CHILD MENTAL HEALTH PROMOTION IN WETLAND COMMUNITIES: A LITERATURE REVIEW

PROMOSI KESEHATAN MENTAL ANAK DI KOMUNITAS LAHAN BASAH: TINJAUAN LITERATUR

Wilma Hannie Daniel[1*]

[1] Faculty of Medicine, Universitas Indo Global Mandiri, Palembang, Indonesia

[*] Corresponding Author (email: wilmahannie@uigm.ac.id ORCID 0009-0009-2714-3515)

ABSTRACT

Background: Child mental health is a global public health priority. Wetland communities face unique environmental, social, and health challenges that may influence child well-being.
Objective: To review evidence on child mental health promotion in wetland and comparable vulnerable communities.
Methods: A narrative literature review was conducted using peer-reviewed articles, systematic reviews, and international reports published between 2016 and 2026. Literature was retrieved from PubMed, ScienceDirect, Google Scholar, and institutional publications from the World Health Organization (WHO), UNICEF, and other relevant organizations. A thematic synthesis approach was used to identify recurring concepts related to child mental health promotion.
Results: Evidence consistently identifies family support, school connectedness, resilience skills, social-emotional learning, cultural identity, and community engagement as major protective factors. Risk factors include poverty, environmental vulnerability, educational inequities, and psychosocial stressors. School-based interventions improve emotional competence, resilience, and mental well-being. Community-based and culturally responsive approaches strengthen identity and belonging. Emerging evidence also supports arts-based and participatory approaches.
Conclusion: Child mental health promotion in wetland communities should be understood as a multidimensional ecological process involving children, families, schools, culture, and community systems. Future programs should integrate local wisdom, resilience-building, and culturally grounded health promotion strategies.

Keywords: child mental health, mental health promotion, wetland communities, resilience, social-emotional learning, community health

ABSTRAK

Latar Belakang: Kesehatan mental anak merupakan prioritas kesehatan masyarakat global. Masyarakat di daerah lahan basah (wetland) menghadapi tantangan lingkungan, sosial, dan kesehatan yang unik yang dapat memengaruhi kesejahteraan anak.
Tujuan: Untuk meninjau bukti-bukti tentang promosi kesehatan mental anak di masyarakat lahan basah dan komunitas rentan lainnya yang sebanding.
Metode: Tinjauan literatur naratif dilakukan dengan menggunakan artikel yang ditelaah sejawat (peer-reviewed), tinjauan sistematis, dan laporan internasional yang diterbitkan antara tahun 2016 dan 2026. Literatur diperoleh dari PubMed, ScienceDirect, Google Scholar, serta publikasi institusional dari Organisasi Kesehatan Dunia (WHO), UNICEF, dan organisasi relevan lainnya. Pendekatan sintesis tematik digunakan untuk mengidentifikasi konsep-konsep yang berulang terkait promosi kesehatan mental anak.
Hasil: Bukti secara konsisten mengidentifikasi dukungan keluarga, keterikatan dengan sekolah, keterampilan resiliensi, pembelajaran sosial-emosional, identitas budaya, dan keterlibatan masyarakat sebagai faktor-faktor protektif utama. Faktor risiko meliputi kemiskinan, kerentanan lingkungan, ketidaksetaraan pendidikan, dan stresor psikososial. Intervensi berbasis sekolah meningkatkan kompetensi emosional, resiliensi, dan kesejahteraan mental. Pendekatan berbasis masyarakat dan responsif budaya memperkuat identitas dan rasa memiliki. Bukti yang berkembang juga mendukung pendekatan berbasis seni dan partisipatif.
Kesimpulan: Promosi kesehatan mental anak di masyarakat lahan basah harus dipahami sebagai proses ekologis multidimensi yang melibatkan anak-anak, keluarga, sekolah, budaya, dan sistem masyarakat. Program ke depan harus mengintegrasikan kearifan lokal, penguatan resiliensi, dan strategi promosi kesehatan yang berakar pada budaya.

