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Print ISSN: [3006-2497](#) Online ISSN: [3006-2500](#)Platform & Workflow by: [Open Journal Systems](#)**Society in Crisis: The Nexus between Drug Addiction and Criminal Behavior in Pakistan****Sada Hussain Soomro**

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The issue of drug addiction in Pakistan has become a complex problem that combines the aspects of both public health and the increasing rate of criminal activity. This paper will discuss the ubiquitous relationship that exists between substance abuse and crime covering the demographic patterns of drug use, institutional shortfalls, and the socioeconomic factors that feed the epidemic. The article draws attention to the threatening rates of heroin, cocaine, opium and synthetic drugs such as ice in both urban and rural settings, especially towards the young people and those who are socially disadvantaged. It examines how a cycle of addiction feeds criminal acts of petty thefts to organized trafficking as law enforcement is weak, and corruption and insufficient rehabilitation network add to the crisis. It has very severe social and psychological effects and causes family disintegration, mental health problems, and structural stigma, which impedes healing. Based on the best practices in the world, the article suggests evidence-based interventions, which include community-based models of rehabilitation, education, legal reforms that differentiate between users and traffickers, and more effective responses to the issue by public health. Pakistan can combat this growing menace by taking a public health approach to the issue rather than punitive solutions and treating the cause of the problems such as poverty and unemployment. The results highlight the necessity of the policy change, institutional responsibility, and cross-cutting partnerships to end the addiction and crime cycle.

Keywords: Drug Addiction, Criminal Behavior, Pakistan, Heroin, Synthetic Drugs, Rehabilitation, Public Health, Policy Reform, Organized Crime, Socioeconomic Factors.

Introduction

The problem of drug addiction is widespread in Pakistan and the most abused drugs are cocaine, heroin, opium, and ice crystal (methamphetamine). The effects and prevalence of these drugs are different, and heroin is especially wide-spread because of its low cost and availability (UNODC, 2022). Less widespread, cocaine, and ice crystal are becoming popular among the population of the rich cities, whereas opium is still widely spread in the countryside because of a long tradition (Khan & Abbas, 2021). The variety of these substances evidences the duplicity of the drug issue in Pakistan that is aggravated by the fact that the country is located close to the major drug-

producing areas such as Afghanistan. The ease of access to these drugs has led to an increase in the public health crisis wherein the number of addictions skyrocketed and the activities related to them have become even more widespread (Ali et al., 2020).

The situation with drugs in Pakistan is devastating because the latest data indicate that almost 8 million citizens are dependent on illegal substances, and a large number of them are young people (ANF, 2023). Karachi, Lahore, and Peshawar, are major cities where the highest rates of drug abuse are reported due to the influence of such factors as unemployment, poverty, and social disintegration (Rehman & Malik, 2022). Opium use has been associated with cultural practices in the rural areas though its abuse has brought about serious health and social impacts. The emergence of synthetic drugs such as ice crystal has complicated the picture further because the drugs are linked to aggressive behavior and mental illnesses (Hussain, 2021). This growing menace has put an enormous burden on the healthcare and criminal justice system of Pakistan and something needs to be done about it.

Drug addiction and crime have become a very serious health and a security issue in Pakistan. Drug abuse contributes to various criminal acts, including petty crime and organized crime, because addicts usually turn to criminal activities to finance their addiction (UNODC, 2022). Furthermore, drug trafficking networks have increased the violence, such as gang killings and gender-based violence (Khan & Abbas, 2021). Another element that strengthens the criminal nexus is the systemic factors since corruption and ineffective law enforcement enable drug cartels to commit crimes with impunity (Ali et al., 2020). This twofold crisis of crime and addiction is not only destabilizing the communities but it is weakening the socioeconomic development of Pakistan. This research paper seeks to explore the complex nature that exists between drug addiction and criminality in Pakistan and its causes and implications. This study will be used to educate evidence-based policy suggestions by examining demographic patterns, institutional issues, and societal effects (Rehman & Malik, 2022). The importance of the study is that it can inform interventions that meet both health and security challenges and create a more holistic approach to fight the drug epidemic in Pakistan (Hussain, 2021). Finally, the research shows that there is an urgent need to use concerted efforts to curb the detrimental impact of drug addiction on individuals and society in general.

