.9 Million	2-3 Million
Clinical Disruptions	PTSD Prevalence	2.1± Million	1.8± Million
	Sexual/Gender Based Violence	20± K	200-500 K
	Disrupted Sleep/Hypervigilance	600 K	2.3-5 Million

The table summarizes the estimated numbers of Ukrainian and Syrian adolescents affected by conflict disruptions across key domains. Values are approximate; M = million, K = thousand, ± = estimated.

shared exposure elevates stress responses and mental health challenges such as hypervigilance and anxiety (5). Across both conflicts, adolescents live under persistent threat, which contributes to challenges like difficulties in sleep, attention, and social functioning (6). These experiential stressors compound the structural adversities, amplifying trauma symptoms beyond physical danger alone.

Furthermore, the damage to safe communal environments undermines important social and cultural coping mechanisms. In both Ukrainian and Syrian settings, the loss of familiar spaces such as homes, parks, and schools, and the fracturing of peer networks, exacerbates isolation and post-traumatic stress (7, 8). Adolescents in both wars face a profound sense of disrupted identity and diminished resilience as their connection to community and normal life routines deteriorate, a phenomenon consistently linked to higher rates of depression, anxiety, and trauma-related disorders (9, 10).

A key experiential difference lies in the digital dimension of war trauma, which distinctly affects Ukrainian adolescents to a greater extent than Syrian youth. Ukrainian adolescents have been exposed to war both directly and virtually through pervasive access to social media platforms, messaging apps, and

livestreamed news broadcasts. This constant digital consumption of violent content, measured through instruments like the CRIES-13, correlates with trauma levels comparable to those with direct physical exposure to violence (17, 7). The personalized and algorithmically amplified nature of digital content creates feedback loops of fear and graphic imagery, complicating recovery and increasing anxiety and dissociation (15, 16).

Conversely, Syrian adolescents, particularly during the earlier phases of their conflict, had limited digital connectivity and were more likely to receive news through delayed family reports or controlled media, reducing exposure to real-time digital trauma (14). This digital divide means Syrian youth experience trauma more heavily through direct violence, chronic insecurity, and long-term displacement rather than virtual re-traumatization. Additionally, digital social media’s role in Ukrainian adolescents’ identity formation may compound depressive symptoms via upward social comparisons during crises, a mechanism less documented among Syrian war-affected youth (18). Accordingly, digital penetration emerges as an environmental determinant that qualitatively distinguishes the psychological trajectories between these two adolescent populations (19).

## **PSYCHOSOCIAL AND SOCIAL CONSEQUENCES**

Psychosocial factors such as family dynamics, peer relationships, cultural expectations, and access to support networks significantly influence the mental health outcomes of adolescents affected by conflict in both Ukraine and Syria. In both contexts, the disruption of family structures has been a major cause of trauma. Many adolescents face caregiver loss, whether through conscription, evacuation, or death, producing attachment insecurity and ambiguous loss, where children struggle with the uncertainty about the fate of loved ones (20, 21, 22). Such disruptions often force adolescents into premature protective or caregiving roles, increasing their stress and emotional burden (23, 25). These psychosocial strains create recurring cycles of hope and grief that negatively impact emotional stability and heighten vulnerability to internalizing and externalizing psychopathology (24).

Moreover, both populations display elevated rates of depression, anxiety, and PTSD linked to traumatic war exposure, family fragmentation, and social isolation (5, 6). The breakdown of peer and community networks further exacerbates these mental health challenges, creating environments where adolescents lack adequate psychosocial support and coping mechanisms. Cultural frameworks around family stability and gender roles significantly shape how adolescents interpret trauma and whether they seek psychological assistance, but in both Syria and Ukraine, fractured family systems remain decisive determinants of trauma trajectories.

Despite these parallels, important differences in psychosocial experiences emerge between Ukrainian and Syrian adolescents. For instance, Ukrainian youth have faced relatively abrupt and large-scale family disruptions due to the full-scale invasion, leading to rapid changes in caregiving roles especially among boys, who experience amplified stress under dominant masculine norms that discourage emotional expression (23, 24). In contrast, Syrian adolescents often endure chronic displacement, with family separation extending over longer periods and resulting in destabilizing cultural and economic impacts such as the rise of child marriage as a coping strategy among displaced families (13). This practice, more prevalent in Syria, correlates with higher rates of depression, social withdrawal, and identity disruption among adolescent girls (5).

