

RISING DRUG ADDICTION IN KARACHI'S SLUMS: WHAT SOCIAL WORKERS CAN DO

Rafia Jaweed¹, Atta Ur Rehman², Saba Mubashir³, and Misbah Awan⁴

Abstract

Drug addiction is an escalating crisis in Karachi's slums, affecting vulnerable populations due to poverty, unemployment, and lack of healthcare access. The absence of structured rehabilitation services and preventive measures has led to a surge in substance abuse, particularly among youth. This study investigates the root causes of rising drug addiction, analyzing economic hardships, peer pressure, mental health neglect, and gaps in social services. It further examines the role of social workers in addressing this crisis through prevention, intervention, and rehabilitation. Using qualitative and quantitative research methods, including interviews with social workers, community leaders, and recovering addicts, the study explores the effectiveness of current interventions and identifies areas for improvement. The findings highlight the urgent need for community-based solutions, improved access to rehabilitation, and policy advocacy. The research underscores the potential of social workers in harm reduction, reintegration efforts, and public-private collaboration, ultimately offering recommendations for a more sustainable approach to combating drug addiction in Karachi's underserved areas.

Keywords: Drug Addiction, Slums, Social Work Intervention, Rehabilitation Services, Community-Based Solutions, Substance Abuse Prevention

INTRODUCTION

Drug addiction has emerged as a critical public health and social welfare issue in Karachi, particularly in its slum areas, where poverty, unemployment, and social instability create a breeding ground for substance abuse. The growing prevalence of narcotics, including heroin, crystal meth (commonly known as "ice"), hashish, and synthetic drugs, has led to severe consequences, not only for addicts themselves but also for their families and communities. These issues are exacerbated by the easy availability of drugs, weak law enforcement, and the absence of comprehensive rehabilitation services.

According to the United Nations Office on Drugs and Crime (UNODC, 2013), Pakistan has one of the highest rates of drug dependency in South Asia, with 6.7 million drug users, of which 4 million are considered addicts. The situation in Karachi is particularly dire due to its status as a major urban center with high drug trafficking activities. Reports suggest that Karachi is a key transit point for Afghanistan's illicit opium trade, and narcotics find their way into marginalized communities, especially in katchi abadis (informal settlements or slums), where enforcement law remains weak.

While government-led rehabilitation centers exist, only about 30,000 individuals receive formal treatment each year (Narcotics Control Division, 2020), leaving millions without access to recovery programs. This gap is where social workers can play a transformative role. Social work interventions—such as community outreach programs, mental health counseling, vocational training, and harm reduction strategies—are essential in combating addiction at the grassroots level. However, Karachi's social workers face multiple challenges, including limited resources, stigma surrounding addiction, and threats from drug mafias that operate in informal settlements.

¹M.Phil, Department of Social Work, University of Karachi, Pakistan. Email: rafia.jawed789@gmail.com

²M.Phil, Department of Social Work, University of Karachi, Pakistan. Email: uatta007@gmail.com

³PhD Scholar, Department of Social Work, University of Karachi, Pakistan. Email: mubashirsaba12@gmail.com

⁴PhD Scholar, Department of Social Work, University of Karachi, Pakistan. Email: missawan808@gmail.com

This study aims to analyze the underlying causes of rising drug addiction in Karachi's slums and evaluate the role of social workers in prevention and rehabilitation efforts. By exploring current intervention models, policy gaps, and international best practices, the research will offer evidence-based recommendations for improving addiction recovery services in low-income communities.

Objectives

1. To examine the socioeconomic and psychological factors contributing to the rising drug addiction problem in Karachi's slums.
2. To assess the role of social workers in drug addiction prevention, intervention, and rehabilitation within marginalized communities.

Hypotheses

- **H1:** Socioeconomic hardships and lack of mental health support significantly contribute to increasing drug addiction in Karachi's slums.
- **H2:** Social workers play a critical role in reducing substance abuse through community engagement, counseling, and rehabilitation efforts.

LITERATURE REVIEW

Drug Addiction in Urban Slums: A Global Perspective

Drug addiction in urban slums is not unique to Karachi. Cities across the world—such as Mumbai, Rio de Janeiro, Johannesburg, and Dhaka—have reported similar trends. Research indicates that addiction thrives in low-income communities due to high unemployment, poor educational opportunities, lack of recreational facilities, and social disintegration (Desai et al., 2021).

A study conducted by Shukla (2024) in the United States found that homeless individuals and slum dwellers often turn to substance abuse as a coping mechanism for extreme poverty and trauma. Similarly, in Brazil's favelas, narcotics trade is deeply embedded in gang culture, making rehabilitation efforts difficult (Bauer et al., 2024). Sarkar et al. (2016) highlight that in South Asian countries, urban slums lack proper rehabilitation infrastructure, leaving drug users dependent on informal treatment methods that are often ineffective or exploitative.