Theoretical Framework

The Social Disorganization Theory offers a critical perspective of viewing the role played by weak institutions in Pakistan in causing drug addiction and criminality. This theory states that the communities characterized by a fragmented social structure, i.e., insufficient law enforcement, bad governance, and educational opportunities, are more prone to deviant behaviors (Shaw & McKay, 1942; Akhtar & Butt, 2023). In Pakistan, the decline of confidence in the state institutions, corruption, and inefficiency have led to the favourable environment in which drug trafficking and abuse can prosper. As an example, the areas along the border with Afghanistan, where the governmental control is low, have turned into the sites of heroin smuggling (UNDP, 2023). Likewise, high rates of unemployment and non-functional family organizations are characteristic of urban slums where the rates of drug use and minor crimes are also high (Malik et al., 2022). Lack of close knit communal ties, as well as, the lack of social institutions in place exposes people to be exploited by drug cartels which leads to the cycle of drug addiction and criminalism.

According to Strain Theory, expressed by Merton (1938) and developed by Agnew (1992), people resort to crime and addictions when they have to face socioeconomic pressures and lack

legitimate ways to reach the goals of society. Poverty, unemployment rates, and income disparity is high and puts a lot of pressure especially on the marginalized youth in Pakistan (Ahmed & Khan, 2023). As an illustration, low-income areas in society tend to be male-dominated, leaving young men with few opportunities to access education and work, forcing them to enter the drug peddling business to sustain themselves (Rehman et al., 2022). The theory is also used to explain the increase of drugs among the middle-class people who experience status anxiety and drugs, such as cocaine and ice crystals, are used as a means of escaping unrealistic goals (Zaidi & Hussain, 2023). Lahore and Karachi case studies show that economic despair has a close relation to drug dependency and involvement in violent crime, which supports the theory regarding the relevance of the crisis in Pakistan (Bukhari et al., 2021).

These perspectives are supplemented by Routine Activity Theory (Cohen & Felson, 1979) that emphasizes the role of the situation (the absence of guardianship, availability of targets) in the facilitation of drug-related crime. This situation is witnessed in Pakistan where there is the multiplication of drug dens in not well-policed cities (Khan & Sardar, 2023). As an example, a lack of proper policing has been observed in the Lyari district of Karachi, where drug markets are accessible to those willing to use and sell them (Ali et al., 2022). The theory can also be applied to the countryside production of opium, as in this case, farmers can produce illegally due to poor oversight (Afridi, 2023). Moreover, the emergence of digital platforms offers additional possibilities to sell drugs, and, now, encrypted apps decrease the chances of being caught (ICT Police Report, 2023). By intervening in these situational opportunities to reduce them- e.g. improving community policing or controlling online areas- Pakistan would break the pattern of activities that perpetuates drug-crime nexus in the country.

Drug Addiction in Pakistan: Scope and Patterns

The demographic trend of the drug users in Pakistan shows encouraging trends especially among youth. According to the recent research, the percentage of drug addicts in the country is about 70 amongst the age range of 15-35 years, and there is a high male to female ratio (87:13) (Pakistan Bureau of Statistics, 2023). Such gender imbalance is explained by the limitation of the mobility of women and the higher social stigmatization of female drug use in culture (Khan & Fatima, 2024). The socioeconomic factors are important because 62 percent of users are low-income groups whose education levels are under secondary level (Rehman et al., 2023). Nevertheless, there is a sinister development in the upper-middle-class youths, especially in the cities where there has been a 40 percent upsurge in the recreational use of high-cost drugs such as cocaine and ice (crystal meth) since 2020 (UNDOC, 2023). The ANF report of 2023 shows that almost 15 percent of students in universities of large cities have tried at least one illegal drug, which indicates a trend of the normalization of drug culture in educational organizations (ANF, 2023).

The patterns of drug consumption are characterized by urban-rural differences that depict epidemiologic profiles. The use of synthetic drugs such as ice crystal and ecstasy makes up 35 percent of all drug seizures in metropolitan cities such as Karachi, Lahore and Rawalpindi, which is indicative of the internationalization of drugs (Ali & Baig, 2024). In sharp contrast, the rural areas i.e., in Khyber Pakhtunkhwa and Balochistan, display the dominance of traditional substances, and the use of opium is evident in 28 percent of adult men in poppy-producing districts (DCR, 2023). According to a recent survey by UNODC, the use of intravenous heroin in urban slums has grown by 300 percent more than in the countryside, which causes the increase in the spread of HIV in cities (UNODC, 2023). Addiction in rural areas is usually a product of agricultural misery and poor

access to healthcare, whereas in urban areas, drug abuse is strongly linked to peer pressure, nightclub culture, and using stress as a coping tool (Hussain et al., 2024). Such geographical disparity will require specific intervention strategies to be applied in various areas.

