



Original Article

Drug Usage in Pakistan: A Comparative Analysis with Other Countries and the Legal Framework

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ABSTRACT

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This research paper throws light upon one of the alarming issues that are “drug abuse in Pakistan”, examining its social and economic drivers and analyzing the comparison of country’s drug usage trends with that of other nations. Pakistan, because of its geographical proximity to Afghanistan, is facing serious challenges as a consumer as well as transit point for narcotics, particularly opium. This research is based mainly on the effectiveness of national and international legal frameworks that control drug-related crimes and addiction. An in-depth study of Pakistan’s drug laws, including the Control of Narcotic Substances Act (1997) and many other anti-narcotics policies, highlighting the gaps in enforcement, rehabilitation, and public health facilities. The aim of this paper is to give more effective recommendations for control over drug usage as well as drug abuse in Pakistan by comparing its approach with other countries like United States, Singapore and Portugal etc. Key recommendations are also provided including adopting a public health approach, strengthening law enforcement mechanisms, expanding rehabilitation infrastructure, and improving international cooperation.

Introduction

Drug addiction is a long-established issue in Pakistan, where drug usage among people is because of various purposes, such as recreation, social trends, cultural practices, traditions based upon religion, some medical reasons, and more often personal needs are the main drivers of drug usage and sometimes to cope up with the problems.

The most commonly used drugs are hashish, bhang, psychotropic drugs, alcohol, opium, heroin and cola, used for snorting. In the early 1980s, the situation regarding the use of cannabis, opium and alcohol worsened. Increased availability of heroin is having an incisive effect on the social cohesion of the Pakistan. In the last few years, Pakistan has experienced an alarming rise in drug use, particularly among its youth. According to estimates, about 6.7 million people, or about 6% of the adult population, is using drugs(Canton, 2021). The findings of this study reflect the patterns and trends of use of drugs in Pakistan, focusing on the effectiveness of the country's legal framework(Eslami & Abdolahi, 2021). Particular attention is paid to laws such as the Narcotic Substances Control Act (1997) and the Anti-Narcotics Policy (2010). This paper also sheds light on the challenges that the laws are facing in their enforcement and the gaps in rehabilitation services, along with socio-economic factors that are the reason behind the rapid increase in drug use(Jamshed & Bakhsh, 2024). It also compares Pakistan's drug control' policies with the United States, Portugal, and Singapore to identify effective strategies and approaches that can be adapted to the specific needs of Pakistan(Atif et al., 2020).

History of drug usage in Pakistan

Pakistan Narcotics Control Board in 1986 conducted the first national survey which identified that nearly 1.3 million people living in Pakistan have been regarded as the regular drug users. This survey showed that 3.4% of adult males often used hashish, and 1.3% were identified as being addicted to opium(Khan, Sohail, & Alam, 2020). The same board in 1988 conducted another survey that showed an alarming increase in the use of drugs, and the number of drug abusers was increased to 2.24 million in a matter of just two years, the survey also found some major changes in consumption patterns.

By 1993 instead of decline ratio got more increased to about 3.01 million with 1.52 million individuals who were using heroin as their prime drug, remaining 0.89 million used charas hashish on a regular basis. Presently, the number of drug addicts in Pakistan has increased to four million, of whom the majority of injecting drugs, with around 156,500 injectable drug users according to the latest survey. Amongst those drug abusers majorly were between 16 to 30 years old as reported by the Anti-Narcotics Force Islamabad for the years 2006–2007. According to the 1988 Pakistan Narcotics Control Board, drug users in Pakistan used to prefer smoking or snorting(OICS, 2011).

However, due to changing drug patterns, more recent data shows an increase in injectable drug use, especially in urban areas (Anti-Narcotics Force, 2006–07). This has resulted in a high risk of transmitting diseases such as hepatitis and HIV etc. Due to rapid increase in drug usage, Pakistan has taken two major approaches; the first one is “supply reduction”, that is supposed to be carried out by law enforcement agencies by curtailing the access of illicit drugs (Anti-Narcotics Force Islamabad, 1995), and the second one is “demand reduction”, where treatment plays a central role in reducing drug dependency. Types of drugs in Pakistan: Pakistan is facing a wide and alarming spectrum of drug-related problems, fueled by the existence of various drugs within its territory.