Kata kunci: kesehatan mental anak, promosi kesehatan mental, masyarakat lahan basah, resiliensi, pembelajaran sosial-emosional, kesehatan masyarakat

INTRODUCTION

Mental health is increasingly recognized as a fundamental component of child health and development. According to the World Health Organization (WHO), mental health encompasses emotional, psychological, and social well-being and influences how individuals think, feel, learn, and interact with others (WHO, 2022). Globally, approximately one in seven children and adolescents experiences a mental health condition, making child mental health a major public health concern (WHO, 2022). Early mental health difficulties are associated with poorer educational attainment, impaired social relationships, reduced quality of life, and increased risk of mental disorders during adulthood (UNICEF, 2021).

Contemporary public health frameworks emphasize that mental health promotion extends beyond the prevention of mental illness. Instead, it seeks to strengthen protective factors that enable children to thrive emotionally, socially, and developmentally (O'Reilly et al., 2018). Mental health promotion therefore focuses on enhancing resilience, emotional competence, self-esteem, social connectedness, and supportive environments that foster positive development (Fenwick-Smith et al., 2018).

Childhood represents a critical developmental period characterized by rapid cognitive, emotional, and social growth. Developmental research demonstrates that early experiences significantly influence lifelong trajectories of health and well-being (Black et al., 2017; Richter et al., 2017). Positive childhood environments contribute to healthy brain development, emotional regulation, and adaptive coping mechanisms, whereas adverse experiences may increase vulnerability to future mental health challenges (Britto et al., 2017).

The importance of early intervention is supported by developmental and public health evidence. Many adult mental health disorders originate during childhood and adolescence, suggesting that preventive efforts should begin before symptoms become established (O'Reilly et al., 2018). Universal mental health promotion programs delivered in schools have shown effectiveness in improving emotional well-being, resilience, and social-emotional competence among children (Dray et al., 2017; Cefai et al., 2022).

Children living in wetland communities may face additional environmental and social challenges that influence mental well-being. Wetlands are dynamic ecosystems characterized by rivers, floodplains, marshes, swamps, and coastal environments. While these ecosystems provide important ecological and economic benefits, they may also expose communities to environmental uncertainty, flooding, climate-related disruptions, infectious disease risks, and infrastructural limitations (UNEP, 2021; Ramsar Convention Secretariat, 2021).

Environmental adversity may indirectly affect children's mental health through family stress, educational disruption, economic instability, and reduced access to health and social services. Research increasingly suggests that environmental vulnerability and climate-related stressors influence psychological well-being among children and adolescents (Cunsolo & Ellis, 2018). However, focusing exclusively on risks may overlook the strengths and assets present within wetland communities.

Many wetland communities possess strong social cohesion, intergenerational relationships, cultural traditions, and community networks that may serve as protective factors. Indigenous and place-based perspectives emphasize the importance of identity, belonging, connection to land, and community participation in supporting youth resilience and mental well-being (Gaudet, 2021; Lopez-Carmen et al., 2019). These assets align with ecological models of health promotion, which recognize that well-being is shaped by interactions among individuals, families, communities, and broader environmental systems.

Despite increasing recognition of child mental health as a global priority, literature specifically examining mental health promotion within wetland communities remains limited. Although previous studies have examined child mental health, resilience, school-based interventions, and environmental vulnerability separately, limited attention has been given to how wetland-specific environmental conditions interact with social, cultural, and community assets to influence child mental well-being. Existing reviews rarely adopt an ecological health promotion perspective that simultaneously considers environmental risks, protective community factors, and culturally grounded resilience mechanisms. Addressing this gap is important for developing context-sensitive health

promotion strategies for children living in wetland communities. Therefore, this review aims to synthesize current evidence on child mental health promotion in wetland communities and identify implications for future public health practice.

Furthermore, this review aligns primarily with Sustainable Development Goal (SDG) 3 (Good Health and Well-Being), particularly the promotion of mental health and psychosocial well-being among children. It also contributes to SDG 4 (Quality Education) through school-based health promotion, SDG 11 (Sustainable Communities) through the preservation of community assets and local resilience, and SDG 17 (Partnerships for the Goals) through multisectoral collaboration in child health promotion.