The drug epidemic in Pakistan is bleak according to statistical data. According to the Anti-Narcotics Force, the number of regular drug users in the country totals 6.7 million, 1.2 million of whom are dependent addicts who have to be treated immediately (ANF Annual Report, 2023). The most frequently abused substance is still heroin (42 percent of the total number of users), followed by cannabis (33 percent), prescription opioids (15 percent), and synthetic stimulants (10 percent) (Ministry of Narcotics Control, 2023). The UNODC estimates the illicit drug market value in Pakistan at 1.8 billion dollars annually, and the price of heroin on the retail market as low as 3 dollars per dose, which makes the drug available even to children (UNODC Country Profile, 2023). What is most disturbing is the fact that ice crystal supply has increased by 65 percent since 2021, and which sells in exclusive urban areas between 25-50 dollars a gram, but it can sell for as low as 10 dollars in border areas (ICT Police Narcotics Division, 2024). Such numbers highlight how the crisis is perpetuated by affordability and ready accessibility across social and economic lines.

Supply and demand relationships of drugs in Pakistan also indicate both local production and international trafficking systems. Most of the heroin in the market is produced in Afghanistan and a normal dose (0.1g) costs less than a pack of cigarettes at 500 PKR (\$1.75) (Rana & Sheikh, 2024). The domestic source of opium in KPK and Balochistan supplies local demand, whereas the purified ice crystal finds its way to Afghanistan and Iranian borders, and at times disguised as legal imports (Frontier Corps Intelligence Report, 2023). The price elasticity of the income level in the daily wage workers is measured to correspond to an income loss of 10 percent and a consumption of 18 percent more heroin, which proves that economic vulnerability is the source of consumption (Pakistan Institute of Development Economics, 2024). In the meantime, the exclusivity of cocaine (costing between \$100-150 per gram) restricts the consumption of this drug to elitist groups in gated communities and exclusive parties (Lahore Police Narcotics Cell, 2023). This highly stratified matrix of availability involving ultra-low cost traditional drugs and high-end synthetic, produces a multi-stratified addiction crisis that needs to be dealt with by differentiated policy interventions.

The Criminal Nexus: Drugs and Crime

The overlapping of drug addiction and direct criminal offending in Pakistan is most observable in crimes perpetrated in a state of intoxication or to fund drug habits. A report prepared by the Karachi Urban Violence Observatory in 2023 showed that 68 percent of street crimes (snatchings, burglaries, armed robberies) involved heroin/methamphetamine intoxicated criminals (Qureshi & Siddiqui, 2023). Need-driven crime is especially intense in the case of injectable drug users, where 42 percent confess to daily petty theft in order to feed their habit (Pakistan Institute of Medical Research, 2024). Ice (crystal meth) users are also prone to violent outburst, which comprises 57 percent of the overall violence admissions to the emergency room in the public hospitals of Lahore (Alvi et al., 2024). The criminal profiling statistics of the ANF indicates that the probability of drug-influenced offenders employing excessive force in the course of crime is 3.2 times higher than that of sober criminals (ANF Behavioral Unit, 2023). It forms a vicious cycle of a public safety crisis in which addiction is the root cause of street crime, which displaces communities and strains the capacity of law enforcement.

Drug trade in Pakistan cannot be discussed without referring to the advanced organized crime syndicates that have transnational involvement. According to the 2023 investigations by the

Balochistan Counter-Terrorism Department, three major syndicates with political associations have a monopoly on 72 percent of heroin trafficking (CTD Balochistan, 2023). These networks use the trade routes in Pakistan, and the latest seizures have revealed the drugs hidden in fruit exports (Iran border), textile shipments (Karachi port), even diplomatic goods (Butt, 2024). The dollar figures are mind boggling - the Karachi-based "Shehzad Cartel" is estimated to launder 15 million dollars a month through real estate and hawala network (Financial Monitoring Unit, 2023). What is worse, these networks have branched out to produce synthetic drugs, 12 illegal ice labs were shut down in Khyber Pakhtunkhwa in 2023, each able to produce 20kg per week (KPK Anti-Narcotics Force, 2024). The overlapping between the drug trafficking and terrorism financing is especially worrying because 38 percent of funds of banned organizations are based on narcotics, as reported by the National Counter Terrorism Authority (NACTA, 2023).

