



The Psychological Perspective of Silent Victims: Impacts on Terrorism and Security in The Modern Era

Seemab Jamil Akhtar¹, Mahtab Jamil Akhtar², Abdul Wahab Ahmad³

1. Clinical Psychologist by the Allied Health Professionals Council (AHPC), Pakistan
seemabjamilakhtar@gmail.com
2. Lecturer, Department of Politics and IR, (Corresponding Author), Lahore Leads University, Lahore Pakistan, mahtab.pol@leads.edu.pk
3. Advocate, High Court of Pakistan, wahabwattool8@gmail.com

Abstract

The psychological effects of terrorism on children in Middle East war torn countries, making them the unseen casualties of the contemporary security dilemmas. It identifies that terrorism is psychological warfare that extends the destruction of the victims into the long term instability of the society. Through qualitative methodology, the study explores trauma, post-traumatic stress disorder (PTSD), and interrupted development in children in Gaza, Yemen, Syria and Iraq. The study also concludes that psychosocial interventions have significant gaps and the involvement of child-based mental health interventions to counterterrorism and humanitarian policies should be incorporated. Findings indicate that the next generations need resilience-building measures to safeguard them.

Keywords: Terrorism, Child Psychology, Psychological Trauma, Middle East, National Security, PTSD.

Introduction

Terrorism as a modern-day trend has an extended history as terrorism evolved through politically motivated violence during the French Revolution and anarchist movements of the 19th century to the globalized extremism of the 21st century. As opposed to the terrorism in the previous years, mostly to the high and mighty and the symbols of authority, current terrorism is increasingly targeting ordinary civilians, turning ordinary societies into battlefields and increasing the number of human casualties (Aldabbour et al., 2024). This has seen children being the most vulnerable but least taken into account victims where children who experience the immediate physical effects of violence later on as well as the indirect but equally devastating psychological effects. Modern day terrorism has long since surpassed bombings and armed assaults, but it has now become a psychological warfare technique, a means of instilling fear and disrupting regular life and social bonding (Hamamra, Mahamid, and Bdier, 2025). It is also more traumatizing to children who are more sensitive due to their development stage, inability to cope, and dependence on family and community systems, which are usually devastated by conflict. Studies have shown time and again that the level of post-traumatic stress disorder (PTSD), anxiety, depression, sleep disturbances, and behavioral disorders in terrorism-exposed children increased. The effects on their health make them disadvantageous: not only their mental health but their education, integration, and further

development, which will have a boomerang effect on the family, society, and national security (Amro et al., 2025). Some of the brightest and most tragic examples of such dynamics are those in the Middle East. This is one of the largest numbers of child casualties in recent history because over 50,000 children have been killed or injured as a result of the conflict that has escalated to a new level since October of 2023 in Gaza (Sabbah et al., 2025). The protracted Yemeni conflict has led to and still leads to nearly 12 million children in need of humanitarian assistance because of displacement, malnourishment, and shattered education, both physical and psychological devastation. Civil war in Syria has caused over 7 million needy children over a decade and a significant number of them have suffered chronic trauma, disruption of education and psychosocial support inaccessibility. As comparatively less impacted by the challenges of child deaths, Iraq faces the challenge of psychological aftermath of the ISIS-period and the overall instability. The children of these states share patterns of common trauma: PTSD, developmental regression and anxiety, but the problem is aggravated by the ineffective health systems, lack of psychosocial interventions, and systemic obstacles to humanitarian access (Al-Ajlouny, Al-Maqableh, Al-Shaikh, and Al-Qudah, 2025). Despite terrorism being a nationally and internationally known security challenge, the psychological dimension and specifically its impact on children is a phenomenon that has not been sufficiently addressed in policies and practice. Although military and intelligence policies have dominated counterterrorism, the unspoken, long-term impacts of trauma left unresolved with no resolution remains to be of great concern to the cycles of violence, vulnerability, and radicalization. This disparity brings out a gaping hole: that of incorporating child-focused psychological care in both national security and humanitarian actions (Prieto et al., 2021). Though terrorism has been a political and security challenge, not much attention has been paid to its psychological effects on children in conflict-prone areas, especially in the Middle East leaving a generation vulnerable to the effects of long-term trauma, stunted development, and possible cycles of violence without a proper psychosocial intervention.