Additionally, boys and girls in Syrian settings

frequently navigate severe psychosocial stress stemming from prolonged violence and lack of stable parental figures, manifesting in feelings of guilt, neglect, and loneliness (25). The chronic nature of these stressors contrasts with the relatively more immediate but intense psychosocial shocks faced by many Ukrainian adolescents. These differences necessitate culturally responsive interventions that account for the differing temporal and contextual psychosocial realities of adolescents affected by these distinct wars.

## **MECHANISMS MEDIATING THE IMPACT OF CONFLICT ON ADOLESCENT MENTAL HEALTH**

Mediating variables clarify the processes through which structural, environmental, and social disruptions might affect children's psychological health. They often serve as potential pathways by which conflict experiences are translated into mental health outcomes.

### **Sexual and Gender-Based Violence**

Sexual and gender-based violence (SGBV) is one such pathway. It is an often underreported but profound variable found in many studies. Survivors, particularly adolescent girls, frequently experience complex PTSD, dissociation, and chronic shame (26). Cultural frameworks that link sexual purity to family honor exacerbate these effects, leading survivors to internalize blame or remain silent (27). Even indirect exposure, such as hearing of peers' or relatives' victimization, has been shown to produce secondary trauma, reinforcing community-wide distress (11, 28). Male survivors face an additional layer of pressure, as taboos surrounding masculinity discourage disclosure and help-seeking (29). In these ways, sexual and gender based violence mediates trauma by disrupting bodily autonomy, trust in others, and cultural belonging.

### **Disrupted Sleep and Nighttime Hypervigilance**

Disrupted sleep and nighttime hypervigilance provide another mediating mechanism. Conflict zones in both Ukraine and Syria are marked by nighttime shelling, blackouts, and sirens, repeatedly activating children's amygdalae (the brain's well-established threat center) and preventing restorative rapid eye movement (REM) sleep (30). Syrian refugee studies confirm that sleep disturbance is among the strongest predictors of PTSD symptoms (31). Because REM sleep is central to memory consolidation and emotional regulation,

its disruption creates a vicious cycle: trauma impairs sleep, and poor sleep intensifies trauma. Over time, this mechanism impairs concentration, heightens anxiety, and fuels aggression, ensuring that even when external violence subsides, children's nervous systems remain locked in states of vigilance and nervousness.

### **Premature Role Assumption and Forced Child Labor**

A third pathway is forced child labor and premature role assumption. Displacement and economic collapse drive families to push children into informal labor markets, stripping them of school, play, and identity development (32). Children internalize survival roles at the expense of normal emotional growth, leading to stress, performance anxiety, and diminished self-worth (6). This labor dynamic restructures family relationships, as parents may become overly dependent on their children, reinforcing the suppression of emotional needs. The outcome is a deep-rooted psychological burden carried forward into adulthood observed in both the Russo-Ukrainian War and the Syrian Civil War.

### **Erosion of Aspirational Identity and Future Orientation**

Finally, the erosion of aspirational identity and future orientation could operate as a mediating cognitive mechanism linking war to reduced mental health. Research demonstrates that diminished perceived control over the future magnifies the psychological toll of stress. Both Ukrainian and Syrian adolescents repeatedly express hopelessness and futility about their futures. In an interview of adolescent teens from both Ukrainian and Syrian contexts, Ukrainian teenager Polina describes of adult life as "terrifying" as she lives under fear in a war torn nation, while Syrian adolescent Nada says that "our future became all about war" while being a refugee in another country, exemplifying how conflict strips adolescents of agency, identity, and hope (33, 13). In turn, this hopelessness reduces resilience and accelerates cognitive decline, intensifying conflict-related trauma beyond immediate circumstances.

## **MODERATING INFLUENCES ON TRAUMA OUTCOMES**

In contrast to mediating mechanisms, moderating mechanisms determine *when* and *for whom* war's psychological impacts manifest most severely. These include gender norms, cultural expectations, and the structural contexts of displacement.

### **Gender Norms and Cultural Scripts**

Gender norms and cultural scripts significantly moderate outcomes. In Ukraine, boys tend to embody fortitude and self-reliance, traits that inhibit help-seeking, while girls are comparatively more open to mental health support (33). This divergence leads to under-addressed trauma in boys, masked by outward restraint. In Syria, gendered cultural expectations create different risks: families may resort to early marriage for girls, exposing them to gender-based violence and long-term psychological distress, while boys endure normalized violence and forced separations from fathers (29). The result is distinct psychological trajectories, suppressed grief in boys, depression, and isolation in girls, which are both similarly damaging but contextually different.

