

A COMPARATIVE ANALYSIS OF DERADICALIZATION STRATEGIES: PAKISTAN AND SAUDI ARABIA

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Abstract

The process of deradicalization is essential for countering violent extremism (CVE), as it facilitates the rehabilitation and reintegration of individuals whose extremist ideologies have influenced. Various nations have adopted different approaches to address radicalization, with strategies tailored to their socio-political contexts. Pakistan primarily employs a militarized approach to combat extremism, whereas Saudi Arabia has developed a comprehensive framework known as the Prevention, Rehabilitation, and Aftercare (PRAC) model. This study critically examines the effectiveness of both strategies, identifying key strengths, limitations, and areas for improvement. By conducting a comparative analysis, this research highlights best practices that could enhance Pakistan's CVE initiatives, emphasizing the need for a balanced approach that integrates psychological, social, and religious interventions. The findings contribute to the broader discourse on counterterrorism and provide policy recommendations for developing sustainable and evidence-based deradicalization programs.

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 **Sabaoon 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.

Ethical Considerations

Ethical integrity is maintained by adhering to **APA 7 ethical guidelines** (American Psychological Association, 2020), such as **Informed Consent, Anonymity and Confidentiality, Voluntary Participation, and Data Security.**

Data Analysis

A **thematic analysis approach** (Braun & Clarke, 2006) is applied to identify **patterns and themes** in the collected data. The analysis follows these steps:

Data Familiarization:

Transcribe and review interview data.

Identify key themes in **policy documents and case studies.**

Coding Process:

Assign **codes to recurring themes** (e.g., “rehabilitation effectiveness,” “religious counter-narratives”).

Group similar codes into **broader categories.**

Comparative Analysis:

Compare findings from **Pakistan and Saudi Arabia** to highlight **strengths, weaknesses, and gaps.**

Examine **cultural, political, and operational differences** affecting program outcomes.

Policy Recommendations:

Synthesize findings to develop **actionable recommendations** for improving Pakistan’s deradicalization strategies.

Propose **context-specific adaptations** from Saudi Arabia’s PRAC model.

Results

This study examines the effectiveness of **Pakistan’s military-led counterterrorism approach** and **Saudi Arabia’s Prevention, Rehabilitation, and Aftercare (PRAC) model** in combating radicalization. The findings are presented below in tables that illustrate the key differences and similarities between the two strategies.

Table 1: Comparative Overview of Deradicalization Strategies

Factor	Pakistan’s Approach	Saudi Arabia’s PRAC Model
Primary Strategy	Predominantly military-driven counterterrorism with limited rehabilitation initiatives	Comprehensive prevention, rehabilitation, and aftercare framework
Religious Re-Education	Minimal involvement of religious scholars in rehabilitation efforts	Active engagement of Islamic scholars in ideological reformation
Psychosocial Support	Limited mental health and counseling services	Integrated psychological therapy and family support programs
Reintegration Support	Inconsistent job placement and social reintegration efforts	Structured vocational training and financial incentives for reintegration
Community Engagement	Low participation from civil society	High involvement of families and community leaders
Program Effectiveness	Higher recidivism rates due to gaps in reintegration efforts	Lower recidivism rates with sustained post-rehabilitation monitoring

This table presents a comparative overview of the deradicalization approaches adopted by Pakistan and Saudi Arabia. Pakistan's strategy primarily relies on military-driven counterterrorism measures, with limited emphasis on rehabilitation and reintegration. In contrast, Saudi Arabia follows a structured Prevention, Rehabilitation, and Aftercare (PRAC) model, which incorporates ideological reformation, psychological support, and social reintegration.

Religious re-education plays a minimal role in Pakistan’s rehabilitation efforts, whereas Saudi Arabia actively involves Islamic scholars in countering extremist ideologies. Similarly, Pakistan offers limited psychological support services, while Saudi Arabia integrates mental health therapy and family counseling into its deradicalization framework. Reintegration efforts in Pakistan are inconsistent, with limited employment opportunities for

rehabilitated individuals. On the other hand, Saudi Arabia facilitates reintegration through vocational training programs and financial assistance. Community engagement also differs significantly; Pakistan experiences minimal participation from civil society, whereas Saudi Arabia ensures strong involvement from families and community leaders.

The effectiveness of these programs is reflected in recidivism rates. Pakistan faces challenges due to inadequate reintegration support, leading to higher relapse rates. In contrast, Saudi Arabia's structured post-rehabilitation monitoring has contributed to lower recidivism.