Types of drugs in Pakistan

1.Cannabis

Due to its historical and cultural permissibility in some regions, Cannabis is counted as one of the most used substances and dominates as the first preference of most of the drug consumers. Cannabis is locally known as Charas or Bhang. Cannabis is a common option for recreational drug user only due to its easy availability and cultivation(Goldenberg, IsHak, & Danovitch, 2017).

2.Synthetic drugs

In recent years, the rising use of synthetic drugs, particularly methamphetamine (commonly known as crystal meth or “ice”), has emerged as a significant issue, particularly in urban centers like Karachi, Lahore, and Islamabad. Synthetic drugs are appealing to younger populations due to their accessibility, lower cost, and perceived modernity. These substances are often manufactured in clandestine labs, making their regulation and eradication particularly challenging for law enforcement agencies(Sacco & Finklea, 2016).

3.prescription drugs

One major alarming feature that has become visible is the high prevalence of misusing prescription drugs, like tramadol, morphine, and cough syrups based on codeine. It is easily found without prescription. They have immense potential to provide euphoria and relaxation. Like that, the pattern for benzodiazepines use is found much common. Their common user’s characteristics are mostly middle-aged and females, and its consumption for avoiding anxiety and also insomnia(Light, 2010).

4.Polydrug use phenomenon

The phenomenon of Polydrug use—the simultaneous or sequential use of multiple substances—is also becoming a critical issue in Pakistan. Many drug users combine heroin with other sedatives or stimulants, increasing the risk of overdose and long-term health complications(Ives & Ghelani, 2006).

5.Opioids

Opioids, particularly heroin, constitute a major drug abuse problem in Pakistan. It is estimated that over 3 million individuals in Pakistan are addicted to opiates, making heroin a critical public health and criminal concern. The porosity of Pakistan’s borders allows heroin, in both the raw form and its processed form as heroin, to be easily transported across borders and into the general population, promoting widespread addiction and dependency, primarily on the poor and vulnerable(McDonald & Lambert, 2011).

Pak- Afghan geographical proximity

Pak-Afghan geographical closeness has aided the flow of heroin into Pakistan markets since Afghanistan alone produces more than 80% of the world’s opium. Impact of Pak-Afghan geographical closeness on excessive Opioid use Pakistan’s physical proximity to Afghanistan, the world’s largest producer of illicit opium, puts the country in an at-risk position not only for drug trafficking but also for drug abuse(Fazli, 2023). Pakistan shares a long western border with Afghanistan and Iran, which compounds Pakistan’s drug-related problems. A 2018 UNODC report

observed that Afghanistan had “continued to be the world’s largest cultivator of opium poppy and the world’s largest producer of opium.” In 2017, the report stated, the total area under opium poppy cultivation in Afghanistan increased by 63 percent to 328,000 hectares, compared with the preceding year; similar was the increase in opium production, which increased by 87 percent, from 4,800 tons in 2016 to 9,000 tons in 2017.5 These trends have not witnessed any significant downturn in subsequent years, and have been pushing up Pakistan’s drug trafficking vulnerability as well as the risk of increased domestic drug use(Coomber et al., 2021).

Comparative Analysis of Drug Usage Trends

Drug use and its societal impact vary widely across countries with its own government due to disparities in civilizing standards, economic environments, and governmental tactics. Comparing Pakistan’s drug challenges to those in the United States, Portugal, and Singapore specifies valuable visions into how various plannings have surrendered differing consequences. These corresponding also emphasize critical gaps in Pakistan’s approach and climax potential pathways for bettering (Mattson, 2021).

United States vs. Pakistan

The United States Is facing individual of disaster drug troubles in the world, mainly generated by a large opioid epidemic (Gottschalk, 2023). This circumscribes not only the excessive abuse of prescription painkillers but more the growing disturbing use of synthetic opioids, in the way that fentanyl. These drugs have managed to a overwhelming number of overabundance of something deaths, with the Centers for Disease Control and Prevention coverage over 100,000 fatalities in 2022 apart.