### **Cultural Frameworks of Honor and Shame**

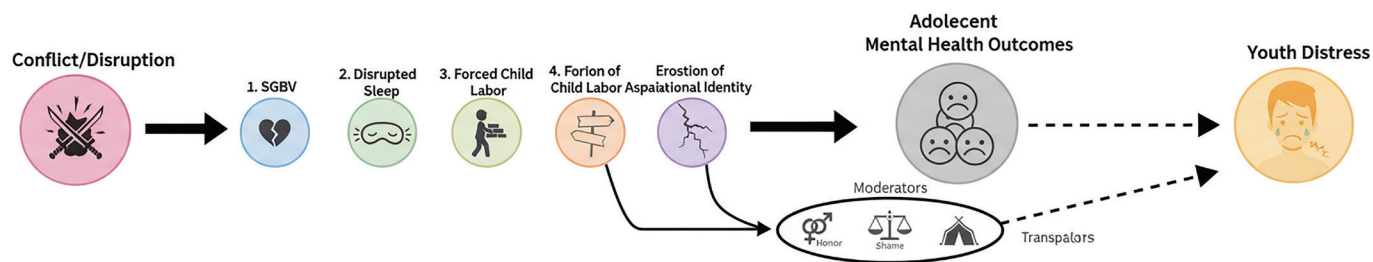
Cultural frameworks of honor and shame further moderate trauma outcomes, as previously mentioned, especially in cases of sexual, gender based violence. In collectivist societies like both Ukraine and Syria, victims may be silenced by fear of dishonor, while boys' suffering is erased by expectations of toughness (29). This cultural overlay does not change the existence of trauma but amplifies its severity, ensuring that stigma compounds suffering.

### **Displacement Context**

Finally, displacement context acts as a moderator. Internally displaced Ukrainian children often struggle with overcrowded, insecure shelters and disrupted schooling, while Syrian children in host countries may face xenophobia or cultural alienation (11, 34). These contextual differences shape whether trauma manifests primarily as hypervigilance and insecurity in temporary camps or as loneliness and identity conflict in diaspora settings (Figure 1).

## **CONCLUSION**

The analysis of Ukrainian and Syrian adolescents reveals a shared and underexplored dynamic: war disrupts isolated traumatic events while also systematically eroding adolescence as a unique developmental stage. Conflict transforms what should be a period of growth, exploration, and identity formation into one marked by premature responsibilities and survival. Structural deprivation, including food insecurity, disrupted schooling, and collapsed community infrastructure,



**Figure 1. Sequential Pathways and Moderating Influences Linking Conflict to Adolescent Mental Health Outcomes.** Conflict drives adolescent mental health outcomes through mediators such as sexual and gender-based violence, sleep disruption, early role assumption, and reduced future orientation, with gender, culture, and displacement context moderating these effects.

strips away supports essential for normal development. Environmental exposures and psychosocial pressures further compound this disruption, reinforcing forced adult roles in the absence of adequate coping systems. This pattern suggests that the core psychological damage extends beyond typical diagnoses like PTSD or depression to include the profound loss of adolescence as a protected transition phase, accelerating cognitive and emotional challenges.

Building on this, my suggestion would be for researchers to recognize that practical interventions must move beyond symptom treatment to reconstruct developmental frameworks, including education restoration, family stability, and peer support mechanisms. Additionally, policymakers should prioritize addressing both direct and digital trauma, which differently shape psychological outcomes in these contexts. Future research is recommended to explore the long-term effects of digital trauma exposure, gendered experiences of conflict, and longitudinal developmental trajectories to inform cultural and age-appropriate interventions. Theoretically, this review contributes to an expanded understanding of how war reshapes developmental timing itself, underscoring adolescence as a critical and vulnerable window that requires dedicated scholarly and practical attention.

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## CONFLICT OF INTERESTS

The author declares that there are no conflicts of interest related to this work.