METHODS

Study Design

This study used a narrative literature review design to identify, appraise, and synthesise studies examining child mental health, resilience, social-emotional learning, school health promotion, community resilience, and culturally responsive approaches.

Search Strategy

The search strategy combined mental health, health promotion, child population, and community-context terms using Boolean operators (AND/OR).

Core search terms:

("child mental health" OR "mental well-being" OR resilience OR "social emotional learning") AND ("health promotion" OR "mental health promotion" OR "school health") AND (child OR children OR "school-aged children") AND (wetland OR rural OR indigenous OR community)

Inclusion and Exclusion Criteria

Studies were considered eligible for inclusion if they were published between 2016 and 2026 and examined child mental health, mental well-being, resilience, social-emotional learning, psychosocial development, or health promotion among children and school-aged populations. Studies conducted in community, school, rural, Indigenous, environmentally vulnerable, wetland, or comparable settings were included to capture a broad range of contextual influences on child mental health. Eligible studies employed recognized quantitative, qualitative, mixed-methods, quasi-experimental, observational, intervention, or review methodologies and were published in English or Indonesian. Studies were excluded if they focused exclusively on adult populations, clinical psychiatric treatment, pharmacological management, or specialized mental health services without a health promotion component. Editorials, conference abstracts, study protocols, opinion papers, and publications lacking sufficient methodological or outcome data were also excluded from the review.

Study Selection

The initial search results were screened based on titles and abstracts to assess their relevance to the review objectives. Full-text articles were subsequently examined against the predefined inclusion and exclusion criteria. Studies that focused on child mental health, mental well-being, resilience, social-emotional learning, health promotion, or related psychosocial outcomes were retained for further analysis. Relevant international reports from organizations such as the World Health Organization (WHO), UNICEF, and the United Nations Environment Programme (UNEP) were also included to provide additional contextual and policy perspectives.

Data Extraction

These data were summarized in Table 1 to facilitate comparison across studies.

Data Synthesis

A thematic synthesis approach was employed to integrate findings across the included studies. Key concepts, determinants, and intervention strategies related to child mental health promotion were identified and grouped into recurring themes. The synthesis focused on understanding risk factors, protective factors, school-based mental health promotion, family and community influences, cultural identity, resilience, and emerging opportunities for future health promotion initiatives in wetland communities.

RESULTS

Characteristics of Included Studies

A total of ten key studies published between 2017 and 2025 were included in this review. The selected studies represented diverse methodological approaches, including systematic reviews, qualitative studies, quasi-experimental studies, mixed-methods research, population-based surveys, and conceptual analyses. The studies were conducted across various geographical settings, including Europe, Australia, Canada, Indigenous communities, and multinational school-based contexts. Most studies focused on resilience, social-emotional learning, school-based mental health promotion, cultural identity, and community-based protective factors influencing child mental well-being.

Table 1 summarizes the characteristics, study designs, sample sizes, intervention focuses, and principal findings of the included studies.

Table 1. Summary of Studies on Child Mental Health Promotion and Well-Being

Author	Country	Study Design	Sample Size (n)	Population	Intervention /Focus	Main Findings
Dray et al.,	Multiple	Systematic	57 studies	School	Resilience	Improved resilience and

Author	Country	Study Design	Sample Size (n)	Population	Intervention /Focus	Main Findings
2017	countries	Review		children	interventions	reduced psychological distress
Fenwick-Smith et al., 2018	Australia	Systematic Review	11 reports	Primary school children	Resilience promotion	Improved coping skills
O'Reilly et al., 2018	Global	Review	10 studies	School children	Mental health promotion	School-based interventions beneficial
Lopez-Carmen et al., 2019	Indigenous settings	Mixed methods	Various	Indigenous children	Community partnership	Culture strengthens mental health
Brown & Shay, 2021	UK/Australia	Conceptual Review	N/A	School-aged youth	Well-being framework	Identity central to well-being
Gaudet, 2021	Canada	Qualitative	Community participants	Indigenous youth	Cultural resilience Land-based learning	Improved well-being and identity
Laurens et al., 2022	Australia	Population survey	597 schools	Primary schools	School mental health	SEL improves wellbeing
Cefai et al., 2022	Six European countries	Quasi-experimental	7,789 students	School children	SEL intervention	Reduced mental health problems
Madsen et al., 2025	Denmark	Feasibility Study	900+ children	Primary school children	Choir singing	Potential mental health benefits
Mastrothanasis et al., 2025	Greece	Phenomenological study	23 teachers	School children	Participatory arts	Improved psychosocial resilience

