



# Mitigating the long-term impacts of terrorism on children's education and health in Pakistan

Samreen Malik, Rafat Mahmoud, and Faiz ur Rahman

## Purpose

Terrorism has emerged as one of the most critical challenges affecting human capital formation around the world, and Pakistan has been particularly affected. Over the past decades, repeated terrorist incidents have not only disrupted day-to-day life but have also had lasting impacts on the education and health sectors in the country. This policy brief investigates the effects of terrorism on child education and health outcomes, highlighting how terrorism exposure is associated with significant reductions in primary school completion and vaccination rates, along with an increase in preventable illnesses such as diarrhoea. It outlines the key findings, discusses policy implications and recommendations, assesses long-term impacts based on historical data, and examines challenges for policymakers.

## Context

Violent conflict, including terrorism, inflicts long-term damage on socio-economic systems, particularly affecting human capital formation. Children exposed to terrorism during developmental stages suffer from both cognitive and physical impairments due to malnutrition, psychological trauma, and limited access to essential services like education and healthcare.<sup>1</sup> This disruption hampers their future potential, limiting their contributions to the economy.

Pakistan, consistently ranked among the most terrorism-affected countries, faces a dire situation. Despite efforts to improve, the country's health and education systems are underperforming, with alarming statistics related to child health and education. Approximately 40 percent of children in Pakistan experience stunting, and educational enrolment rates are low, particularly for girls in rural areas. The presence of violent conflict, especially terrorism,

1 Joshi, P. T., & O'Donnell, D. A. (2003), 'Consequences of child exposure to war and terrorism', *Clinical Child and Family Psychology Review*, 6(4), pp. 275–292. Available at: <https://doi.org/10.1023/B:CCFP.0000006294.88201.68>. See also Williams, R. (2006), 'The psychosocial consequences for children and young people who are exposed to terrorism, war, conflict and natural disasters', *Current Opinion in Psychiatry*, 19(4), pp. 337–349. Available at: <https://pubmed.ncbi.nlm.nih.gov/16721161/>.

exacerbates these challenges, contributing to reduced educational attainment and poor health outcomes for children.

## Key findings

The study that this policy brief is based on reveals several key insights, outlined below:

### Disruption in education

- Exposure to terrorism leads to a 16-percentage point reduction in primary school completion.
- Although girls lag behind in general in primary education completion, boys are more negatively impacted by terrorism, experiencing an 18-percentage point lower likelihood of completing primary school compared to girls.

### Health outcomes

- Children in terrorism-exposed areas are 15-percentage points less likely to be vaccinated. This may be due to disruptions in healthcare services, fear of seeking medical help in conflict zones, and reduced availability of immunisation campaigns during periods of instability.
- Terrorism exposure is associated with a 7.2-percentage point increase in the incidence of diarrhoea, highlighting the adverse effects on children's physical health. The increased risk could be linked to disruptions in sanitation, limited access to healthcare, and heightened stress, leading to poor hygiene practices in conflict-affected areas.

### Gender dynamics

- While no gender differences are observed in health outcomes, male children are more adversely affected by the educational disruptions caused by terrorism.
- Parents express heightened concern for the safety of their sons, particularly in high-intensity

terrorism districts, which affects their access to education and overall well-being.<sup>2</sup>

## Psychological and social impacts

- The psychological toll of terrorism is significant, with increased anxiety, fear, and uncertainty, particularly in high-intensity terrorism areas. This affects both parents and children, with implications for mental health.

## Policy recommendations

Overall, this study highlights the urgent need for a comprehensive and multi-dimensional policy response to the educational and health challenges posed by terrorism, with a focus on long-term recovery, resilience building, and equitable access to services for all children, particularly those in the most affected regions. In particular, the policy recommendations below are highlighted.

### Recommendations

- **Prioritise affected areas with targeted interventions:** Policy interventions should prioritise regions with high terrorism intensity, focusing on rebuilding educational infrastructure, providing psychological support for children and teachers, and ensuring the continuity of schooling even during periods of unrest. Mobile schools, online learning initiatives, and community-based education programs could help mitigate educational disruptions.
- **Integrate mental health support into service delivery:** Mental health is often overlooked in policy discussions. Given the significant psychological impact of terrorism exposure on children and families, there is a need to integrate mental health support into educational and health services in conflict-affected regions. School-based counselling programs and community outreach initiatives should be established to help children cope with trauma and stress. Areas where schools and health care services are directly affected are in special need of such measures.

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2 'Son preference' is a well-documented cultural phenomenon in South Asia (*Das Gupta, 1987; Royston, 1989*), including Pakistan, where sons are often viewed as primary heirs and responsible for supporting aging parents (*Edlund, 1999; Behrman, 1986*). This preference is reinforced by social, economic, and cultural factors, including inheritance rights and societal expectations. In many cases, sons are afforded more freedom of mobility and public presence than daughters, which may increase their exposure to external threats like terrorism. As a result, parents may express heightened concern for the safety of their sons, particularly in conflict zones, which affects their access to education and overall well-being. This dynamic reflects both the societal emphasis on sons and the greater physical and social risks they face in such environments.