## REFERENCES

1. Kessler RC, Sonnega A, Bromet E, Hughes M & Nelson CB. Posttraumatic stress disorder in the National Comorbidity Survey. *Archives of General Psychiatry*. 1995; 52 (12): 1048–1060. <https://doi.org/10.1001/archpsyc.1995.03950240066012>
2. Kilpatrick DG, Resnick HS, Milanak ME, Miller MW, et al. National estimates of exposure to traumatic events and PTSD prevalence using DSM-IV and DSM-5 criteria. *Journal of Traumatic Stress*. 2013; 26 (5): 537–547. <https://doi.org/10.1002/jts.21848>
3. United Nations Educational, Scientific, and Cultural Organization (UNESCO), Education in emergencies: Ukraine. UNESCO, 2023. Available from: <https://www.unesco.org/en/ukraine-war/education> (accessed on 2025-03-15)
4. Dryden-Peterson S. The educational experiences of refugee children in countries of first asylum. Migration Policy Institute, 2015. Available from: <https://www.migrationpolicy.org/research/educational-experiences-refugee-children-countries-first-asylum> (accessed on 2025-05-18)
5. Elnakib S, Abou Hussein S, Hafez S, Elsallab M, et al. Drivers and consequences of child marriage in a context of protracted displacement: A qualitative study among Syrian refugees in Egypt. *BMC Public Health*. 2021; 21: 674. <https://doi.org/10.1186/s12889-021-10718-8>
6. Betancourt TS, Meyers-Ohki SE, Charrow A & Tol WA. Psychosocial adjustment and mental health of children affected by armed conflict: A systematic review of research findings. *Journal of Child Psychology and Psychiatry*. 2015; 56 (5): 576–592. <https://doi.org/10.1111/jcpp.12381>
7. Save the Children, Ukraine: Mental health toll of war leaves children speech defects, twitching, and sleep disorders. Save the Children, 2024. Available from: <https://www.savethechildren.net/news/ukraine-mental->

- health-toll-war-leaves-children-speech-defects-twitching-and-sleep-disorders (accessed on 2025-07-01)
8. Hassan G, Ventevogel P, Jefee-Bahloul H, Barkil-Oteo A & Kirmayer LJ. Mental health and psychosocial well-being of Syrians affected by armed conflict. *Epidemiology and Psychiatric Sciences*. 2016; 25 (2): 129–141. <https://doi.org/10.1017/S2045796016000044>
  9. Papadopoulos RK. Refugees, trauma and adversity-activated development. *European Journal of Psychotherapy and Counselling*. 2007; 9 (3): 301–312. <https://doi.org/10.1080/13642530701496930>
  10. Almoshmosh N. The role of war trauma survivors in managing their own mental conditions, Syria civil war as an example. *Avicenna Journal of Medicine*. 2016; 6 (2): 54–59. <https://doi.org/10.4103/2231-0770.179554>
  11. United Nations High Commissioner for Refugees (UNHCR), Ukraine refugee situation. UNHCR, 2023. Available from: <https://data.unhcr.org/en/situations/ukraine> (accessed on 2025-03-22)
  12. CARE International, et al. Out of School: Assessment on barriers to school enrolment for Ukrainian refugee adolescents in Poland. CARE International, 2024. Available from: [https://www.care.org/wp-content/uploads/2024/02/Out-of-School-Report\\_en.pdf](https://www.care.org/wp-content/uploads/2024/02/Out-of-School-Report_en.pdf) (accessed on 2025-04-02)
  13. Mourtada R, Schlecht J & DeJong J. A qualitative study exploring child marriage practices among Syrian refugee girls in Lebanon. *Conflict and Health*. 2017; 11 (Suppl 1): 27. <https://doi.org/10.1186/s13031-017-0131-z>
  14. Qouta S, Palosaari E, Diab M & Punamäki RL. Mental health status and intervention: Community perspectives from war-affected women in Syria. *Journal of Loss and Trauma*. 2014; 19 (6): 536–550. <https://psycnet.apa.org/record/2014-32640-001>
  15. Cavallini MC, Tirelli V & Derba F. Virtual exposure to war in Ukraine: Thoughts and emotions of Italian adolescents with emotional difficulties. *Journal of Clinical and Developmental Psychology*. 2023; 5 (1-3): 40–52. <https://doi.org/10.13129/2612-4033/0110-3776>
  16. PEN Ukraine, Viktor Petrov “The Stork”: A flight cut short. PEN Ukraine, 2024. Available from: <https://pen.org.ua/en/viktor-petrov-leleka-obirvanyj-polit> (accessed on 2025-02-27)
  17. Verlinden E, van Meijel EP, Opmeer BC, Beer R, et al. Characteristics of the Children’s Revised Impact of Event Scale in a clinically referred Dutch sample. *Journal of Traumatic Stress*. 2014; 27 (3): 338–344. <https://doi.org/10.1002/jts.21910>
  18. Tandon P, Rosenthal AS & Mishra A. Problematic social media use in adolescents and young adults: A systematic review and meta-analysis. *JMIR Mental Health*. 2022; 9 (4): e33450. <https://doi.org/10.2196/33450>
  19. Northwestern University, Helping the children of Ukraine cope with war’s mental toll. Northwestern University News, 2024. Available from: <https://news.northwestern.edu/stories/2024/10/a-pediatric-psychologist-goes-to-war-torn-ukraine/> (accessed on 2025-05-09)
  20. Boss P. *Loss, Trauma, and Resilience: Therapeutic Work With Ambiguous Loss*. New York: W.W. Norton & Company, 2006. ISBN-13: 978-0393704495. Available from: [https://www.researchgate.net/publication/247715824\\_Loss\\_Trauma\\_and\\_Resilience\\_Therapeutic\\_Work\\_With\\_Ambiguous\\_Loss](https://www.researchgate.net/publication/247715824_Loss_Trauma_and_Resilience_Therapeutic_Work_With_Ambiguous_Loss)
  21. Lieberman AF & Van Horn P. *Psychotherapy with Infants and Young Children: Repairing the Effects of Stress and Trauma on Early Attachment*. New York: Guilford Press, 2008. ISBN-13: 978-1593856755. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2765392/>
  22. McLaughlin KA, Zeanah CH & Fox NA. From the cradle to the grave: The effect of adverse caregiving environments. *Current Opinion in Psychology*. 2017; 15: 33–39. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5600283/>
  23. Plan International, Invisible wounds: Navigating mental health challenges and support for Ukrainian adolescent boys and young men. Plan International, 2025. Available from: <https://plan-international.org/ukraine/publications/invisible-wounds/> (accessed on 2025-07-09)
  24. Gasviani G. Militarized masculinities in the making of the Russian–Ukrainian War. *Global Studies*. 2024. Available from: <https://www.globalstudies.uci.edu/files/docs/2024-2025/Peer-Reviewed%20-%20Gvantsa%20Gasviani.pdf> (accessed on 2025-05-30)
  25. Lindley L & Ohlsen T. The emotional well-being of displaced Syrian girls and boys in Lebanon: A SenseMaker® study. *Conflict and Health*. 2020; 14 (1): 22. <https://pmc.ncbi.nlm.nih.gov/articles/PMC7345669/>
  26. Human Rights Watch, Syria: Country chapter. In *World report 2016*. Human Rights Watch, 2016. Available from: <https://www.hrw.org/world-report/2016/country-chapters/syria> (accessed on 2025-01-21), <https://doi.org/10.46692/9781447325512>
  27. Uskul AK, Cross SE, Günsoy C & Gul P. Cultures of honor. In S. Kitayama & D. Cohen (Eds.), *Handbook of Cultural Psychology* (2nd ed.), pp. 793–803. New York: Guilford Press, 2019. ISBN-13: 978-1462536238. Available from: <https://social.psych.ias.tate.edu/wp-content/uploads/sites/521/2024/11/Uskul->