Despite the U.S. imposing authoritarian drug standards, far-reaching harm decline actions, and management-financed programs for improvement from addiction, the country is still facing plenty challenges. The extensive chance of opioids in both legal and illegal forms and the over prescription of pain medications have created the addiction rates escalate in the country. In addition, social difficulties like economic drop, mental disturbances, and an failure to undertake long-term restoration programs infuriate the position specific that many of these population enhanced sidelined to abandon their reliance. On the other hand, Pakistan’s big drug question, still, mainly includes drug, in addition to any different narcotic-located device, whose trade is predominantly furthered due to its position familiar Afghanistan – the realm’s best builder of narcotic (Dobrowolski, 2024). The trafficking networks that filter opiates into Pakistan provide considerably to the country with its own government’s drug questions, that are not as carefully firm to the misuse of prescription drugs. Instead, Pakistan’s drug epidemic is mostly implanted in socio-financial exposures, containing want, ignorance, and restricted task hope, that create things naiver to drug abuse.

Another key facet is that while the United States has again directed much consideration and loan into generating fitness infrastructures to curb addiction, like treatment centers and harm decline duties, Pakistan faces this challenge as an under-talent-located answer to allure drug issues. The country with its own government is plague with lacking abilities, under-resourced programs, and a shame intensely implanted inside Pakistani institution toward addiction, that usually forbids the

deprived individual and bars a plenty of public support in achieve these much-wanted money. Moreover, while both countries with its own government face the trenchant belongings of addiction on their peoples, the approaches to giving these issues vary significantly. The U.S. has more and more attracted on evidence-located approaches, such as drug-helped treatment (MAT) and society-located improvement programs. On the other hand, Pakistan's efforts wait generally sensitive, with little importance on stop or restoration. Pakistan, then, faces a excellent hurdle in handling the drug traffic and gathering the necessities of martyrs of addiction.

Portugal vs. Pakistan

While Portugal's situation of drugs remnants individual of ultimate favorable case studies general, it has developed into a somewhat liberal image of drug procedure. In 2001, the country decriminalized the ownership of all drugs for individual use, making a fault-finding shift from disciplinary measures to restoration and community health (Gilroy, 2023). Instead of jailing, customers in the direction of property of drugs are refer to situation programs tailor-made to address addiction, insane strength, and public reintegration.

This procedure has underrated deaths guide drugs, convicts in jails, and HIV contamination, through exhibiting the good results of a energy-familiarize approach. The exercise of Portugal's harm decline works, that involve annoy exchange, cautious devouring extents, and off-course approach to drug situation, have happened key attacks in diminishing community health belongings from drug abuse. In addition, the public's attitude toward addiction has come more warmhearted, understanding it as a healing condition alternatively a criminal nature. Pakistan's drug procedure is still completely vindictive, place drug consumers are seized and confined most of the time a suggestion of correction restoration. This period of addiction, criminalization, and public marginalization has resumed, so obstructing works to mean the root causes of drug abuse. While few types of harm-contraction programs endure in Pakistan, the country lags far behind in conditions of resources, incomplete governmental will, and lack of large programmatic interferences concerning this (Lassi, 2022). Cultural and scrupulous stain almost addictive attitudes also fuels societal opposition against a more healthful approach to utilizing drugs. However, Pakistan commits determine massively from Portugal, that has dressed as a fine example of progress on this front. By evenly mixing tactics that supply instructions rehabilitation over penalty and lowering the criminalization of addiction, Pakistan commit start to address its drug impasse in a more excellent manner, reconstructing both community health and societal postures toward drug consumers.

Singapore vs. Pakistan

Singapore's approach to drug control stands at the extreme end of the array, characterized by its scrupulous nothing-fortitude procedure. The country metes out a few of the planet's stiffset punishments, containing death penalty for drug trafficking and long penitentiary sentences for property. This tough approach has assisted the country solve individual of hostile rates of drug abuse in the world (Song, 2019).

In addition to its tough application, Singapore still offers community-located rehabilitation programs and conducts broad public instruction campaigns to frighten the use of drugs from an

early age. These measures, linked with a powerful devote effort to something avoidance and education, form Singapore a wonderful example of extreme discipline concerning drug control. In absolute contrast, the punishing measures too communal by Singapore involve the Pakistan death penalty granted for large-scale drug trafficking in the Control of Narcotic Substances Act, CNSA. However, systemic issues like corruption, deficient government, and absorbent borders that acknowledge the free movement of the illicit drug trade prevent Pakistan's capability to carry out specific laws. Even though legally, it has strict foundations for penalty, the procedures of imposing such penalty are largely insufficient due to the lack of proper exercise and supervision.