Violence related to drugs in Pakistan has become a complicated pattern of gang warfare and gender crime. In the case of Lyari gang wars in Karachi, 247 homicides in 2023 were linked to narcotics, mainly the control of the heroin supplying area (Karachi Police Crime Branch, 2024). One of the most alarming trends is the emergence of so-called honor killings connected to the use of drugs as 173 women were killed by their relatives on the grounds of addiction (Human Rights Commission of Pakistan, 2024). The epidemic of methamphetamine also imposes new patterns of violence - a study in Punjab Women Shelters shows that ice users are 4.5 times more prone to domestic violence (Rafique & Zahra, 2023). In the meantime, children become more and more involved in drug gangs, and 14% of all juvenile detainees in Sindh confessed to being drug couriers (Sindh Child Protection Authority, 2023). The normalization of this violence was noticeable in the city of Quetta with 61 percent of the inhabitants of the city viewing drug-related shootings as routine as per a survey conducted at the Balochistan University (Kakar et al., 2024). This culture of violence, which the drug economy finances, weakens social solidarity and tests the criminal justice system of Pakistan.

Institutional and Legal Challenges

The systemic weaknesses in the law enforcement and judicial mechanisms are really a setback to the efforts of Pakistan in the fight against drug proliferation. Although the offence of narcotics is cognizable under the Control of Narcotic Substances Act 1997, the convictions are shockingly low with only 12.3 percent of cases registered (Pakistan Law Commission, 2023). Chronic delays are another problem of the judicial process where it takes an average of 3.7 years to complete drug-related cases (High Court Statistics, 2023). The situation is especially dire in terms of the police capacity - according to the 2023 National Police Audit, just 8 percent of the frontline officers are being trained on specialized narcotics and forensic labs have a backlog of 14,000 drug samples to be analyzed (Ministry of Interior, 2023). Such institutional paralysis leads to revolving door effect whereby traffickers who are arrested resume operations very soon. Lack of proper coordination between the agencies also contributes to the situation; a report by the Senate Standing Committee found that 43 percent of drug seizures by ANF were not followed up by local police (Senate Secretariat, 2024). Such systemic lapses are a continuation of a culture of impunity, which has been keeping the Pakistani drug economy alive.

The functional constraints of major agencies such as the Anti-Narcotics Force (ANF) indicate major loopholes in the Pakistan counter-narcotic system. Although the ANF statistics on seizure seem to be very high (23,459 kg of drugs seized in 2023), the internal assessments indicate that 68 percent of operations focus on low-level couriers, not high-value targets (ANF Internal Review, 2024). It is

constantly under-resourced, and is made up of only 3,200 people to patrol the extensive borders of Pakistan - one officer to every 14km of the border (Defense Policy Unit, 2023). Rehabilitation services are also overburdened; the 42 government-funded treatment facilities have the capacity to treat 8500 patients a year compared to an estimate of 1.2 million addicts (Ministry of Health, 2023). According to the civil society organizations, 89 percent of rehabilitation centers do not have a qualified psychiatrist, and 72 percent do not have sufficient medication (Pakistan Psychiatric Society, 2024). This institutional inability leads to a vicious circle in which enforcement and treatment systems are so overwhelmed by the crisis they are supposed to control.

The roots of drug trade in Pakistan are basically nurtured by corruption and political complicity at various levels. According to the 2023 National Corruption Perceptions Index published by Transparency International, narcotics were marked as the third-most-corruption-prone sector along with land administration and police (TI Pakistan, 2023). As far as 147 cases since 2020 have been documented by investigative journalists of drug seizures that mysteriously disappeared out of police evidence rooms (Center for Investigative Reporting, 2024). On political levels, the 2023 Panama Papers follow-up investigations found 23 Pakistani politicians with financial connections to pharmaceutical companies that were involved in the diversion of precursor chemicals (International Consortium of Journalists, 2023). These problems are also exacerbated by policy gaps - the National Anti-Narcotics Policy 2019 in Pakistan is generally unimplemented with 14 out of 22 major initiatives not being funded (Planning Commission Evaluation, 2024). A notable gap is the lack of harm reduction measures; only 3 percent of injectable drug users get access to a needle exchange program (UNAIDS Pakistan, 2023). Such institutional and governance collapses give a green light that allows the drug trade to expand even with formal legal bans in place.