As presented in Table 1, the reviewed literature consistently identified resilience, social-emotional learning, school connectedness, cultural identity, and community engagement as major protective factors associated with positive child mental health outcomes. Several studies demonstrated that school-based interventions effectively improved emotional competence, coping skills, and psychosocial well-being among children (Dray et al., 2017; Cefai et al., 2022).

The findings further suggest that child mental health is shaped not only by individual psychological factors but also by broader social and environmental determinants. Studies conducted in Indigenous and community-based settings highlighted the importance of cultural identity, belonging, and meaningful participation as contributors to resilience and well-being (Lopez-Carmen et al., 2019; Gaudet, 2021).

Additionally, emerging evidence indicates that participatory and arts-based approaches may strengthen psychosocial resilience and emotional expression among children, suggesting promising directions for future health promotion initiatives (Madsen et al., 2025; Mastrothanasis et al., 2025).

Risk Factors Affecting Child Mental Health

The literature identifies multiple risk factors influencing child mental health. Poverty, family stress, educational disadvantage, environmental instability, and social exclusion are consistently associated with poorer psychological outcomes (WHO, 2022; UNICEF, 2021). Children living in environmentally vulnerable regions may experience additional stressors associated with flooding, displacement, climate uncertainty, and limited access to services (UNEP, 2021).

Climate-related disruptions increasingly represent an emerging mental health concern. Cunsolo and Ellis (2018) describe ecological grief as a psychological response to environmental change, suggesting that environmental instability may affect emotional well-being even among younger populations. These findings are particularly relevant for wetland communities that experience recurring environmental challenges.

Protective Factors and Resilience

Protective factors play a critical role in buffering the effects of adversity. Family support, positive peer relationships, school connectedness, and community engagement consistently emerge as strong predictors of child well-being (Fenwick-Smith et al., 2018). Resilience is increasingly conceptualized not as an individual trait but as a dynamic process shaped by social and environmental resources.

Gaudet (2021) demonstrated that land-based learning programs strengthened resilience among Indigenous youth by reinforcing cultural identity, belonging, and community participation. Similarly, Lopez-Carmen et al. (2019) highlighted the importance of culturally responsive approaches that recognize community strengths rather than focusing solely on deficits.

Schools as Platforms for Mental Health Promotion

Schools are among the most effective settings for universal mental health promotion because they reach large populations of children during critical developmental periods (O'Reilly et al., 2018). School-based programs provide opportunities to strengthen emotional literacy, coping skills, social competence, and resilience.

The systematic review by Dray et al. (2017) found that resilience-focused interventions significantly improved mental health outcomes among school-aged children. Similarly, Cefai et al. (2022) reported improvements in social-emotional competence and reductions in mental health difficulties among students participating in a large-scale European school-based program.

Social-Emotional Learning and Well-Being

Social-emotional learning (SEL) has become a cornerstone of contemporary child mental health promotion. SEL focuses on self-awareness, emotional regulation, empathy, relationship skills, and responsible decision-making. Evidence indicates that SEL interventions contribute to improved emotional competence and reduced behavioral difficulties (Taylor et al., 2017; Cefai et al., 2022).

The positive effects of SEL are particularly important for children facing environmental or social adversity. Emotional competence may enhance coping abilities and facilitate adaptive responses to stress, thereby strengthening resilience. Thus, the successful implementation of social-emotional learning programs depends not only on curriculum content but also on the active involvement of teachers and supportive school environments. Teachers play a critical role in modeling emotional competence, fostering positive relationships, and creating psychologically safe learning environments that promote student well-being (Schonert-Reichl, 2017). This finding further supports the role of schools as strategic settings for child mental health promotion.

