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Promotion and protection of all human rights, civil, political, economic, social and cultural rights, including the right to development

Written statement* submitted by Maryam Ghasemi Educational Charity Institute, a non-governmental organization in special consultative status

The Secretary-General has received the following written statement which is circulated in accordance with Economic and Social Council resolution 1996/31.

[2 February 2025]

* Issued as received, in the language of submission only.

The Impact of War on Children's Mental Health and the Detrimental Effects on Their Ability to Learn and Thrive

Introduction

Maryam Ghasemi Educational Charity Institute would like to draw the attention of the Human Rights Council to an urgent human rights crisis: the impact of war on children's mental health and the detrimental effects on their ability to learn and thrive. Children are among the most vulnerable victims of conflict, often caught in situations of violence, displacement, and uncertainty. The consequences of these experiences are devastating and long-lasting, requiring immediate and concerted action from the international community.

The Psychological Toll of War

The infliction of war and military aggression upon children must be considered a violation of their basic human rights and can have a persistent impact on their physical and mental health and well-being, with long-term consequences for their development. The impact of war on children is tremendous and pervasive, with multiple implications, including immediate stress-responses, increased risk for specific mental disorders, distress from forced separation from parents, and fear for personal and family's safety. Thus, the experiences that children have to endure during and as consequence of war are in harsh contrast to their developmental needs and their right to grow up in a physically and emotionally safe and predictable environment. Mental health and psychosocial interventions for war-affected children should be multileveled, specifically targeted towards the child's needs, trauma-informed, and strength- and resilience-oriented. Immediate supportive interventions should focus on providing basic physical and emotional resources and care to children to help them regain both external safety and inner security. Screening and assessment of the child's mental health burden and resources are indicated to inform targeted interventions.

Exposure to war, living in conflict zones, flight, and forced migration may create or increase the risk for broad sequalae of direct and indirect risks for physical and mental health, more so for children and their caregivers, and deprives children from developmental opportunities and basic resources. Effects on children's health result from actual violence against themselves and their families and from inadequate health care, malnutrition, infectious diseases, and distress caused to their families. The global burden of mental health consequences of war and migration are enormous with high prevalence rates of depression and post-traumatic stress disorder (PTSD) in war affected countries. Next to the consequences for physical and mental health, armed conflicts inflict high broad costs as basic social services deteriorate, existing communal divisions enlarge, local economies collapse, and schooling is disrupted, and educational opportunities decrease.

War inflicts profound psychological trauma on children, interrupting their development and exacerbating mental health issues. Various studies demonstrate that exposure to armed conflict significantly correlates with the rise of mental health disorders among children, including post-traumatic stress disorder (PTSD), anxiety, and depression. According to the World Health Organization (WHO), children living in conflict zones are three times more likely to experience mental health problems than their peers in peaceful environments (WHO, 2019).

The fear of violence, loss of loved ones, and lack of safety contribute to chronic stress, which affects children's brain development and emotional regulation. Children who experience the horrors of war often carry this burden into adulthood, hindering their ability to form healthy relationships and engage effectively in society. Additionally, the stigma surrounding mental health issues in many cultures prevents children from seeking help, compounding their suffering and isolation.

Disruption of Education and Learning

The impact of war extends beyond mental health—it severely disrupts education, which is critical for children's development, socialization, and future opportunities. Conflicts lead to the destruction of schools, displacement of families, and displacement of teachers and educational resources. UNESCO estimates that at least 75 million children are currently out of school due to conflicts, depriving them of vital educational opportunities (UNESCO, 2020). Without access to quality education, children face reduced academic achievement and limited prospects for their futures. Disrupted education not only impacts their intellectual development but also affects their social skills and emotional well-being, creating a cycle of poverty and instability that can persist for generations. In many instances, the trauma endured during conflict makes it difficult for children to focus on learning even when education is available, as they grapple with the psychological scars of their experiences.

The Need for Comprehensive Support

Addressing the impact of war on children's mental health and learning requires a multifaceted approach that includes immediate humanitarian assistance and long-term recovery strategies. Here are several critical areas that we request the Human Rights Council to remind its member states to prioritize:

To effectively address the impact of war on children's mental health and education, governments and international organizations must ensure access to mental health services for affected children. This entails deploying trained mental health professionals who can provide essential psychological support and counseling, along with community-based programs that promote resilience and healing. Moreover, urgent efforts must be undertaken to restore and rebuild educational infrastructure in conflict-affected areas, which involves not only repairing physical school buildings but also equipping teachers with the necessary resources and support to meet the specific needs of traumatized students. Educational programs should be designed to be inclusive and sensitive to the experiences of these children, with an emphasis on psychosocial support and trauma-informed teaching approaches that foster a safe and supportive learning environment. Engaging communities in recovery efforts is also vital for creating sustainable change, and it is essential to involve local organizations, families, and community leaders in developing and implementing programs that address the unique needs of children in conflict-affected areas. Finally, the international community must take collective responsibility for protecting children in armed conflict by advocating for the enforcement of international humanitarian laws that safeguard educational institutions and promote the rights of children in these vulnerable situations.

Conclusion

In conclusion, the impact of war on children's mental health and their ability to learn is a profound violation of their rights and potential. The International Community must take immediate action to address the psychological and educational needs of affected children, ensuring that they receive the support and resources necessary to heal and thrive. Let us reaffirm our commitment to protecting the most vulnerable among us and to fostering a future where every child, regardless of their circumstances, has the opportunity to achieve their full potential.

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1. World Health Organization. (2019). Mental health and well-being in children and adolescents in conflict-affected settings. Retrieved from WHO website.
2. UNESCO. (2020). Global Education Monitoring Report 2020: Inclusion and education. Retrieved from UNESCO website.
3. https://pmc.ncbi.nlm.nih.gov/articles/PMC9209349/