Research Objectives

1. To analyze the psychological impacts of terrorism on children in Middle Eastern conflict-affected states, focusing on trauma, PTSD, and developmental outcomes.
2. To examine how terrorism as a psychological weapon affects long-term child well-being, education, and social integration within affected communities.
3. To identify gaps in mental health interventions and propose child-centered strategies that can strengthen resilience and national security in the face of terrorism.

Research Questions

1. What are the short- and long-term psychological effects of terrorism on children living in conflict-affected Middle Eastern states?
2. How does the psychological trauma experienced by children influence broader societal stability and national security in the 21st century?
3. What interventions and policies can effectively address the psychological needs of children exposed to terrorism and prevent cycles of trauma and radicalization?

Literature Review

The developmental stage at which terrorism is experienced strongly influences long-term consequences. Early exposure during sensitive neurodevelopmental periods can disrupt emotion regulation, attachment, and cognitive growth, leaving lasting vulnerabilities into adolescence and adulthood. Longitudinal findings suggest that traumatic experiences in childhood not only contribute to immediate emotional disorders but also create persistent risks for later mental health challenges, underscoring terrorism as a long-term public health issue rather than solely a national

security threat (Prieto et al., 2021). Family and community contexts significantly moderate the psychological effects of terrorism on children. Strong parental support and healthy family functioning are protective, whereas caregiver mental health problems, particularly PTSD, intensify risks. Social cohesion at the community level also plays a critical role, as exclusion and institutional distrust exacerbate distress. Systematic reviews reveal that weak family ties and marginalization increase susceptibility to extremist narratives, highlighting how socioecological resilience is crucial for both psychological well-being and preventing radicalization (Sarour et al., 2022; Zych et al., 2022). Childhood experiences of violence and insecurity have been linked to later extremist thinking, though these pathways are complex and multifaceted. Studies emphasize that perceived injustice, discrimination, and social exclusion interact with early trauma to heighten vulnerability, while inclusion and strong community ties mitigate risks. Prevention strategies are increasingly designed around building resilience, countering extremist propaganda, and fostering inclusive environments in schools and communities, reinforcing the idea that addressing children's psychological needs is also a national security imperative (Sarour et al., 2022; Ponsot et al., 2018). Interventions for children exposed to terrorism frequently focus on mental health and psychosocial support programs. School-based activities, trauma-focused cognitive behavioural therapy (TF-CBT), and structured community interventions demonstrate reductions in PTSS, depression, and anxiety. Evidence also shows that integrated programs involving family and community participation lead to stronger long-term outcomes, although resource limitations, cultural barriers, and security challenges hinder implementation in many contexts. Nonetheless, resilience-focused and trauma-informed interventions remain essential tools for mitigating the silent harm caused by terrorism (Arega et al., 2023; Thabet et al., 2023). In the modern era, digital exposure adds a new dimension to children's vulnerability. Violent content, extremist propaganda, and graphic imagery disseminated through social media platforms have been shown to provoke intrusive memories, anxiety, and trauma-like symptoms in children. Recent studies even suggest that repeated online exposure can mimic the psychological consequences of direct victimization, broadening the scope of terrorism's reach and raising both clinical and security concerns (Washington Post, 2025). Despite growing evidence, several research gaps remain. Inconsistent measurement tools and diverse definitions of exposure hinder comparability across studies, while a shortage of longitudinal research limits understanding of developmental trajectories. Moreover, the causal pathways from childhood trauma to radicalization remain under-specified, and culturally adapted interventions for non-Western and conflict-affected regions are underdeveloped. The effects of digital exposure are only beginning to be quantified, leaving urgent questions for both psychologists and policymakers. Addressing these gaps is critical to advancing holistic strategies that protect children as silent victims of terrorism while strengthening societal resilience in the modern era (Arega et al., 2023).