- **Strengthen health infrastructure:** To address the low vaccination rates and poor childhood health outcomes in regions impacted by terrorism, the government should strengthen immunisation programs, particularly in high-risk districts. Mobile health clinics, community health workers, and targeted vaccination campaigns could improve coverage and reduce health disparities.
- **Ensure gender-sensitive programming:** Empirical evidence and insights from parents and teachers suggest that male children experience greater educational disruptions and psychological distress in high-intensity regions. While addressing these challenges for boys is important, it is equally crucial to ensure that girls are not overlooked. Their psychological impact may be underestimated due to parental oversight, or it may appear less pronounced because their well-being, as perceived by parents, was already low before the attack. Policies should be designed to ensure equal and equitable access to education and healthcare for both boys and girls.
- **Establish long-term monitoring and data collection systems:** To better understand the cumulative effects of terrorism on children, it is crucial to establish long-term monitoring systems that track both educational and health outcomes over time. This would allow for timely adjustments to policies and ensure that interventions address the evolving needs of children in conflict-affected areas.

## Strategic programming implications

A robust policy framework must also be in place to address immediate needs and long-term challenges. This requires:

- **Short term and immediate interventions:** In the short term, measures such as temporary learning spaces, emergency health services, and rapid-response community programs are crucial. These interventions ensure that the most vulnerable populations are protected during periods of acute insecurity.
- **Medium- to long-term strategies:** Over the medium and long term, policies must focus on rebuilding systemic structures. This involves integrating crisis management into national education and health policies, enhancing infrastructure resilience, and fostering economic opportunities that can reduce community reliance on immediate survival strategies.

- **Monitoring and evaluation:** A key component of long-term policy is the establishment of comprehensive monitoring systems. By continuously assessing the impact of interventions using historical data, policymakers can refine strategies to better address the evolving challenges posed by terrorism.

## Challenges

Despite the clear need for intervention, several challenges persist:

- **Security constraints:** Persistent insecurity makes it difficult to maintain uninterrupted educational and healthcare services. Ongoing conflicts and the threat of terrorist attacks hinder the delivery of vital services.
- **Resource limitations:** Budgetary constraints and competing priorities often limit the ability of governments to invest in necessary infrastructure and long-term projects.
- **Coordination and implementation:** Effective policy implementation requires coordinated efforts among multiple stakeholders, including government agencies, local communities, and international donors. Fragmented approaches can dilute the impact of even well-designed policies.
- **Socioeconomic barriers:** Deep-seated socio-economic issues, such as poverty, gender inequality, and unemployment, exacerbate the adverse impacts of terrorism. Without addressing these underlying factors, policy interventions may only have temporary effects.

## Conclusion

Addressing the long-term impacts of terrorism on child education and health in Pakistan requires a comprehensive policy approach. The findings of this study underscore the need for immediate interventions, along with sustainable long-term strategies that build resilience and support human capital development. By overcoming challenges related to security, resource constraints, and socioeconomic barriers, policymakers can implement effective reforms that not only mitigate current losses but also lay the foundation for a more stable and prosperous future.

## Methodology

In this study, we used data from seven waves of the ['Pakistan Social and Living Standards Measurement' \(PSLM\) survey](#) (conducted between 2004 and 2020) to analyse district-level education and health outcomes in Pakistan. The key outcome variables included primary education completion (children aged 6-10), full immunisation (children aged 0-4), and the incidence of diarrhoea (children aged 0-4). We matched these outcome variables with district-level data on terrorist incidents from the 'Global Terrorism Database' (GTD) to examine the potential impact of terrorism on these outcomes.

## About the authors

**Rafat Mahmood** is a Research Fellow at Monash University. She holds a Masters and MPhil in Economics from Quaid-i-University, Islamabad, and a PhD from the University of Western Australia. Mahmood is primarily interested in topics in political economy and international security. She is also a junior fellow at AALIMS and a research fellow at the Mahbub ul Haq Centre at LUMS.

**Samreen Malik** is an Associate Professor of Economics at New York University Abu Dhabi. She earned her PhD from Cornell University as a Fulbright Scholar. Her research focuses on applied economics, with a particular emphasis on development and macroeconomics, as well as worker reallocation, firm innovation, trade and wage inequality, institutionally embedded extremism, and learning outcomes in South Asia.

**Faiz Ur Rehman** is an Associate Professor of Economics at the Institute of Business Administration (IBA) Karachi. He earned his joint Ph.D. in Law and Economics from the Universities of Bologna, Hamburg, and Erasmus Rotterdam under the Erasmus Mundus Doctorate Fellowship. His research interests include the economics of conflict, political economy, and applied economics, with notable publications on terrorism risk and democratic preferences, and the effectiveness of counterterrorism strategies in Pakistan.

## Contact

Contact for XCEPT:  
[info@xcept-research.org](mailto:info@xcept-research.org).

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