Moreover, Singapore possesses an accurately organized and well-subsidized reconstruction framework, while Pakistan is severely thwarted concerning this. The country suffers from an acute shortage of treatment facilities, unavailability of specific addiction services, and a general scarcity of funding for rehabilitation programs, leaving millions of drug users without proper care. Thus, Pakistan, despite sharing similar laws, remains much more ineffective in curbing drug abuse than Singapore is with its all-inclusive policy.

Trends in substance use in Pakistan

Overall results of the National Drug Use Survey Pakistan 2022-24 revealed that approximately 12 percent of the population – 9 percent of the adult male population and 2.9 percent of the adult female population – equivalent to 6.7 million people – had used a substance other than alcohol and tobacco in the preceding year.

- **Cannabis:** Accounts for the majority of drug use, with estimates suggesting 3.6 million users in Pakistan (approximately 2.9% of the population aged 15-64).
- **Heroin:** About 800,000 to 1 million users, with daily use among many. It remains a significant concern due to its addictive nature.
- **methamphetamine (“Ice”):** It has increased fast, and its usage is quite high among the youth and students. Recent studies show that it may surpass heroin in the cities.
- **prescription Drugs (Tramadol, Benzodiazepines, etc.):** About 20% of Pakistan's drug abusers use prescription drugs, mainly because they are readily available.

Overall Drug Use About 6.7 million people, or 6% of the adult population aged 15-64, use illicit drugs. There is significant regional variation. Khyber Pakhtunkhwa has the highest prevalence, with almost 11% of the population affected.

According to data received from the Anti-Narcotics Force, during 2017, 1,177 operations against illegal drugs/narcotics dealers were conducted. During these operations, different types of narcotic drugs were recovered. Altogether, 32,573.10 Kg of opium, 7,132.20 Kg of morphine, 19,775.915 Kg of heroine, 102,113.593 Kg of hashish and 387.09 Kg of cocaine were recovered during these operations, which reveals the massive amount of drug trafficking taking place in Pakistan.

Literature Review

A Review of the Literature on Drug Usage in Pakistan Compared to Other Nations

1. Drug Abuse in Pakistan:

Research Findings

Data reveal that around 6% of Pakistan's adult population (about 6.7 million) is involved in the consumption of illicit drugs. Cannabis is the most popular drug in the world the second is heroin and the third is methamphetamine which is known by the name 'Ice'.

Methamphetamine use is on the increase, especially among the youths and students, due to the cheap and easily accessible nature of the substance.

2. Global Context:

Similarly, global estimates of drug users reveal that 5.6% of the global population in the age range of 15-64 years use drugs (UNODC, 2022). Pakistan is almost on par with the global average but the rates of certain types of drugs and the regions involved are different. For instance, opioids are more common in the United States while cannabis is prevalent in South Asia.

3. Factors that Influence the Use of Drugs in Pakistan:

Geopolitical Factors: This has made Pakistan a transit and consumption territory for heroin and other opiates because of close connections with Afghanistan, the largest opium manufacturing country in the world.

Lack of jobs, inadequate education, and being in a poor bracket are major factors that lead to drug abuse among the youth from needy backgrounds (Zaman, Hussain, Irfan, Khattak, & Shaheen, 2024).

4. Cultural Dynamics:

Illicit use of drugs persists as a social vice, hence, the reluctance to seek help or admission to the rehabilitation centers.

Drug control has become one of the significant issues in modern society due to the devastating effects of adulteration.

Pakistan:

These are legal frameworks that prohibit or regulate the use of narcotics and the Control of Narcotic Substances Act (CNSA) of 1997 outlines heavy penalties for those found possessing, trafficking, or producing the drugs. However, enforcement is a problem due to the general lack of strong judicial systems and rampant corruption.

Other Countries:

United States: Emphasizes on the treatment of the offender and prevention of repeating the crime as well as prohibiting the crime by having strict consequences.