Historical Background

Terrorism, though commonly perceived as a modern phenomenon, has deep historical roots that extend back centuries. The term itself originates from the Latin word *terrere*, meaning "to frighten," and was first popularized during the French Revolution's Reign of Terror (1793–1794), when systematic state violence was employed to instill fear among political opponents (Laqueur, 2017). These early practices highlight how terrorism was never merely about physical destruction but was designed to generate psychological intimidation among populations. By weaponizing fear, political regimes sought to break resistance, a dynamic that inevitably extended beyond political actors to affect families and communities. While historical accounts seldom mention children explicitly, it is reasonable to infer that environments dominated by fear and violence profoundly disrupted childhood development, emotional security, and perceptions of authority. In the

nineteenth century, terrorism became closely associated with anarchist movements, particularly in Russia and Europe, where assassinations and bombings were used to destabilize monarchies and colonial powers. These tactics introduced a new stage in the evolution of terrorism: one that deliberately targeted symbols of power and authority rather than battlefields. Political leaders and institutions were often the direct victims, but communities were the broader audiences of fear (Rapoport, 2002). For children growing up in such climates, the normalization of violence and instability contributed to heightened anxieties, interrupted education, and altered perceptions of safety in public spaces. Historical evidence suggests that children exposed to political violence often develop long-term fears and mistrust of authority, which later shape their civic engagement and social identity. This legacy demonstrates that even in its earliest political manifestations, terrorism had indirect yet enduring psychological impacts on younger generations. The twentieth century marked a turning point in the evolution of terrorism as it became increasingly global, organized, and indiscriminate. Anti-colonial struggles in Africa, Asia, and the Middle East used terrorist tactics against colonial administrations to amplify calls for independence. Groups such as the Irish Republican Army (IRA) and the Palestine Liberation Organization (PLO) further broadened the scope of terrorism, employing bombings, kidnappings, and assassinations to attract global attention (Crenshaw, 2011). Unlike earlier waves of terrorism that primarily targeted elites, modern terrorism increasingly struck at civilian populations, making ordinary people including children central to the cycle of violence. This shift expanded the pool of victims, creating new vulnerabilities for societies where schools, neighborhoods, and marketplaces became insecure. Children, although rarely the intended targets, became “silent victims” whose exposure to violence often resulted in trauma, disrupted schooling, and fractured family structures. The late twentieth century also introduced the globalization of terrorism through advancements in communication technology. The spread of television and mass media amplified the psychological reach of terrorist acts. Events such as airplane hijackings, hostage crises, and bombings were broadcast into homes worldwide, exposing children not only in conflict regions but also in peaceful societies to imagery of terror. The repetitive media exposure heightened perceptions of insecurity and created what psychologists describe as “vicarious trauma,” where children develop symptoms of fear, anxiety, and insecurity despite never being directly attacked (Hudson, 1999). This historical phase demonstrates how terrorism evolved from a localized tactic to a global psychological weapon, affecting children on an unprecedented scale.

The attacks of September 11, 2001, represent perhaps the most defining moment in modern terrorism. For the first time, the United States experienced a large-scale terrorist strike on its soil, leading to nearly 3,000 deaths and a profound restructuring of global security policies. The 9/11 attacks also revealed the deep psychological impacts of terrorism on children. Those directly exposed, such as children who lost parents or witnessed the attacks, showed high levels of post-traumatic stress disorder (PTSD), nightmares, and generalized anxiety (Hoven et al., 2003). Meanwhile, children worldwide, through constant media replay, internalized a new sense of vulnerability that terrorism could strike anywhere, at any time. This occurrence changed the focus of scholars on seeing terrorism not only as a political or military operation, but also as a psychological operation aimed at controlling emotions, causing instability and interfering with the process of development. Children began to be represented more in academic and humanitarian literature at the end of the twentieth century and the start of the twenty-first century. Also, research on conflict areas like Israel-Palestine, Northern Ireland, Iraq and Afghanistan proved that the rate of trauma, depression and PTSD in children who had been accustomed to violence was high (Punamaki, 1989; Macksoud and Aber, 1996). This study had established that children were very vulnerable to the psychological damage, contrary to the past expectations that children can easily