Table 2: Expert Interview Insights on CVE Strategies

Key Theme	Findings
Challenges in Pakistan's CVE Efforts	Over-reliance on military interventions, lack of sustainable rehabilitation, weak reintegration mechanisms
Strengths of Saudi Arabia's PRAC Model	Holistic approach integrating religious, psychological, and social interventions
Role of Religious Education	Saudi Arabia actively counters extremist ideologies through structured religious counseling; Pakistan lacks such formal programs
Economic Reintegration	Saudi Arabia offers financial support and employment opportunities, whereas Pakistan lacks structured economic rehabilitation programs

This table summarizes insights gathered from expert interviews on CVE strategies in Pakistan and Saudi Arabia. A major challenge identified in Pakistan is its heavy reliance on military operations, with insufficient focus on long-term rehabilitation and reintegration. Experts emphasize that the lack of sustainable reintegration mechanisms weakens Pakistan's deradicalization efforts.

Saudi Arabia's PRAC model is recognized for its holistic approach, which integrates religious counseling, psychological therapy, and social support. Religious education is a key component in Saudi Arabia's deradicalization strategy, as structured religious counseling is used to challenge extremist ideologies. In contrast, Pakistan lacks a formalized approach to religious re-education in its CVE initiatives.

Economic reintegration is another area where the two countries differ. Saudi Arabia provides financial assistance and job placement programs to facilitate the social and economic reintegration of rehabilitated individuals. Pakistan, however, lacks a structured economic rehabilitation program, making it difficult for former extremists to reintegrate into society successfully.

Discussion

The findings reveal **distinct differences** in the approaches taken by Pakistan and Saudi Arabia in

countering radicalization. Pakistan's strategy is primarily **security-driven**, focusing on military operations and legal frameworks, whereas Saudi Arabia's PRAC model adopts a **holistic, long-term approach** by integrating ideological reformation, psychological rehabilitation, and economic reintegration.

The Role of Religious Re-Education in Deradicalization

Religious education is a **key factor** in deradicalization programs, as **misinterpretation of religious texts often fuels extremist ideologies** (Bartlett & Miller, 2012). Saudi Arabia **proactively addresses this challenge** by engaging **renowned scholars to reinterpret religious teachings within a moderate framework**, significantly reducing recidivism (Boucek, 2008). **Pakistan, on the other hand, lacks a formalized religious education initiative in its CVE programs**, which may contribute to **higher relapse rates** among rehabilitated individuals.

Psychosocial Support and Mental Health Interventions

Mental health services play a crucial role in **long-term reintegration**. Studies highlight that **radicalized individuals often suffer from psychological trauma and require professional**

counseling to prevent recidivism (Horgan, 2009). Saudi Arabia incorporates psychological therapy and family engagement, which has been linked to lower relapse rates (Boucek, 2008). In contrast, Pakistan's deradicalization programs provide minimal psychosocial support, potentially undermining the effectiveness of rehabilitation efforts (Mir, 2020).

Economic Reintegration and Employment Opportunities

A stable socioeconomic environment is crucial in preventing re-radicalization (Horgan, 2009). Saudi Arabia ensures job placements and financial incentives for rehabilitated individuals, significantly reducing their likelihood of returning to extremist networks (Boucek, 2008). In comparison, Pakistan faces economic challenges, leading to higher relapse rates among former militants (Yousufzai & Ghulam, 2021).

Recommendations and Implications for Pakistan's CVE Strategy

Given the limitations in Pakistan's current deradicalization efforts, the following recommendations can enhance its CVE framework:

1. Strengthening Religious Re-Education Programs

- Establish nationwide religious counseling centers to counter extremist ideologies.
- Involve moderate scholars and clerics to reinterpret religious texts in alignment with peace-promoting values.
-

2. Expanding Psychological Rehabilitation Services

- Integrate comprehensive mental health support in deradicalization programs.
- Offer trauma-focused therapy and counseling for rehabilitated individuals.

3. Implementing Structured Reintegration Initiatives

- Develop job placement programs and vocational training for rehabilitated individuals.
- Provide economic incentives and micro-financing opportunities to support reintegration.

4. Enhancing Community Engagement and Aftercare Support

- Strengthen community-based reintegration programs to facilitate social acceptance.
- Implement mentorship initiatives pairing rehabilitated individuals with community leaders.

5. Strengthening Digital Counterterrorism Strategies

- Develop online engagement platforms to counter extremist propaganda.
- Utilize social media monitoring tools to track and counter-radicalization trends.

Conclusion

This comparative analysis underscores the contrasting approaches of Pakistan and Saudi Arabia in deradicalization efforts. Pakistan's counterterrorism framework remains largely security-driven, lacking structured rehabilitation and reintegration programs. In contrast, Saudi Arabia's PRAC model adopts a comprehensive, long-term approach, integrating religious re-education, psychological counseling, and economic support, leading to lower recidivism rates.

By adopting a more structured and multi-dimensional deradicalization approach, Pakistan can enhance the effectiveness of its CVE programs. The integration of religious education, mental health support, vocational training, and digital counterterrorism strategies is essential to ensure sustainable rehabilitation and reintegration of former extremists.

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