Netherlands: Uses a medical model where only small amounts of cannabis are legal and other drugs are strictly regulated.

Challenges in Pakistan

- **Enforcement:** There are numerous challenges that exist in Pakistan; organized crime and corruption are rampant, and the judicial system is slow, which reduces the effectiveness of combating drug trafficking and production.
- **Lack of Rehabilitation:** Although many people use drugs, there are few rehabilitation centers, and stigmatization limits access to these services.

4. Interventions/Counselling/Medication suggested in the Literature:

Integrated Approaches:

Blending rigid policing strategies with educational campaigns and safety measures.

Enhanced Regional Cooperation: Working with other neighboring countries to curb drug trafficking across the border.

Focus on Rehabilitation: Providing adequate healthcare and resources to the patients and lowering the Relabeling taboos related to drug addiction.

This overview synthesizes information from different sources, pointing out that multi-faceted approaches are required to effectively tackle the problem of drug use in Pakistan. Please inform me if you want this broadened or if it requires further tweaking depending on your paper.

Theoretical framework

Criminal Parapsychological Theory

- **Behavioral Theory**

According to behavioral theory, criminal conduct is acquired through the process of learning from one's environment. Regarding drug abuse and trafficking in Pakistan, individuals may first encounter drug abuse or trafficking through family members, friends, or other people within their community who can act as role models. In the long run, these behaviors are rewarded by some positive consequences in terms of financial benefits, social recognition, or even a few hours of escape from one's problems. This theory postulates that substance use and drug distribution are not inherent characteristics of a person but rather molded by environment factors. As drug trafficking and other criminal activities are often based on the learned behavior, they can be viewed as reactions to certain stimuli: environmental, poverty, peer pressure, or the lack of legal opportunities.

- **Labeling Theory**

Labeling Theory purports that the official stigma of 'criminal' or 'addict' fundamentally alters a person's self-perception and conduct. When a person in Pakistan is branded a drug trafficker or an addict, it is considered shameful and such individuals are locked out of normal society as pariahs. This social labelling can compel a person to embrace his or her labeled status and continue with the labelled criminal behavior. Thus, labeling an individual either a drug abuser or drug trafficker can put them in the cycle where they will continue to use drugs and be a criminal because that is what

they are expected to be. Thus, in this way, tracing the societal reaction and stigmatization, the suspects can justify their further involvement in the drug trafficking and abuse as they are forced into the sphere of criminality with minimal opportunity to alter their situation.

- **Connecting Both Theories**

With both theories, one can say that drug abuse and trafficking in Pakistan are not only due to individual sin but are equally due to learnt behavior and response from the society. Norms dictate the involvement in drug-related criminal activities so that people are forced to engage in such activities, besides, labels concretize the individuals' position as criminals. This cyclic nature of the activities presents a challenge as those involved find it hard to escape the life of crime. In light of this, both the Behavioral Theory and the Labeling Theory could be used to justify drug abuse and trafficking as reactions to the learned behavior and associated labels from the societal setting.

Legal framework and policies in Pakistan

Pakistan's approach to drug usage and trafficking is primarily governed by a series of laws that aim to combat the production, trafficking, and consumption of narcotics. The legal framework, though comprehensive in its scope, has faced criticism for its heavy reliance on punitive measures and inconsistent enforcement. These laws are largely shaped by international conventions and a strong emphasis on prohibition, with limited focus on rehabilitation and harm reduction.

The Control of Narcotic Substances Act, 1997

On 05-05-1995 the Federal Government of Pakistan promulgated an Ordinance namely Control of Narcotics Substances Ordinance, 1995 to control the production, processing and trafficking of Narcotic drugs and substances as well as to regulate the treatment and rehabilitation of narcotic addicts and for matters connected therewith and incidental thereto (Jamshed & Bakhsh, 2024). All these provisions of past laws like the Customs Act, 1969, Prohibition (Enforcement of Had) Order, 1979, Drugs Act, 1976, Pharmacy Act, 1967, Dangerous Drugs Act, 1930, and Opium Act, 1878 (I of 1878) are collectively included in the provisions of the Act (Hussain, Ahmad, Hashmi, Hussain, & Latif, 2003). Moreover, it possesses some new provision that includes, among others death penalty for drugs trafficking and finance. Also, asset generated from narcotics drugs is recovered (Raw, 1931). Under S.2(s) of the Control of Narcotic Substances Act, 1997, 'narcotic drug' meant Coca Leaf, Cannabis, heroin, opium, poppy straw and all manufactured drugs (Patabendige, 2023). Poppy straws were also included in the definition of 'opium' as provided under S.2(t)(i) of the said Act.