Culture, Identity, and Community Connectedness

A recurring theme across the literature is the importance of cultural identity and belonging. Brown and Shay (2021) argue that resilience alone is insufficient for understanding child well-being. Instead, identity, connectedness, and meaningful participation are essential determinants of positive mental health.

Studies involving Indigenous and community-based populations consistently highlight the protective role of cultural continuity, local knowledge, and community engagement (Gaudet, 2021; Lopez-Carmen et al., 2019). These findings suggest that wetland communities possess valuable cultural resources that may support child well-being.

Implications for Wetland Communities

Although most reviewed studies were conducted outside wetland settings, several findings may be highly relevant to wetland communities. Environmental uncertainty, seasonal flooding, geographical isolation, and limited access to services may increase

psychosocial vulnerability among children (UNEP, 2021; Ramsar Convention Secretariat, 2021; Cunsolo & Ellis, 2018). However, an asset-based health promotion perspective suggests that wetland communities often possess strong social cohesion, cultural traditions, and community networks that may function as protective factors for child well-being, thereby creating opportunities for locally relevant and culturally grounded child mental health promotion interventions (Gaudet, 2021; Lopez-Carmen et al., 2019).

This perspective highlights the importance of leveraging existing community strengths rather than focusing solely on environmental vulnerabilities when designing child mental health promotion programs in wetland settings.

Emerging Opportunities: Arts-Based Mental Health Promotion

Although not yet widely implemented in wetland settings, arts-based approaches are increasingly recognized as promising mental health promotion strategies. Participatory arts interventions strengthen emotional expression, social connection, and resilience (Mastrothanasis et al., 2025). Similarly, music-based activities such as choir singing have shown potential benefits for emotional well-being among children (Madsen et al., 2025).

Emerging evidence also suggests that arts-based approaches may contribute positively to mental health and psychosocial well-being across diverse populations. According to a comprehensive review commissioned by the World Health Organization, participation in artistic and creative activities may support emotional regulation, social connectedness, resilience, and overall well-being, highlighting the potential role of arts-based interventions within health promotion initiatives (Fancourt & Finn, 2019). These findings suggest opportunities for integrating local culture, storytelling, music, and creative/ expression into future child mental health promotion programs.

DISCUSSION

The findings of this review indicate that child mental health promotion in wetland communities cannot be understood through a single-factor explanation. Rather, mental well-being emerges from complex interactions among environmental conditions, family relationships, educational systems, cultural identity, and community resilience.

From an ecological perspective, child mental health is embedded within interconnected systems. Environmental vulnerabilities associated with wetland settings may create challenges; however, these same communities often possess protective social and cultural assets. Consequently, public health approaches should avoid deficit-oriented frameworks and instead adopt asset-based models that recognize community strengths.

The literature further suggests that resilience should not be conceptualized solely as an individual characteristic. Contemporary resilience research increasingly emphasizes social, cultural, and environmental dimensions. Children develop resilience through supportive relationships, meaningful participation, cultural identity, and opportunities to

build competence. Therefore, mental health promotion should focus not only on reducing risk but also on strengthening protective systems.

Schools emerge as particularly strategic platforms for intervention. However, school-based programs are most effective when supported by families and communities. Integrating school-based initiatives with culturally grounded community engagement may provide a more sustainable approach to child mental health promotion.

Another important implication concerns the role of culture and identity. Wetland communities often possess rich traditions, local wisdom, oral narratives, and communal practices that foster belonging and continuity. These cultural assets represent valuable yet underutilized resources for mental health promotion. Future interventions should move beyond importing externally developed programs and instead incorporate locally meaningful approaches.

Several limitations should be considered when interpreting the findings of this review. First, this study employed a narrative literature review approach rather than a systematic review methodology, which may increase the possibility of selection bias. Second, the available literature specifically addressing child mental health promotion in wetland communities remains limited, requiring the inclusion of evidence from rural, Indigenous, and other environmentally vulnerable settings. Third, the reviewed studies varied considerably in terms of study design, population characteristics, intervention approaches, and outcome measures, which may limit direct comparison across studies.

