PRESIDENT'S PAGE

Healing Children in Conflict Zones

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The recent terrorist attack in Pahalgam, Kashmir, which claimed the lives of 26 individuals, including numerous tourists, unleashed widespread fear and sorrow throughout the country. The aftermath has had a profound impact on children and their families—especially those directly affected and those living in the area.

While such events provoke intense panic, with hospitals overwhelmed by the wounded, the local population also faces challenges such as displacement, and the loss of shelter and food. The impact of such violence can be particularly devastating for children. Young, innocent minds exposed to such gruesome events often suffer deep psychological trauma, which can lead to long-term mental health issues such as post-traumatic stress disorder (PTSD), anxiety, panic disorder, and depression. The prevalence of PTSD among children in terrorism-affected zones is significantly higher than the global average. The sudden loss of loved onesespecially parents or grandparents—can be particularly traumatic for young children, and it may leave them confused and emotionally destabilized. Separation from loved ones takes a significant emotional toll, compounding the trauma of the violence itself. "Survivor's guilt"—persistent feelings of guilt for having survived while others did not-is another common and deeply distressing consequence.

Mental stress may manifest in various ways, including insomnia, traumatic flashbacks, anxiety, depression, and increased tendencies toward substance abuse including smoking and alcohol use. The severity of these effects is often influenced by the child's age, gender, and proximity to the event. Adolescents and youth exposed to violence are more likely to develop psychological disorders and exhibit poor functioning at home and in school. In contrast, younger children are more vulnerable to long-term effects such as disrupted stress responses and psychiatric illnesses later in life.

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Terrorist attacks are often followed by heightened military crackdowns in surrounding areas, resulting in detentions and increased security measures. These actions can disrupt children's daily lives, lead to school closures, and foster a pervasive sense of fear and instability. School dropout rates and incidents of domestic or interpersonal violence tend to be higher in such conflict-ridden areas. Widespread property damage adds to the financial instability of already struggling families. Meanwhile, healthcare systems are strained, as hospitals become overwhelmed by victims, reducing the quality and availability of care. Displacement of families further compounds these challenges.

On the other hand, children growing up in families associated with violent extremism or terrorism are often viewed through a security-focused lens. These children face the dual burden of social stigma and suspicion. The perception that they pose a security risk can foster resentment and anger, potentially increasing their vulnerability to radicalization.

Beyond the immediate physical threats, the psychological and emotional repercussions of such acts of violence and terrorism can be long-lasting. Addressing these impacts requires concerted efforts to provide mental health support, ensure community safety and stability, and create environments where children can heal and grow. As pediatricians, it is our duty to help children and their families navigate these crises. We must offer them safe, non-judgmental spaces where they can talk, cry, or simply sit in silence. Encouraging families to resume daily routines, practice relaxation techniques, and maintain social connections can help restore emotional stability and a sense of normalcy. A multidisciplinary approach involving mental health professionals can support families and children in expressing and processing their feelings. Crisis counseling programs and evidence-based therapies—such as Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)—can be effective tools for managing PTSD, anxiety, and panic attacks.

Recovery from traumatic experiences is a gradual process. Healing does not mean forgetting the violence but rebuilding strength and restoring a sense of safety within individuals and communities. Let us draw inspiration from



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the valiant actions of Nazakat Ahmad Ali Shah, a local tour guide who risked his life to save 11 tourists, including children, during the attack. Such acts of heroism offer a glimmer of hope in the face of terror. Together, we will heal—and we will rise.

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