



EVALUATING DERADICALIZATION FRAMEWORKS: A COMPARATIVE ANALYSIS OF PAKISTAN AND SAUDI ARABIA

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Abstract

Deradicalization plays a vital role in countering violent extremism (CVE) by supporting the rehabilitation and reintegration of individuals influenced by extremist ideologies. Different countries adopt context-specific strategies—Pakistan relies mainly on militarized efforts, while Saudi Arabia implements a structured Prevention, Rehabilitation, and Aftercare (PRAC) model. This study compares both approaches, evaluating their effectiveness, strengths, and limitations. It identifies best practices that could inform improvements in Pakistan's CVE programs, advocating for a more holistic strategy that incorporates psychological, social, and religious dimensions. The findings offer insights for developing sustainable, evidence-based deradicalization policies.



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INTRODUCTION

Radicalization remains a significant security concern in both Pakistan and Saudi Arabia, driven by socio-political, economic, and ideological factors. While Pakistan has focused on military-led deradicalization initiatives, Saudi Arabia has developed a comprehensive rehabilitation and reintegration framework. This paper critically analyzes the effectiveness of both strategies and explores potential lessons that Pakistan can adopt from Saudi Arabia's PRAC model.

The rise of violent extremism has posed a significant threat to global security, prompting governments to develop counter-violent extremism (CVE) strategies aimed at mitigating radicalization and rehabilitating individuals who have engaged in extremist activities. Deradicalization, a crucial component of CVE, involves structured interventions that seek to disengage individuals from radical ideologies and reintegrate them into mainstream society (Neumann,

2010). While various countries have implemented deradicalization programs, the effectiveness of these approaches largely depends on their socio-political contexts, strategic frameworks, and long-term sustainability (Rabasa et al., 2010).

Pakistan and Saudi Arabia have adopted distinct methodologies in their efforts to counter radicalization. Pakistan's counterterrorism (CT) measures have historically been military-centric, focusing on eliminating terrorist networks through force rather than addressing the underlying ideological, psychological, and socio-economic drivers of radicalization (Khan, 2015). This heavy reliance on coercive measures has often led to temporary success but has failed to provide a sustainable pathway for reintegration and long-term peace (Abbas, 2019). In contrast, Saudi Arabia has developed a comprehensive and structured deradicalization framework, known as the Prevention, Rehabilitation, and Aftercare (PRAC)



model. This approach incorporates psychological counseling, religious re-education, vocational training, and post-release monitoring to facilitate the successful reintegration of former extremists (Boucek, 2008).

Despite these efforts, both countries continue to face challenges in fully neutralizing the threat of extremism. Pakistan struggles with the absence of a standardized deradicalization framework and a lack of coordination among government agencies, religious institutions, and civil society organizations (Mir, 2020). Meanwhile, Saudi Arabia's PRAC model, though widely recognized for its success, has faced criticism regarding its long-term effectiveness and its applicability in non-authoritarian contexts (Al-Saud, 2019). A comparative analysis of these two models provides valuable insights into the strengths and weaknesses of each approach, offering lessons that could inform the development of more effective and sustainable deradicalization programs in Pakistan.

This study aims to conduct a comparative analysis of the deradicalization strategies implemented in Pakistan and Saudi Arabia to identify best practices and areas for improvement. By examining key elements such as religious re-education, psychological interventions, community involvement, and post-rehabilitation support, the research seeks to develop evidence-based recommendations for enhancing Pakistan's countering violent extremism (CVE) framework.

Objectives of the Study

1. To analyze the effectiveness of religious scholars' involvement in deradicalization programs in both Pakistan and Saudi Arabia.
2. To assess the role of psychological interventions in rehabilitating individuals affected by radicalization.
3. To evaluate the impact of community engagement initiatives on reintegrating former extremists into society.
4. To examine post-rehabilitation monitoring and support mechanisms in both countries to determine their effectiveness.
5. To identify policy gaps in Pakistan's deradicalization framework and propose actionable recommendations for a more comprehensive and sustainable strategy.

Rationale of the study: The global rise of violent extremism has led to the development of various counter-violent extremism (CVE) strategies, with deradicalization playing a crucial role in disengaging individuals from extremist ideologies and reintegrating them into society (Neumann, 2013). While numerous countries have adopted rehabilitation programs, the effectiveness of these measures depends on their adaptability to the socio-political and cultural contexts of each region (Horgan, 2009). Saudi Arabia and Pakistan have implemented distinct deradicalization approaches, yet the success and limitations of these models require further comparative analysis.