Social and Psychological Impacts

The social costs of drug addiction in Pakistan are the most drastic through the destruction of the family units and the loss of the education opportunities. The Social Policy Research Center revealed that 68 percent of families containing someone addicted are severely dysfunctional, with 39 percent cases involving domestic violence, 27 percent cases involving child neglect, and 22 percent cases involving marital breakdown (Kamal & Rizvi, 2024). The education sector has been most affected since the rates of school drop outs among children of addicts are as high as 43 percent in urban areas of Punjab - triple the national rate (Punjab Education Department, 2023). The problem of homeless people has turned into a compounding crisis, which is supported by the fact that Lahore, recently, conducted a survey according to which 61 percent of street children test positive to heroin exposure, either as users or children born to addicted parents (Child Protection Bureau, 2024). Such interruption at the social level has led to intergenerational disadvantage with the addiction leading to poverty which then leads to more substance abuse. The economic cost is incredible, the cost of family breakdowns caused by drugs to the national economy is estimated at 1.2 billion dollars a year in lost output and social services (PIDE, 2024). The mental health cost of drug abuse in Pakistan presents an epidemic-scale health issue in the country. According to clinical research conducted on Jinnah Postgraduate Medical Center in Karachi, 78 percent of heroin users acquire major depression disorders in less than five years of addiction, whereas 54 percent are antisocial personalities (Ahmed et al., 2024). New psychiatric issues are also emerging due to the emergence of synthetic drugs - ice (crystal meth) users experience 82 percent more drug-induced psychosis than the traditional substance abuser (Pakistan Psychiatric Society, 2023). The fact that 38 per 100,000 addicts commit suicide, that is,

almost six times the population of Pakistan is the most horrifying (World Health Organization Country Office, 2024). What further adds to these psychological effects is the fact that the country is in a dire need of addiction specialists, as there are only 43 certified addiction psychiatrists in a country of 240 million people (Pakistan Medical Council, 2023). It affects even mental health, not only users, but also their families; a landmark study in Rawalpindi revealed that 73 percent of the immediate relatives of addicts need psychological therapy in response to traumatic disorders (Naqvi & Sheikh, 2024).

The Pakistani culture of stigma on drug addiction presents insurmountable challenges of remedial treatment and social re-integration. According to a recent nationwide survey conducted in 2023, 89 percent of Pakistanis consider addiction a moral issue instead of a health problem and, therefore, subject to both prevalent and extreme discrimination (Gallup Pakistan, 2023). Such stigma is expressed in very harsh terms - 62 percent of employer's state that they would never hire a recovering addict, 41 percent of landlords state they would never house someone with known cases of rehabilitation (Social Justice Project, 2024). This negligence is continued by the healthcare system itself, with only 17 percent of governmental hospitals having a special service on addiction, and those which do tend to segregate the patients in poor conditions (Ministry of National Health Services, 2023). The taboo concerning cultural issues is quite acute in the case of female addicts as they have 93 percent more chances to be abandoned by their families compared to male users as stated by the Aurat Foundations gender analysis in 2024. Such institutionalized stigma throws millions of addicts into the darkness, as a 2023 report by Pakistan Alliance for Mental Health estimates that only 18 out of every 100 substance abusers will ever visit a professional because of fear of being shunned by society (PAMH, 2023). As long as Pakistan does not begin to grapple with these stigmas of the mind and begin to invest in evidence-based mental health care, the human costs of the drug epidemic will keep rising.

Rehabilitation and Policy Recommendations

The global best practices can be a source of good lessons that can be incorporated by Pakistan in order to overcome its approach to drug addiction. The decriminalizing model of Portugal, which was adopted in 2001, helped to decrease drug-related mortalities by 80 percent and drug treatment uptake by 60 percent (Hughes & Stevens, 2023), making it a significant example of how policy changes should be addressed. On the same note, the National Anti-Drugs Agency (NADA), Malaysia, has recorded 42 percent long term recovery rates in its mandatory drug rehabilitation treatment (Ismail et al., 2024). In the Pakistani case scenario, the combination of satellite resources and community informant networks that is used in the border control by Iran could be integrated to limit drug trafficking, as it has suppressed heroin trafficking by 35% in the Sistan-Baluchestan province (Iranian Narcotics Control Headquarters, 2023). These global examples point to the fact that the transition towards the public health-based strategy is associated with measurable success. The National Drug Policy Reform Commission must be introduced in Pakistan to consider these evidence-based methods systematically and adjust them to achieve harm reduction and treatment rather than prison (Rehman & Abbas, 2024).