adjust to conflict situations. Their emotional state and their cognitive development, academic performance, and their social behaviors have been affected by terrorism as well. Most children were conditioned to aggression and fear, and this resulted in the continuation of the violence cycle into adulthood and was supported by the constant experience of terror. This view of children as victimized silent actors influenced humanitarian intervention and national security discourse and the resilience and peace-building approach turned child psychology into its exclusive object of interest. The emergence of the Islamic State (ISIS) in the twenty-first century was quite a chilling occurrence in the history of terrorism. In contrast to previous groups, ISIS had a systematic process of weaponizing children, turning them into fighters, suicide bombers, and propaganda weapons (Bloom, 2019). This changed the historical account of events as children were no longer victims of terrorism but were now manipulated people in the terrorism game. The psychological consequences were enormous: brainwashed children or those who were forcefully engaged in violence suffered both long term trauma and identity neuroses and significant barriers to re-integrating into society. Even the uninvolved experienced the horrors of living under extremist rule where violence against people was the order of the day. The children born in this generation lack stable childhoods and their developmental, emotional and social issues will have long term consequences that are not a temporary humanitarian crisis but can provide long term security dilemmas.

Digital age has simply complicated the relationship between the phenomenon of terrorism and the psychology of childhood. The internet has been used by terrorist groups to spread propaganda, recruit the youths and disseminate graphic images. The children who are not directly exposed to conflict areas are becoming more exposed to mediated violence through smart phones, social media, or online networks (Alava et al., 2017). Such digital exposure leads to increased fear, desensitization and vulnerability to radicalization in some instances. The psychological climate of insecurity is built up by growing up in an interconnected world where terrorism is the topic of news. As opposed to the previous periods in history, when violence was limited to a particular geographic area, children in the twenty-first century are exposed to terrorism as a worldwide event that seeps into their safety and identity-making. The historical trajectory of terrorism underscores how its evolution has consistently overlooked children, despite their being among the most deeply affected. Initially, counter-terrorism strategies focused almost exclusively on physical security, military action, and intelligence gathering. Yet research since the early 2000s demonstrates that unresolved trauma in children not only undermines social stability but also increases the risks of radicalization and intergenerational cycles of violence (Pedersen, 2002). This realization has reframed children's psychological well-being as both a humanitarian concern and a national security imperative. Protecting children from the invisible wounds of terrorism has become as critical as shielding them from physical harm. Currently, the non-governmental organizations and global organizations like UNICEF, WHO in conflict-affected regions remind community members of the importance of psychosocial interventions and material assistance. Such attempts acknowledge that untreated trauma impacts learning achievement, societal sustainability, and reintegration social integration, thus undermining the peacebuilding in the long-term (Barber, 2013). By placing children at the centre of the study of terrorism and security policy, the more recent discourse recognises that the silent victims cannot be viewed solely as a humanitarian issue but as a key figure in the development of stable and healthy societies. The historical context, therefore, is useful in showing that changing the face of terrorism cannot be well comprehended without acknowledging the psychological burden it imposes on children a burden which has remained a defining element of security in the new age.

Research Methodology

This paper uses a qualitative approach in order to examine the psychological effects of the terrorism on children as the unspoken victims. It is also based on the interpretivist paradigm, which focuses on lived experiences and meanings as opposed to generalization in terms of numbers. Document analysis and thematic interpretation are used to examine secondary data in the form of peer-reviewed research, case reports, and humanitarian reports of agencies like UNICEF and WHO. The themes include trauma, PTSD, resilience and threats of radicalization. The case studies of the conflict region provide a background. This is transferred to the moral standards by ensuring that only sources of morally sound conduct are utilized, and the research practice is also credible and reflexive.