Pakistan's counterterrorism efforts have been predominantly military-driven, with a reactive rather than proactive approach to deradicalization (Abbas, 2019). While certain rehabilitation programs, such as the **Sabaoun Center**, have been established, their effectiveness remains questionable due to a lack of standardized frameworks and limited post-release monitoring (Mir, 2020). On the other hand, Saudi Arabia has developed a **structured and holistic deradicalization model**, the **Prevention, Rehabilitation, and Aftercare (PRAC) strategy**, which focuses on psychological counseling, religious re-education, and vocational reintegration (Boucek, 2008). Although Saudi Arabia's approach has been widely recognized, some scholars argue that its success is contingent upon the country's **political structure and centralized religious authority** (Ghosh et al., 2017).

This study is significant because a **comparative analysis of Pakistan and Saudi Arabia's deradicalization programs can identify best practices, highlight gaps, and propose policy recommendations** for more effective, sustainable CVE strategies in Pakistan. Examining how **religious discourse, psychological rehabilitation, and community reintegration** contribute to successful deradicalization will help develop an adaptable model that aligns with Pakistan's socio-political realities.

Literature Review

Radicalization stems from a combination of ideological indoctrination, socio-economic grievances, and political instability (Gunaratna, 2011). Successful deradicalization programs address



these root causes by integrating psychological counseling, religious re-education, and vocational training (Boucek, 2008).

Understanding Deradicalization and Counter-Violent Extremism (CVE)

Deradicalization refers to the systematic efforts aimed at disengaging individuals from extremist ideologies and reintegrating them into mainstream society. It is a critical component of Counter-Violent Extremism (CVE) strategies worldwide (Horgan, 2009). Various studies highlight that successful deradicalization programs incorporate psychological interventions, religious re-education, vocational training, and community support mechanisms (Rabasa et al., 2010). The effectiveness of these programs depends on their ability to address the root causes of radicalization, such as socioeconomic grievances, political instability, and ideological indoctrination (Neumann, 2013).

Several countries have implemented CVE initiatives tailored to their specific socio-political contexts. While some nations emphasize security-driven approaches, others prioritize rehabilitation and reintegration (Ashour, 2009). The literature underscores that a holistic strategy—integrating both coercive and non-coercive measures—yields the most sustainable results (Silke, 2011). The following sections explore the deradicalization efforts in Pakistan and Saudi Arabia, highlighting their methodologies, effectiveness, and areas for improvement.

Pakistan's Approach to Deradicalization

Pakistan's counterterrorism strategy has historically been military-centric, focusing on kinetic operations to eliminate terrorist threats. While these efforts have been effective in neutralizing militant networks, they have not adequately addressed the ideological and psychological aspects of radicalization (Abbas, 2019). The country has implemented various rehabilitation programs, such as the **Sabaoon Center in Swat**, which was designed to rehabilitate young extremists through education, vocational training, and psychological counseling (Mir, 2020). However, these initiatives remain fragmented and lack a standardized national framework.

Scholars argue that Pakistan's deradicalization efforts face multiple challenges, including the absence of long-term aftercare programs, insufficient

involvement of religious scholars, and limited community engagement (Khan, 2015). Moreover, political instability and inadequate funding have further hindered the expansion and sustainability of these programs (Rana, 2018). The literature suggests that incorporating non-coercive measures, such as religious re-education and family support, could enhance the effectiveness of Pakistan's CVE strategy (Yousufzai & Ghulam, 2021).

Pakistan's primary deradicalization initiatives include the Deradicalization and Emancipation Program (DREP), established in Swat and Punjab, with a focus on vocational training and psychological counseling (Basit, 2015). However, these programs lack structured aftercare support, increasing the risk of recidivism.

Saudi Arabia's PRAC Model: A Structured Deradicalization Framework

Saudi Arabia's **Prevention, Rehabilitation, and Aftercare (PRAC) model** is widely regarded as one of the most comprehensive deradicalization programs globally. It combines psychological counseling, religious dialogue, vocational training, and post-release monitoring to rehabilitate extremists and reintegrate them into society (Boucek, 2008). The **Mohammed bin Nayef Counseling and Care Center** is a flagship institution under this program, providing ideological reorientation and socio-economic reintegration opportunities for former extremists (Al-Saud, 2019).

Empirical studies indicate that the PRAC model has achieved notable success in reducing recidivism rates among former extremists (Hegghammer, 2010). However, some researchers question its long-term effectiveness, particularly in the absence of democratic governance and open civil discourse (Ghosh et al., 2017). Critics argue that while the Saudi model offers short-term rehabilitation, it does not fully address the broader political and social drivers of radicalization (Al-Zayyat, 2019). Nevertheless, elements of the PRAC model, such as religious re-education and family involvement, have been identified as valuable components that could be adapted in other contexts, including Pakistan (Rabasa et al., 2010).

Saudi Arabia's PRAC strategy is recognized for its multi-faceted approach, integrating preventive measures, rehabilitation programs, and post-release



support to ensure long-term reintegration (Casptack, 2015). The program's success is attributed to its emphasis on religious re-education and psychological therapy.