The primary objectives of the Act are:

- **prohibition of drug trafficking:** The law criminalizes the trafficking of narcotic drugs, providing for severe penalties, including life imprisonment and the death penalty for large-scale traffickers. The law includes specific provisions regarding the production and manufacturing of drugs, ensuring that these activities are punishable under the criminal code.
- **control over drug consumption:** Prohibitive measures against possession and consumption control drug use, especially among youth and marginalized groups. Any person found in

possession of narcotic drugs is liable to severe punishment, which may include fines or imprisonment. The Act provides for compulsory rehabilitation in some cases, though such facilities are few and underdeveloped.

- **prevention and enforcement:** The act also include the areas of operation with regard to trade in drugs and other activities connected therewith such as business, farms, laboratories, etc., and enforcing tough monitoring measures. Pakistan's ANF is supposed to enforce provisions of this law along with all other law-enforcing agencies.

The Anti-Narcotics Policy, 2010

The Anti-Narcotics Policy (2010) is the policy that shall complement the CNSA by covering the broader aspects of drug abuse, focusing particularly on prevention, treatment, and rehabilitation. This policy recognizes the fact that drug use is indeed a public health issue rather than a criminal justice concern. It indicates strategies in four key areas:

- **Prevention:** Education and public awareness campaigns will form the main focus of the policy to prevent the intake of drugs through targeted programs towards youth and other vulnerable populations. Efforts are taken through school-based interventions and community outreach programs.
- **Treatment and Rehabilitation:** The policy accepts the rehabilitation, but it is implemented very slowly. The number of treatment centers is supposed to increase and rehabilitative services access also supposed to expand. But demand for the services is much greater than the available number of treatment services.
- **Law Enforcement:** The policy advocates strengthening law enforcement to combat the trafficking of narcotics, particularly along Pakistan's borders with Afghanistan, which is a major source of opium and other narcotics. Enhanced cooperation with international organizations, such as the United Nations Office on Drugs and Crime (UNODC), has been emphasized.
- **Collaboration with International Agencies:** The policy identifies regional and international cooperation in a drug control, especially neighboring country Afghanistan, in which there would be coordination on some joint initiative or programs that require collaboration among such countries like countries in Central Asia, the Middle East, in preventing transnational drugs trafficking.

Although the Anti-Narcotics Policy, 2010 calls for a comprehensive approach, it has been further marred by systemic issues including limited resources and lack of an integrated public health approach.

National Anti-Narcotics Strategy, 2019

The National Anti-Narcotics Strategy, 2019 provides a more recent comprehensive approach to deal with drug issues in Pakistan. It enunciates the specific measures that need to be taken through various sectors to tackle drug abuse, which are as follows:

- **Strengthening the Rule of Law:** The strategy aims at building the capacity of Pakistan’s law enforcement agencies to deal with drug trafficking. This includes training both domestically and internationally.
- **Public health approach:** The strategy calls for an increased emphasis on a public health approach to drug addiction, shifting some focus away from criminalization toward rehabilitation and harm reduction. This includes the expansion of drug rehabilitation centers, community-based treatment programs, and support for individuals recovering from addiction
- **Decrease Narcotics Demand and Supply:** The approach is to reduce both the demand for and the supply of narcotics. While law enforcement will continue to target traffickers, there is a new emphasis on reducing domestic consumption by addressing social determinants of drug abuse, such as poverty, unemployment, and lack of education.
- **Enhancing Regional Cooperation:** Being a prime transshipment county for Afghan opiates, the strategy recommended significant cooperation with the neighboring countries and international partners. It is said that joint operations with Afghanistan security forces should be made to confront cross-border trafficking and enhance surveillance on the drug routes.