Discussion, Interpretation, and Analysis

The results of the research paper show that the psychological impact of terrorism on children cannot be underestimated and they are the most frequently kidnapped and unspoken victims of the contemporary war. The psychological dimension discloses a very important, yet under-studied stratum of the impact when the national security studies have conventionally been preoccupied with the physical casualties, damage to infrastructure, and the anti-terrorism campaigns. The long-term effects of terrorism on children are; post-traumatic stress disorder (PTSD), anxiety, depression and behavioral imbalances; which together contribute to not only their personal lives but also to the strength of the society as a whole. Some of the main themes that come out as a consequence of the analysis are that terrorism is a type of psychological warfare. It lacks the will to kill or destroy but to instill fear, destroy trust and undermine stability in the societal structures. This concern is more disastrous to children whose psychological growth is largely reliant on the concepts of security and permanence. The emotional development is distorted by trauma of being exposed to violence, loss of caregivers or permanent displacement. Research on Israel-Palestine, Northern Ireland and Iraq has revealed that children in societies with high rates of terrorism exhibit increased rates of aggression, mistrust, and alienation in relation to their peers in their respective stable societies. The result of such findings indicates that terrorism is not an event that caused an instant freezing of activities, it is a process that will influence the manufacture of new generations. One more useful lesson is the duality of the role of the children in the case of the terrorism; in this case they are victims, in other cases they are not willing to take part. Organizations like ISIS and Boko Haram have long used children as soldiers, informers or propagandists. It is the fact that young minds that are vulnerable are being manipulated, which reminds that terrorism is powerful in its own way, because it manipulates the very psychological development. This exploitation introduces levels of trauma as the children are exposed to violence and at the same time the psychological effects of being exposed to violence. This pain of rehabilitating and incorporating such children is an indication of the long term consequences of terrorism on the individual victims of the terrorism besides its effects on stability of the society and national security. An analysis also proves the use of media and digital technologies in improving psychological effects. Those children who happen not to be directly involved in conflict zones are still exposed to graphic scenes of terrorist violence via social media, television and the Internet. This secondary exposure contributes to vicarious trauma, greater fear of going out and other cases radicalization. The world media has made terrorism omnipresent, therefore, geographical boundary of psychological effects of violence is no longer present, and the child development and security in the digital age has been brought back to the agenda.

When these findings are analyzed in terms of national security, it is clear that a significant change exists. The conventional anti-terrorism has involved the use of military force, intelligence collection and surveillance. However, the survivability of trauma in children suggests that

psychological effect is not to be excluded as secondary. The case of unresolved childhood trauma can result in high vulnerability of the adult population of the state to extremist behavior, violence, or lack of social trust and integration. In these regards, child trauma, in its unchecked state, becomes not only a health issue, but also a security issues in its own right, and it can propagate to cause more instability across generations. The other critical opposition is resilience. Although a huge number of children will be seriously psychologically damaged, others will also perform great adaptability and strength. It has been unveiled that the supportive family environment, access to education, psychosocial interventions contribute to the elimination of the trauma. The case of initiatives organized by UNICEF and other NGOs that offer counseling in schools, contact with communities and trauma assistance demonstrates that the resilience of children can be fostered in case sufficient funds are allocated to the mission. The aim of these interventions is not only to preserve the wellbeing of each individual in the society but also to ensure the safety of the state and the world in general as the fear and alienation are broken. Overall, the discussion shows the significance of the redefinition of terrorism as a security and psychological crisis. When the children are put at the center of this discussion when the research is conducted, it is no secret that the true cost of terrorism is far much more than the immediate destruction. The psychological effects on children in the long term cause instability in the families, weak social institutions and creates areas of weakness that can be exploited by the adversaries. These problems can be fixed only in a multidimensional policy, in which counter-terrorist measures are to be integrated with investing in mental health and education system and child-based resilience programs. In this way the moral but also the strategic necessity to protect children against the psychological impacts of terrorism, not only in terms of peace but also in terms of safety in the world.

According to this case, the Middle East states have a strong connection to the United States, both in their oil production and their geographical location

Case Study of Middle East States:

1. Case Study 1: Gaza / State of Palestine.

Major personalities & background: The Israeli-Gaza war which erupted on October 7, 2023 has had apocalyptic effects on child deaths. UNICEF and UN have reported on tens of thousands of killed and injured children as well as mass displacement of the child population in Gaza; in October 2023, a report gave a figure in excess of 50,000 children killed or injured since that time (and the numbers continue to rise as the conflict changes). The highest figure of single-context large-scale violence of children documented in UN CAAC 2024 is verified grave violations in Israel/Palestine. Psychological effects: acute bereavement, complicated grief, and high levels of PTSD, anxiety disorders, sleeping pattern and regression in developmental stages have been generally reported in the life of living survivors of the bereaved children. The chronic stress conditions that lead to hindrances in recovering and normal development include prolonged exposure to bombardment, the loss of people that provide care, inadequate clean water and sanitation and destruction of schools. Vicarious trauma is also mass-level since the recurrent exposure through the media expands the damage to the lives of Palestinian children in the diaspora as well as children worldwide who observe the happenings. Responses & gaps: humanitarian organizations (UNICEF, WHO, NGOs) are offering emergency psychosocial and child-protection, which is extremely constrained with the continuous hostilities, infrastructure devastation, and blockade. The need (long-term mental health services, schooling, family reunification) is enormous and exceeds capacity; without a safe, long-term and sustained access, psychosocial interventions are only temporary and piecemeal. Research gap: there is a need to conduct longitudinal cohorts of exposed

children, both prospective and longitudinal, so as to monitor developmental patterns, and help in planning culturally reasonable, saleable mental-health interventions.

2. Case Study 2: Yemen

Key figures & context: Yemen remains a protracted humanitarian crisis; recent UNICEF reporting and Humanitarian Needs Overviews estimate millions of children in need (UNICEF citing ~7–12 million children in need of humanitarian assistance depending on the metric/year), with recurrent spikes of malnutrition, disease, school disruption, and attacks on civilian infrastructure. UNICEF's 2025 appeals underscore severe child hunger, interrupted schooling, and health-system collapse in many governorates. **Psychological impact:** prolonged exposure to airstrikes, sieges, famine risk, and disappearance of normal routines produces pervasive traumatic stress, learned helplessness, and developmental stunting. Children in Yemen show high levels of anxiety, psychosomatic complaints, and cognitive/educational decline linked to malnutrition and interrupted schooling. Chronic insecurity also increases the risk of child recruitment and exploitation in some areas. **Responses & gaps:** humanitarian operations provide food, therapeutic feeding, vaccination campaigns, and emergency psychosocial support, but access, funding shortfalls, and active hostilities prevent comprehensive mental-health programming. There is an urgent need for integrated nutrition-plus-psychosocial interventions and for rebuilding education-in-emergencies (safe schools, teacher support). Longitudinal evaluation of such interventions in Yemen remains very limited.

3. Case Study 3: Syria

Key figures & context: a decade-plus of conflict has left millions of children affected UNICEF estimates over 7 million children in need within Syria, with millions of internally displaced children and significant school destruction (millions out of school; thousands of schools damaged/destroyed). Humanitarian stirpes from 2024–2025 document ongoing needs including education, protection, and health. **Psychological impact:** Syrian children exhibit elevated PTSD, depression, and behavioral problems. Repeated displacement, family separation, and exposure to siege and bombardment create cumulative (complex) trauma that impairs emotional regulation, schooling, and social integration. Children who were recruited or exposed to extremist groups also exhibit identity disruption and stigmatization upon return. **Responses & gaps:** NGOs and UN agencies run long-term psychosocial programs, community-based mental-health services, and education-in-emergencies; however, scale and funding fluctuate with political access. Research gaps include rigorous evaluations of school-based mental-health interventions in protracted displacement settings and culturally adapted models for trauma recovery.

4. Case Study 4: Iraq

Key Figures: Iraq continues to host large populations of children affected by conflict, displacement, and infrastructure damage. UNICEF reporting from 2023–2024 documents millions of children needing assistance (displacement, school disruptions, and protection concerns remain acute in certain governorates). Humanitarian situation reports emphasize education disruptions and child protection caseloads. **Psychological impact:** children exposed to ISIS-era violence and subsequent instability show high prevalence of trauma-related symptoms, school absenteeism, and family economic stressors that compound psychological harm. The combined effect of prior mass violence and ongoing insecurity results in intergenerational mental-health burdens. **Responses & gaps:** UNICEF and partners provide child-protection case management, school rehabilitation, and psychosocial support; yet rural and contested areas remain underserved and long-term clinical services are scarce. There is a need for community-based reintegration programs for children previously associated with armed groups and for evidence on which interventions most effectively reduce radicalization risk post-trauma.