Comparative Analysis: Lessons for Pakistan

A comparative review of Pakistan's and Saudi Arabia's deradicalization programs reveals key differences in their approaches. Pakistan's reliance on military action has limited the scope of its rehabilitation efforts, whereas Saudi Arabia's PRAC model incorporates multi-faceted interventions to address ideological transformation and social reintegration (Boucek, 2008; Mir, 2020). One of the major strengths of the Saudi approach is its structured aftercare support, which helps prevent re-radicalization—a component largely missing in Pakistan's strategy (Abbas, 2019).

Moreover, the role of religious scholars in Saudi Arabia's program is significant, as they provide theological counter-narratives to extremist ideologies (Al-Saud, 2019). In contrast, Pakistan has struggled with leveraging religious discourse effectively due to the presence of sectarian divides and extremist sympathies within certain religious institutions (Yousufzai & Ghulam, 2021).

Based on this comparative analysis, researchers suggest that Pakistan could benefit from adopting key aspects of the PRAC model, particularly in terms of **structured rehabilitation programs, religious counter-narratives, and comprehensive post-release support systems** (Ghosh et al., 2017). However, given Pakistan's unique socio-political landscape, these elements would need to be adapted to local realities, ensuring that deradicalization efforts are **context-sensitive, community-driven, and sustainable** (Neumann, 2013).

The literature on deradicalization highlights the importance of integrating security measures with rehabilitation and reintegration efforts. While Saudi Arabia's PRAC model offers valuable insights, Pakistan's counterterrorism strategy requires significant reforms to develop a sustainable deradicalization framework. Future research should focus on designing **localized, evidence-based CVE programs** that address Pakistan's unique challenges, leveraging **community engagement, religious**

discourse, and socio-economic reintegration as key pillars of its deradicalization efforts.

Research Questions

1. How do Pakistan and Saudi Arabia's deradicalization strategies differ in their approach, implementation, and effectiveness?
2. What are the strengths and weaknesses of Saudi Arabia's PRAC model, and how can Pakistan adapt similar elements to enhance its CVE strategy?
3. What role do **religious scholars, psychological counseling, community support, and post-release monitoring** play in the success of deradicalization programs?
4. How can Pakistan transition from a **military-centric counterterrorism** strategy to a more **rehabilitation-focused** deradicalization framework?

Research Objectives

1. To examine **Pakistan's existing deradicalization initiatives**, assessing their **effectiveness, challenges, and limitations**.
2. To analyze Saudi Arabia's **PRAC model**, identifying key components that contribute to **successful extremist rehabilitation**.
3. To compare **Pakistan and Saudi Arabia's CVE strategies** and evaluate their **short-term and long-term outcomes**.
4. To assess the role of **religious scholars, psychological counseling, vocational training, and community reintegration** in deradicalization efforts.
5. To provide **policy recommendations** for improving Pakistan's deradicalization strategy by integrating **non-coercive rehabilitation measures**.

Hypothesis

- **H₀ (Null Hypothesis):** There is no significant difference in the effectiveness of deradicalization strategies between Pakistan and Saudi Arabia.
- **H₁ (Alternative Hypothesis):** Saudi Arabia's structured PRAC model is **more effective** in deradicalization, and reintegration compared to Pakistan's **military-centric approach**, and



adopting key elements from PRAC can enhance Pakistan's CVE strategy.

Theoretical Background

Deradicalization is deeply rooted in **criminological, psychological, and sociological theories** that explain radicalization and disengagement from extremist ideologies. This study draws upon the following theoretical frameworks:

1. Social Learning Theory (Bandura, 1977)

Social Learning Theory suggests that individuals adopt behaviors and beliefs through **observation, imitation, and reinforcement** from their environment (Bandura, 1977). Extremist ideologies are often learned through **social networks, online propaganda, and extremist groups** (Horgan, 2009). Deradicalization programs that provide **alternative social models, such as positive community engagement and religious re-education, can help reverse radicalization** (Neumann, 2013). Saudi Arabia's PRAC model incorporates **mentorship and social support**, reinforcing new behaviors through **structured rehabilitation**.

2. Disengagement Theory (Horgan, 2009)

Disengagement Theory differentiates between **behavioral disengagement (leaving extremist groups) and cognitive disengagement (abandoning radical ideologies)** (Horgan, 2009). Successful deradicalization programs must address both components, offering **psychological counseling, religious counter-narratives, and vocational reintegration** (Rabasa et al., 2010). Saudi Arabia's PRAC model **integrates these factors, whereas Pakistan's approach lacks systematic cognitive rehabilitation**.