- Cross-Gunsoy-Gul-Chap30HndbkCultPsych2E.pdf
28. United Nations High Commissioner for Refugees (UNHCR), Sexual and Gender-Based Violence Prevention and Response. UNHCR, 2023. Available from: <https://www.unhcr.org/sexual-and-gender-based-violence.html> (accessed on 2025-06-14)
  29. United Nations Population Fund, Let's end child marriage: Results from the UNFPA-UNICEF Global Programme to End Child Marriage. UNFPA, 2019. Available from: <https://www.unfpa.org/resources/lets-end-child-marriage> (accessed on 2025-06-02)
  30. Office of the United Nations High Commissioner for Human Rights (OHCHR), Conflict and occupation on children's rights in Ukraine, 24 February 2022 – 31 December 2024. OHCHR, 2025. Available from: <https://www.un.org/sexualviolenceinconflict/wp-content/uploads/2025/03/report/auto-draft/2025-03-21-ohchr-report-children-s-rights-in-ukraine.pdf> (accessed on 2025-07-11)
  31. Sirin SR & Rogers-Sirin L. The educational and mental health needs of Syrian refugee children. American Institutes for Research, 2015. Available from: <https://www.migrationpolicy.org/research/educational-and-mental-health-needs-syrian-refugee-children> (accessed on 2025-05-26)
  32. Weitzman A & Huss K. International displacement and family stress: Understanding parent-child dynamics among displaced migrant and refugee families in Costa Rica. *Journal of Family Issues*. 2024. <https://doi.org/10.1177/0192513X231151291>
  33. Plan International, Adolescent girls in crisis: Voices from Ukraine, Poland and Romania. Plan International, 2024. Available from: [https://plan-international.org/uploads/2024/05/AGiC-Ukraine\\_Executive-Summary-English-FINAL-DigitalVersion.pdf](https://plan-international.org/uploads/2024/05/AGiC-Ukraine_Executive-Summary-English-FINAL-DigitalVersion.pdf) (accessed on 2025-05-17)
  34. Berry JW. Acculturation: Living successfully in two cultures. *International Journal of Intercultural Relations*. 2005; 29 (6): 697–712. <https://doi.org/10.1016/j.ijintrel.2005.07.013>