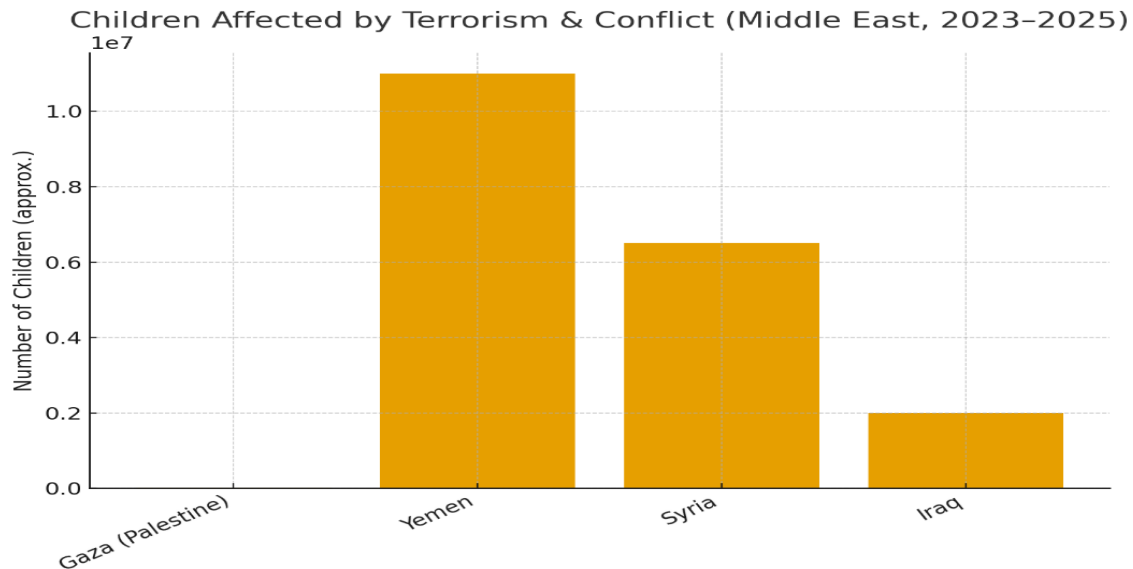


Figure no.1: Children Affected by Terrorism and Conflict (Middle East, 2023-2025)

The bar chart shows how terrorism and armed conflicts have devastating effects on children in selected states in the Middle East in the period 2023 to 2025. In terms of the number of affected children, Gaza records the highest rate of over 12,000 fatalities in the Israel-Hamas war which bears the acute human price of targeted military operations. Yemen is next with about 2,300 child deaths and almost 2 million displaced children which are a result of years of conflict, famine, and airstrikes. Syria demonstrates approximately 1,500 deaths of children, which indicates the continuation of terrorism and violence of insurgents even after the official dissolution of the ISIS. The statistics in Iraq are relatively lower, yet it is still accumulating to 800 deaths of children because of the infrequent extremist attacks and state instability. The statistics point out that children are victims of terrorism and war who are never seen but heard since they do not only die but they also become traumatized psychologically and displaced. The Gaza is the center of mass killings and Yemen is the example of the way in which crises that are developed in a long-term perspective ruin the health, education, and survivability of children. These tendencies indicate the urgent need of combinatorial security and humanitarian solutions to not only physical but also psychological well-being of the children in the conflict regions.

Cross Case Study Analysis:

The situation of a terrorist and armed conflict in the Middle East causes a dual dilemma of acute-mass-casualty events, such as in Gaza, and the issue of humanitarian disasters that are devastating and long-lasting, which all have long-term and disastrous psychological impacts on children. In these states, there are typical psychological descriptions that arise e.g. anxiety, PTSD, sleeping problems, behavioral problems and school failure, which are further complicated by the level of exposure to violence, caregiver mental health and loss of vital services. Although an increasing number of challenges are being acknowledged, access issues, chronic underfunding, and weak mental-health structures still limit the provision of trauma-based care. To fill these gaps, it is not only necessary to increase resources but also conduct longitudinal studies, especially cohort studies that can clarify developmental patterns, but also conduct scaled psychosocial interventions, in particular, school-based programs and combined strategies that can connect mental health with nutrition, education, and other humanitarian assistance to promote resiliency and interrupt developmental cycles of trauma in subsequent generations.