Finally, future research should examine how community-based cultural resources may be mobilized to strengthen child mental health promotion in wetland communities. Future research should explore innovative and culturally responsive approaches to child mental health promotion, including storytelling, music, creative play, puppetry, and other forms of participatory arts. These approaches are increasingly recognized as valuable components of health promotion and well-being strategies within community settings (Fancourt & Finn, 2019).

CONCLUSION

Child mental health promotion in wetland communities represents an important yet underexplored public health priority. The literature indicates that family support, school connectedness, resilience skills, social-emotional learning, cultural identity, and community engagement are major protective factors supporting child well-being. Effective mental health promotion requires ecological, culturally responsive, and asset-based approaches that recognize both environmental challenges and community strengths. Future programs should integrate schools, families, communities, and local cultural resources to support sustainable child mental health and resilience.

REFERENCES

Black, M. M., Walker, S. P., Fernald, L. C. H., Andersen, C. T., DiGirolamo, A. M., Lu, C., McCoy, D. C., Fink, G., Shawar, Y. R., Shiffman, J., Devercelli, A. E.,

Wodon, Q. T., Vargas-Barón, E., & Grantham-McGregor, S. (2017). Early childhood development coming of age: Science through the life course. *The Lancet, 389*(10064), 77–90. https://doi.org/10.1016/S0140-6736(16)31389-7

Britto, P. R., Lye, S. J., Proulx, K., Yousafzai, A. K., Matthews, S. G., Vaivada, T., Perez-Escamilla, R., Rao, N., Ip, P., Fernald, L. C. H., MacMillan, H., Hanson, M., Wachs, T. D., Yao, H., Yoshikawa, H., Cerezo, A., Leckman, J. F., & Bhutta, Z. A. (2017). Nurturing care: Promoting early childhood development. *The Lancet, 389*(10064), 91–102. https://doi.org/10.1016/S0140-6736(16)31390-3

Brown, C., & Shay, M. (2021). From resilience to wellbeing: Identity-building as an alternative framework for schools' role in promoting children's mental health. *Review of Education, 9*(2), 599–634. https://doi.org/10.1002/rev3.3264

Cefai, C., Bartolo, P. A., Cavioni, V., & Downes, P. (2022). Strengthening social and emotional education as a core curricular area across the European Union: A review of the evidence. *Frontiers in Psychology, 13*, 925614. https://doi.org/10.3389/fpsyg.2022.925614

Cunsolo, A., & Ellis, N. R. (2018). Ecological grief as a mental health response to climate change-related loss. *Nature Climate Change, 8*(4), 275–281. https://doi.org/10.1038/s41558-018-0092-2

Dray, J., Bowman, J., Campbell, E., Freund, M., Hodder, R., Wolfenden, L., Richards, J., Leane, C., Green, S., Lecathelinais, C., Oldmeadow, C., Attia, J., & Wiggers, J. (2017). Systematic review of universal resilience-focused interventions targeting child and adolescent mental health in the school setting. *Journal of the American Academy of Child & Adolescent Psychiatry, 56*(10), 813–824. https://doi.org/10.1016/j.jaac.2017.07.780

Fancourt, D., & Finn, S. (2019). *What is the evidence on the role of the arts in improving health and well-being? A scoping review*. WHO Regional Office for Europe. https://www.who.int/europe/publications/i/item/9789289054553

Fenwick-Smith, A., Dahlberg, E. E., & Thompson, S. C. (2018). Systematic review of resilience-enhancing, universal, primary school-based mental health promotion programs. *BMC Psychology, 6*(1), 30. https://doi.org/10.1186/s40359-018-0242-3

Gaudet, J. C. (2021). Our ways: Decolonizing approaches to Indigenous health and well-being. *International Journal of Indigenous Health, 16*(1), 1–8. https://jps.library.utoronto.ca/index.php/ijih