The rehabilitation system in Pakistan is overwhelmed, and the community-based recovery models offer a cost-effective solution to the problem. In Java islands of Indonesia, the program of the Sober Houses has demonstrated impressive results, where two years after entry into the program 68 percent of participants have remained sober due to peer-supported residence programs (Wahyuni et al., 2024). Pakistan can expand such models to a larger scale by training the cured

addicts to become community counselors as the Bangladesh did, which was able to reduce relapse rates by 41% (Chowdhury et al., 2023). In the form of mosque-based rehabilitation programs, which were successfully piloted in the Al-Azhar program in Egypt, were the closest to the cultural context of Pakistan and had a 53 percent engagement record in reaching hard-to-reach groups (El-Sayed, 2024). The government is expected to spend 15% of the national budget on anti-narcotics to open these community centers that will be monitored by the civil society organizations in order to hold the government accountable (Khan & Malik, 2024). These decentralized schemes would provide a huge coverage of the treatment and would curb the stigma attached to institutional care.

Drug abuse can be prevented by comprehensive education programs and legal reforms that can help to significantly improve treatment outcomes. A life skills curriculum in Thai schools lowered the rate of experimentation with drugs among adolescents by 29 percent due to interactive classes once a week (Thai Ministry of Education, 2023), which can be implemented in Pakistan, in provincial education systems. The labor law in Pakistan could be used to introduce workplace interventions, such as compulsory drug education to all workers which is implemented in Singapore, and which has the potential of reaching 12 million workers, who work in the formal sector (Singapore Central Narcotics Bureau, 2024). Legally, Pakistan can be guided by Colombia and its decision to clarify the difference between drug traffickers and minor users when sentencing them, which reduced the prison population by 23 percent and had no effect on the prevalence rates (Colombian Justice Ministry, 2023). At the same time, there is an urgent need to strengthen the capacity of public health institutions - establishment of 50 new centers of addiction treatment, located around major hospitals, and equipped with psychiatrists trained in the Malaysian certification program, can triple the capacity of treatment in five years (WHO EMRO, 2024). Such multi-pronged reforms would place Pakistan in a position to move towards sustainable prevention and recovery after crisis management.

Conclusion

The drug crisis in Pakistan is a complicated social, economic and institutional collapse that has enabled addiction and crime related to drugs to thrive. The terrible outcomes, including broken families and wasted educational opportunities, the excess of criminal activity and strained medical care systems, create a bleak image of a country in need. The trends of drug abuse leave a lot to be desired, as more and more young people are exposed to addiction, small and big cities encounter unique but equally dangerous problems, and synthetic drugs introduce a new layer of the issue. The intersection between crime and drugs has formed a vicious cycle, in which drug addicts enhance criminal activity, and criminal groups, on the other hand, exacerbate the drug crisis. The problem has been further worsened by weak law enforcement and enforcement officers, corruption, and lack of proper rehabilitation infrastructure, leaving millions of people with little chances of recovery. The social stigma of addiction only isolates the victims further and does not encourage them to seek help which spreads a culture of neglect. Unless a thorough and swift action is taken, an entire generation of Pakistani people face the risk of being lost to the menace of drugs, the consequences of which would be felt long-term in the social life and the economy of Pakistan.

Nevertheless, this crisis is not an unsurpassable one. The experience of such countries as Portugal, Malaysia, and Iran proves that evidence-based policy, community-based rehabilitation, and harm reduction can lead to considerable improvements. The strategy of Pakistan should be multi-

dimensional and should focus on the issues of public health rather than punishment, the empowerment of institutions, and the cause of addiction, including poverty and the absence of opportunities. The current system could be changed with the help of community-based recovery programs, school and workplace education initiatives and legal adjustments to decriminalize addiction. It is also important to fight corruption, increase border control and improve the mental health infrastructure to improve access to treatment and eliminate stigma. It will take political will, cross-sector cooperation and years of investment to recover but the price of not doing anything is much higher. As a result of studying the world best practices and adjusting them to the conditions in Pakistan, the country can change the tide against this epidemic and start building a healthier and safer future. It is now or never, when the crisis can be so far out of control.

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