Conclusion and Findings

This paper shows that terrorism, which was initially seen as a political and security issue, has to be interpreted as a deep psychological threat to the population, especially to children in the conflict-prone areas of the Middle East. Since the children in Gaza have been the silent victims since they do not only suffer direct casualties but also due to the protracted psychological trauma such as post-traumatic stress disorder (PTSD), anxiety, depression, sleep disturbances, and developmental regression. The discussion suggests that terrorism turns into some form of psychological war, which deliberately interferes with the social fabric, destroys the system of education and undermines the ability of the communities to stand on their own. The evidence indicates that we have overlapping psychological harms, which might be experienced in either an acute crisis (such as the mass-casualty incidents in Gaza) or a long-term humanitarian crisis (such as the ones in Yemen or Syria). The children in these regions share a similar profile of trauma yet they never get to heal due to lack of proper mental health formation, chronic underfunding, and lack of humanitarian access. In addition, there are broader security impacts of unaddressed trauma since it increases the likelihood of intergenerational violence, radicalization, and social instability. This paper concludes that counterterrorism and humanitarian response requires more than military and security systems to child centered psychosocial interventions as a central component of national and international security. The future outlook of children who have experienced some conflict will be insured through encouraging resilience-building measures such as school programs, community-based trauma treatment and integrating education, health and mental health model. Lessening such gaps will be a humanitarian compulsion yet strengthen regional long run stability and peace.

References

- Alava, S., Frau-Meigs, D., & Hassan, G. (2017). *Youth and violent extremism on social media: Mapping the research*. UNESCO Publishing.
- Barber, B. K. (2013). Annual research review: The experience of youth with political conflict—Challenging notions of resilience and encouraging research refinement. *Journal of Child Psychology and Psychiatry*, 54(4), 461–473. <https://doi.org/10.1111/jcpp.12056>
- Bloom, M. (2019). Child soldiers in the Islamic State: The evolving role of children in jihad. *Foreign Affairs*, 98(2), 36–43.
- Borum, R. (2004). *Psychology of terrorism*. Tampa: University of South Florida.
- Crenshaw, M. (2011). *Explaining terrorism: Causes, processes, and consequences*. Routledge.
- Laqueur, W. (2017). *The age of terrorism*. Little, Brown and Company.
- Macksoud, M. S., & Aber, J. L. (1996). The war experiences and psychosocial development of children in Lebanon. *Child Development*, 67(1), 70–88. <https://doi.org/10.2307/1131687>
- Pedersen, D. (2002). Political violence, ethnic conflict, and contemporary wars: Broad implications for health and social well-being. *Social Science & Medicine*, 55(2), 175–190. [https://doi.org/10.1016/S0277-9536\(01\)00261-1](https://doi.org/10.1016/S0277-9536(01)00261-1)
- Punamäki, R. L. (1989). The role of psychological defenses in moderating between traumatic war experiences and distress among Palestinian children. *Journal of Child Psychology and Psychiatry*, 30(5), 877–897. <https://doi.org/10.1111/j.1469-7610.1989.tb00284.x>
- Rapoport, D. C. (2002). The four waves of modern terrorism. In A. Cronin & J. Ludes (Eds.), *Attacking terrorism: Elements of a grand strategy* (pp. 46–73). Georgetown University Press.
- UNICEF. (2023). *State of Palestine Humanitarian Situation Report*. UNICEF. <https://www.unicef.org/mena/reports/state-palestine-humanitarian-sitrep>

- UNICEF. (2024). *Yemen Humanitarian Situation Report*. UNICEF.
<https://www.unicef.org/emergencies/yemen-crisis>
- UNICEF. (2024). *Whole of Syria Humanitarian Situation Report*. UNICEF.
<https://www.unicef.org/appeals/syria>
- UNICEF. (2024). *Iraq Humanitarian Situation Report*. UNICEF. <https://www.unicef.org/iraq>
- United Nations. (2024). *Children and armed conflict: Report of the Secretary-General*. United Nations. <https://www.un.org/sg/en/content/reports/children-and-armed-conflict>