Laurens, K. R., Graham, L. J., Dix, K. L., Harris, F., Tzoumakis, S., Williams, K. E., Schofield, J. M., Prendergast, T., Waddy, N., Taiwo, M., Carr, V. J., & Green, M. J. (2022). School-based mental health promotion and early intervention programs in New South Wales, Australia: Mapping practice to policy and evidence. *School Mental Health, 14*, 582–597. https://doi.org/10.1007/s12310-021-09490-2

Lopez-Carmen, V., McCalman, J., Benveniste, T., Askew, D., Spurling, G., Langham, E., & Bainbridge, R. (2019). Working together to improve the mental health of Indigenous children: A systematic review. *Children and Youth Services Review, 104*, 104408. https://doi.org/10.1016/j.childyouth.2019.104408

Lu, C., Black, M. M., & Richter, L. M. (2016). Risk of poor development in young children in low-income and middle-income countries: An estimation and analysis at the global, regional, and country level. *The Lancet Global Health, 4*(12), e916–

e922. https://doi.org/10.1016/S2214-109X(16)30266-2

Madsen, K. R., Tetens, A., Bonde, L. O., Kusier, A. O., Jeppesen, P., & Andersen, S. (2026). Everyone can sing: Protocol for a non-randomized feasibility study of class choir as mental health promotion among primary school children (ages 5–10) in Denmark. *Pilot and Feasibility Studies, 12*, Article 17. https://doi.org/10.1186/s40814-025-01756-4

Mastrothanasis, K., Dumitru, C., Darie, N., Kladaki, M., Pikoulis, E., Sidiropoulou, A., Papouli, E., Papantoniou, D., Pikouli, A., & Karamagioli, E. (2025). Participatory arts as emergency responses for strengthening community resilience and psychosocial support: A retrospective phenomenological inquiry. *Frontiers in Public Health, 13*, 1544569. https://doi.org/10.3389/fpubh.2025.1544569

McCoy, D. C., Peet, E. D., Ezzati, M., Danaei, G., Black, M. M., Sudfeld, C. R., Fawzi, W., & Fink, G. (2016). Early childhood developmental status in low- and middle-income countries: National, regional, and global prevalence estimates using predictive modeling. *PLoS Medicine, 13*(6), e1002034. https://doi.org/10.1371/journal.pmed.1002034

O'Reilly, M., Svirydzenka, N., Adams, S., & Dogra, N. (2018). Review of mental health promotion interventions in schools. *Social Psychiatry and Psychiatric Epidemiology, 53*(7), 647–662. https://doi.org/10.1007/s00127-018-1530-1

Ramsar Convention Secretariat. (2021). *Global wetland outlook: Special edition 2021*. Ramsar Convention Secretariat. https://www.global-wetland-outlook.ramsar.org

Richter, L. M., Daelmans, B., Lombardi, J., Heymann, J., Boo, F. L., Behrman, J. R., Lu, C., Lucas, J. E., Perez-Escamilla, R., Dua, T., Bhutta, Z. A., Stenberg, K., Gertler, P., & Darmstadt, G. L. (2017). Investing in the foundation of sustainable development: Pathways to scale up for early childhood development. *The Lancet, 389*(10064), 103–118. https://doi.org/10.1016/S0140-6736(16)31698-1

Schonert-Reichl, K. A. (2017). Social and emotional learning and teachers. *The Future of Children, 27*(1), 137–155. https://www.jstor.org/stable/44219025

Taylor, R. D., Oberle, E., Durlak, J. A., & Weissberg, R. P. (2017). Promoting positive youth development through school-based social and emotional learning interventions: A meta-analysis of follow-up effects. *Child Development, 88*(4), 1156–1171. https://doi.org/10.1111/cdev.12864

UNEP. (2021). *Making peace with nature: A scientific blueprint to tackle the climate, biodiversity and pollution emergencies*. United Nations Environment Programme. https://www.unep.org/resources/making-peace-nature

UNICEF. (2021). *The state of the world's children 2021: On my mind—Promoting, protecting and caring for children's mental health*. UNICEF. https://www.unicef.org/reports/state-worlds-children-2021

World Health Organization. (2022). *World mental health report: Transforming mental health for all*. World Health Organization. https://www.who.int/publications/i/item/9789240049338