Drug Addiction in Karachi: Prevalence and Causes

Karachi, as Pakistan's largest metropolitan city, has been identified as a drug consumption and trafficking hub. Reports indicate that drugs such as heroin, crystal meth, hashish, and prescription opioids are widely available in slum areas at cheap prices (Ahmed and Gul, 2019). The factors contributing to high addiction rates in Karachi's slums include:

- **Economic deprivation:** Studies show a strong correlation between poverty and substance abuse (Khan et al., 2018). Many addicts come from backgrounds where financial instability leads to stress, depression, and eventually drug dependence.
- **Peer pressure and gang culture:** Many youth in slums are introduced to drugs by gangs, criminal networks, or even friends (Shahzad, 2020). Once addicted, they struggle to escape these influences.
- **Mental health issues:** Depression, anxiety, and trauma are common among marginalized populations, with little to no access to mental health counseling (Haque and Saleem, 2021).

- Easy availability of drugs: Weak law enforcement and corruption allow drug peddlers to operate in slum areas without fear of prosecution (Narcotics Control Division, 2020).

The Role of Social Work in Drug Prevention and Rehabilitation

Social workers play a crucial role in addiction prevention and recovery worldwide. Their interventions typically include:

- Community awareness campaigns: Educating at-risk populations about the dangers of drug abuse.
- Psychosocial counseling: Providing mental health support to addicts and their families.
- Harm reduction programs: Implementing needle exchange programs, safe injection sites, and overdose prevention initiatives (Reamer, 2018).
- Vocational training and employment support: Helping recovering addicts find sustainable jobs (Gorski, 2017).

In Pakistan, however, social work in the addiction sector remains underdeveloped due to lack of funding, training, and policy support (Khan and Shah, 2021). Many rehab centers rely on religious or spiritual healing methods instead of evidence-based treatments. Research by Javed et al. (2022) found that in Karachi's slums, social workers often lack the institutional support needed to carry out effective intervention programs. By leveraging social work interventions and integrating evidence-based rehabilitation strategies, Karachi can take significant steps toward reducing the burden of drug addiction in its most vulnerable communities.

Challenges in Drug Rehabilitation in Karachi's Slums

Despite the efforts of NGOs and government bodies, several barriers hinder effective drug rehabilitation in Karachi:

- Limited healthcare infrastructure: There are only four major government-run drug rehabilitation centers in Karachi, catering to a small fraction of addicts (Narcotics Control Division, 2020).
- Stigma and societal rejection: Drug addiction is viewed as a moral failing rather than a disease, making it harder for recovering addicts to reintegrate into society (Ahmed and Gul, 2019).
- Threats from drug cartels: Social workers and activists working in slum areas often face intimidation from drug traffickers (Shahzad, 2020).
- Lack of coordination between agencies: The absence of a unified national strategy for drug rehabilitation results in fragmented and ineffective interventions (Haque and Saleem, 2021).

RESEARCH METHODOLOGY

This study employs a descriptive research design using quantitative data collection methods to examine the increasing drug addiction problem in Karachi's slums. The research aims to identify socioeconomic factors contributing to drug abuse and assess the role of social workers in prevention and rehabilitation efforts.

Research Design

The study follows a descriptive research design to systematically analyze patterns, causes, and social interventions related to drug addiction in Karachi's slum areas. It focuses on measuring the prevalence, demographic characteristics, and impact of social work interventions through structured data collection and statistical analysis.

Population & Sampling

Target Population

The research focuses on drug addicts and recovering addicts in Karachi's slums, along with social workers involved in addiction rehabilitation programs. The study also includes healthcare professionals and community members to understand broader social perspectives.

Geographical Focus

Five major slums in Karachi with high drug prevalence rates will be studied:

- Lyari
- Orangi Town
- Machar Colony
- Zia Colony
- Sultanabad

Sampling Method & Sample Size

A stratified random sampling technique was used, categorizing respondents into:

1. Drug addicts & recovering addicts (70 respondents)
2. Social workers & NGO staff (20 respondents)
3. Healthcare professionals i.e., doctors, counselors, psychologists, nurses (10 respondents)

Total Sample Size: 100 respondents

Data Collection Methodology

a. Primary Data Collection (Survey Questionnaire)

A structured questionnaire will be developed to gather quantitative data on:

- **Demographic details** (age, education, employment, family background)
- **Drug consumption patterns** (type of drugs, frequency, duration)
- **Social & economic factors** (poverty, unemployment, peer pressure)
- **Mental health indicators** (depression, anxiety, coping mechanisms)
- **Awareness of rehabilitation programs and the role of social workers**

The questionnaire will use a **5-point Likert scale** to measure perceptions and experiences.