Pakistan is a very vital country in the world concerning narcotic drug issues. Due to efforts of the Federal Government and the Provincial Governments the cultivation of poppy crop has almost been abolished. This was done only due to enforcement of strict laws such as Control of Narcotics Substances Act, 1997. It is very strange situation that after promulgation of such harsh CNSA, 1997, drug trafficking has not been controlled and narcotics demand have not abridged.

Challenges to drug control in Pakistan: Many major challenges hinder the proper control of drug use in Pakistan

Corruption among Law Enforcement Agencies

The systematic corruption in Pakistan’s law enforcement agencies weakens the implementation of drug laws. Since there is bribery to let go of the criminals, there lack accountability, and this continues to perpetuate illicit trade. Systematic corruption hinders the control exerted over drugs and transgressors

Lack of Rehabilitation Infrastructure

The country also has a chronic lack of rehab facilities; currently, it is left with only around 200 treatment facilities, and many are very underfunded and poorly resourced. The victims of addiction mostly end up behind bars rather than being given a proper care system. This sets the country in a cycle of addiction, recidivism, and overpopulation of prisons, giving a less probable chance of rehabilitation.

Cross-Border Drug Trafficking:

Geography for Pakistan, especially having a long border with Afghanistan, makes Pakistan a major transit country for narcotic smuggling. The porous nature of borders combined with weak border

security and coordination with neighboring countries has facilitated the trafficking of illegal drugs in and through Pakistan. This difficulty is further complicated for one continuous conflict in Afghanistan, that has expedited the construction and motion of opiates.

Social Stigma and Lack of Awareness

Drug consumers in Pakistan face significant social stain, that frequently prevents them from pursuing treatment. The general negative idea of addiction as a moral failing alternatively a healing condition frightens many things from achieve restoration duties. This cultural impediment irritates all health disaster encircling drug abuse, as people are unwilling on the way forward and inquire help.

Limited Prevention and Education Programs

Drug stop and instruction programs are broadly deficient and useless in Pakistan. There are any government programs, but these are lacking and do not reach a ample number of nation, specifically in country and impoverished domains. There is a lack of overall public instruction, and many individuals are not accomplished on the hazards of drug use and available means of stop and situation.

Economic Factors and Poverty

Socioeconomic environments in Pakistan, specifically want and inaction levels, are being the reason for drug addiction. Most individuals, especially youths in disadvantaged societies, engage in drugs as a way of mitigating stress, lack of opportunities, and social instability. Economic factors exacerbate the addiction cycle, as individuals affected are harder to liberate without the presence of proper support systems.

Inadequate Interagency Coordination

There is often a lack of coordination between various governmental and non-governmental agencies involved in drug control efforts. Disjointed policies and conflicting priorities among law enforcement, health services, and social welfare organizations further hinder progress in addressing the drug crisis. Effective drug control requires a unified approach, with clear communication and collaboration between all stakeholders. These above factors reflect the complexity of Pakistan's drug issue and thus calls for all-round, integrated, and long-term initiatives to handle the situation.

Recommendations for change

To tackle the drugs crisis in Pakistan, an all-round system is required. Here are some more recommendations that can implement change within the policies

Adopt a Public Health Approach

Pakistan should move towards the kind of harm-reduction model set by Portugal, where it has successfully decriminalized possession of drugs for personal consumption and focused more on treatment than punishment. This would include:

Decriminalization of drug possession for personal use in the direction of instead pursuing treatment over punishment

Pursuit of harm-reduction programs, such as needle distribution, equipped with spaces for supervised consumption.

Access to rehabilitation services, ensuring that drug users have the opportunity to recover through medical and psychological support. Expanding the number of government and private rehabilitation centers is critical, as Pakistan has fewer than 200 centers for over 7 million drug users.

Strengthen Border Control and Regional Cooperation

Pakistan's strategic position as a key route for drug trafficking from Afghanistan necessitates stronger border security and international cooperation:

Enhanced border patrols and the use of advanced surveillance technology at critical border points can help deter smuggling.

Increased collaboration with Afghanistan and other neighboring countries on counter-narcotics initiatives is essential. Joint efforts, including intelligence-sharing and coordinated operations, will help disrupt drug supply chains.

Capacity building in border control agencies can improve enforcement and prevent the diversion of drugs.