3. Strain Theory (Merton, 1938)

Strain Theory posits that individuals resort to deviant behavior, including extremism, when they experience **social and economic inequalities** (Merton, 1938). **Marginalization, unemployment, and lack of educational opportunities** contribute to radicalization in Pakistan (Khan, 2015). Saudi Arabia's PRAC model **addresses socio-economic grievances by providing employment opportunities for rehabilitated extremists**. Adapting similar

vocational and economic reintegration measures in Pakistan could improve its deradicalization efforts.

4. Psychological Rehabilitation and Religious Re-Education Models

Research suggests that **ideological rehabilitation through religious discourse** is a crucial factor in successful deradicalization (Boucek, 2008). Saudi Arabia employs **state-approved religious scholars** to provide counter-narratives that challenge extremist ideologies (Al-Saud, 2019). However, in Pakistan, **sectarian divisions and the politicization of religious institutions hinder the effectiveness** of such interventions (Yousufzai & Ghulam, 2021). Developing a **neutral, state-supported religious counter-narrative program** could enhance the effectiveness of Pakistan's deradicalization framework.

5. Community Reintegration and Social Identity Theory (Tajfel & Turner, 1986)

Social Identity Theory highlights that individuals derive self-worth from their **group identity** (Tajfel & Turner, 1986). Many radicalized individuals feel **alienated** from mainstream society, making reintegration challenging (Silke, 2011). Saudi Arabia's **aftercare programs focus on social reintegration through family support and employment**, reducing the likelihood of recidivism (Hegghammer, 2010). Pakistan's **lack of structured aftercare mechanisms often leads to re-radicalization**, emphasizing the need for **community-based reintegration strategies**.

This research contributes to the growing discourse on **counterterrorism and deradicalization** by examining the effectiveness of **Pakistan and Saudi Arabia's CVE strategies**. A structured, comparative analysis will identify **policy gaps and best practices** that can inform **evidence-based recommendations** for improving Pakistan's deradicalization framework. By integrating **psychological rehabilitation, religious re-education, and community reintegration**, this study aims to propose a **contextually adaptable, long-term CVE model for Pakistan**.

Research Methodology

This study employs a **qualitative comparative analysis** to examine the deradicalization strategies of Pakistan and Saudi Arabia, assessing their effectiveness, limitations, and potential for adaptation. A **mixed-method approach** incorporating **document analysis,**



expert interviews, and case studies ensures a comprehensive understanding of counter-violent extremism (CVE) efforts in both countries.

Research Design

A comparative case study approach (Yin, 2018) is used to analyze the deradicalization programs of Pakistan and Saudi Arabia, focusing on their structure, implementation, and long-term impact. This design allows for an in-depth examination of policies, rehabilitation methods, and reintegration programs, facilitating a critical evaluation of best practices and policy recommendations.

Sample Selection

A purposive sampling technique (Patton, 2015) is used to select participants and documents relevant to deradicalization efforts in both countries. The study includes:

Government Policies and Reports: Official documents outlining deradicalization frameworks in Pakistan and Saudi Arabia.

Rehabilitation Program Data: Case studies from Pakistan's Sabaoon Center and Saudi Arabia's Prevention, Rehabilitation, and Aftercare (PRAC) program.

Expert Interviews:

Security analysts, policymakers, and academics specializing in counterterrorism and deradicalization. Psychologists and religious scholars were involved in rehabilitation programs.

Formerly radicalized individuals who have undergone deradicalization in either country.

Sample Size

10–15 experts (security analysts, psychologists, and policymakers).

5–7 case studies from Pakistan and Saudi Arabia.

Official documents from government agencies and NGOs.

Data Collection Procedure

A triangulation approach (Denzin, 2012) is used to enhance validity by combining:

Document Analysis:

Review of official reports, policy documents, and scholarly articles on CVE measures in both countries. Analysis of program evaluation reports from rehabilitation centers.

Semi-Structured Interviews:

Conducted with experts, policymakers, religious scholars, and rehabilitation specialists.

Open-ended questions to allow in-depth discussions on program effectiveness and policy gaps.

Interviews are recorded and transcribed for thematic analysis.

Case Studies:

Selected from Pakistan's and Saudi Arabia's rehabilitation centers.

Focus on program structure, success rates, and post-reintegration monitoring.

Comparative evaluation of prevention, rehabilitation, and aftercare components.

Inclusion and Exclusion Criteria

Inclusion Criteria:

Individuals directly involved in deradicalization programs (e.g., psychologists, religious scholars, former extremists).

Policy documents and official reports from government, security agencies, and NGOs.

Case studies published in peer-reviewed journals or government publications.

Exclusion Criteria:

Unverified or anecdotal reports without empirical support.

Extremist propaganda materials that do not contribute to an academic analysis.

Individuals with active extremist affiliations who have not undergone rehabilitation.