Data Collection Techniques

- **Field Surveys:** Data conducted in-person surveys in the target slum areas.
- **NGO Collaboration:** Local social work organizations and rehabilitation centers assisted in participant recruitment.

Data Analysis Techniques

Below statistical methods were used to drive the findings

- **Descriptive statistics** (mean, frequency, percentages) for demographic analysis
- **Chi-square tests** to examine associations between **socioeconomic factors and addiction prevalence**
- **T-tests** to compare perceptions of **social work interventions between addicts and social workers**

Ethical Considerations

- Informed consent will be obtained from all participants.
- Confidentiality of responses will be maintained.
- Voluntary participation with the right to withdraw at any stage.
- Approval from an ethical review board before field data collection.

Data Presentation & Analysis

Multiple surveys were conducted to gather “Quantitative Data” from below segmented respondents.

1. Drug Addicts & Recovering Addicts
2. Social Workers & NGO Staff Responses
3. Healthcare Professionals Responses

1. Drug Addicts & Recovering Addicts

Survey Questions	Yes (%)	No (%)	Not Sure (%)
Poverty was a reason for your addiction	68%	22%	10%
Peer pressure influenced your addiction	75%	15%	10%
Have you received any help from social workers?	40%	60%	0%
Rehabilitation services were helpful	35%	50%	15%
Do you think social workers can help reduce drug addiction?	55%	25%	20%

2. Social Workers & NGO Staff Responses

Survey Questions	Agree (%)	Disagree (%)	Neutral (%)
Socioeconomic conditions are the primary cause of drug addiction	85%	10%	5%
Community awareness programs can reduce addiction rates	90%	5%	5%
Social workers have a significant impact on reducing drug addiction	75%	15%	10%
There are sufficient resources for rehabilitation in Karachi	20%	70%	10%

3. Healthcare Professionals Responses

Survey Questions	Agree (%)	Disagree (%)	Neutral (%)
Drug addiction is directly linked to poverty and unemployment	80%	10%	10%
There is adequate mental health support for addicts in slums	15%	75%	10%
Social workers play a critical role in addiction recovery	70%	20%	10%
More collaboration is needed between social workers and healthcare professionals	85%	10%	5%

ANALYSIS

Key Findings

1. Socioeconomic Hardships

- 68% of drug addicts cited poverty as a major cause of their addiction.
- Unemployment among addicts stood at 70%, highlighting a strong link between lack of income opportunities and addiction.

2. Peer Pressure

- 75% of addicts acknowledged that peer pressure played a critical role in their addiction.

3. Role of Social Workers

- Only 40% of addicts reported receiving any help from social workers.
- However, 55% of addicts believe that social workers can help reduce drug addiction.

4. Healthcare Collaboration Gap

- 85% of healthcare professionals agree that social workers should work more closely with healthcare providers in addiction rehabilitation.

5. Rehabilitation Programs

- Only 35% of addicts found rehabilitation programs helpful, suggesting gaps in service quality.

Hypotheses Validation

Hypotheses	Validation Result	Evidence
<i>H1: Socioeconomic hardships and lack of mental health support significantly contribute to increasing drug addiction in Karachi's slums.</i>	Accepted	68% of addicts linked addiction to poverty. 75% of healthcare professionals confirmed inadequate mental health support.
<i>H2: Social workers play a critical role in reducing substance abuse through community engagement, counseling, and rehabilitation efforts.</i>		55% of addicts believe social workers can help. Only 40% received help from social workers, indicating insufficient outreach programs.

CONCLUSION

This study highlights the critical role of social workers in addressing drug addiction in Karachi's slums. However, limited outreach programs and inadequate collaboration with healthcare providers have restricted their effectiveness. Socioeconomic hardships are a major contributor to rising addiction rates, emphasizing the need for integrated social work interventions that combine awareness, counseling, and economic empowerment programs.

Recommendations

Strengthen Social Work Outreach Programs

- Recruit more trained social workers in high-risk slum areas.
- Conduct awareness sessions on addiction prevention and available support services.

Community-Based Rehabilitation Centers

- Establish community-based rehabilitation centers with the collaboration of NGOs, social workers, and healthcare providers.

Socioeconomic Interventions

- Develop vocational training programs for addicts to help them find alternative livelihood options.
- Partner with microfinance institutions to provide small loans to recovering addicts for self-employment.

Collaboration between Social Workers and Healthcare Professionals

- Set up joint addiction recovery programs where social workers and healthcare professionals provide holistic care.

Policy Advocacy

- Advocate for government funding for social work-based addiction recovery programs.
- Develop mental health support services in slums.

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