Expand Rehabilitation Services and Create Integrated Treatment Networks

The rehabilitation sector in Pakistan is grossly underfunded and underdeveloped. Expanding and improving rehabilitation services should be a top priority:

- Increase the number of treatment centers, ensuring geographic accessibility, especially in rural and underserved areas. Currently, fewer than 200 treatment centers serve a population of 7 million drug users.

- **Integrate the treatment networks:** These should integrate medical, psychological, and social support services. It is not just the rehabilitation centers but also community-based support systems, outpatient clinics, and access to mental health services.
- **Public awareness campaigns:** These should destigmatize addiction and focus on the effectiveness of rehabilitation programs. More people would be encouraged to seek help instead of avoiding treatment due to societal pressure.

Enhance Transparency and Accountability in Law Enforcement: Corruption in Pakistan's law enforcement agencies is one of the main impediments to effective drug control. Ensuring transparency and accountability is a must:

Reforms in the police and judicial systems should be implemented, including independent oversight bodies to monitor law enforcement activities and prosecute corruption. Regular training of law enforcement officers on drug law enforcement and human rights should be provided to ensure proper application of drug laws.

Zero tolerance policy for corruption: severe penalties to officers involved in drug trafficking or bribery

Establish comprehensive education and prevention programs. Education is an essential tool for the reduction of drug use, particularly among the youth:

Introduce nationwide drug prevention programs in schools and communities, raising awareness of the dangers of drug use. Evidence-located programs have been proved to weaken the prospect of drug test.

Focus on early interference by preparation teachers, society leaders, and parents to perceive early signs of drug use and determine support.

Use publishing campaigns to shift everybody awareness of drug addiction from a criminal issue to a health issue, lowering the stain nearby pursuing help.

Improve Data Collection and Research on Drug Use:

Effective policymaking demands correct and current data:

Strengthen the national data collection structures on drug use and accompanying harms to educate evidence-located procedures.

Research on drug addiction currents and the influence of rehabilitation programs concede possibility be prioritized, with financing allotted for studies that evaluate existent interferences and intend bettering.

Economic Support for At-Risk Populations:

Addressing the socio-economic motorists of drug addiction, in the way that want, unemployment, and lack of excuse, is detracting:

Economic authorization programs for at-risk populace through abilities preparation, trade, and additional economic help bundle to underrate drug reliance on account of socio-financial stressors.

Community happening projects in regions with extreme drug use in consideration of better living environments and weaken want-connected drug reliance. 8. International Best Practices

Learn from nations that have achieved favorable drug control procedures:

Study worldwide best practices in drug control, in the way that Canada's approach to directed devouring rooms and harm-decline procedures, and tailor these to Pakistan's framework.

Strengthen combine worldwide arrangements to a degree the United Nations Office on Drugs and Crime (UNODC) to attain to knowledge, mechanics help, and possessions.

By forwarding these challenges through inclusive corrects, Pakistan can establish a more equalized, productive, and kind approach to halting the drug situation. These steps would lower drug-connected harm, advance improvement, and increase community health and security.

Conclusion

The Pakistan drug abuse catastrophe is a versatile issue that is to say compelled by socio-economic challenges, restricted approach to rehabilitation aids, and an undeveloped legal structure. Efforts apiece administration to curb drug use have happened principally useless due to contradictory law enforcement, a devote effort to something penalty over restoration, and a lack of money. The criminal lawfulness structure is frequently more have to do with imprisonment alternatively rehabilitative resolutions. A fundamental shift towards a community health approach, conducting in addition punitive, Is a must in fighting the growing drug question. Decriminalizing control of drugs for individual use, harm decline programs, and a important increase in the number of rehabilitation centers are all wanted. Lessons maybe Pakistan can humble the societal and energy-relevant harms of drug use by fixating on restoration, society-located support schemes, and destigmatizing drug addiction, as has existed visualized in favorable worldwide models like Portugal, place decriminalization, harm decline, and extensive rehabilitation policies have managed to notable betterings in community health and drug-connected effects. Improving border control, enhancing law enforcement transparency, and fostering regional cooperation will also help curb the flow of illicit drugs into the country. With a concerted and holistic strategy, Pakistan has the potential to effectively address its drug crisis, enhance the quality of life of its citizens, and foster long-term social and economic stability.

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