Consequences of criminalization: the Dutch khat market before and after the ban

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Consequences of criminalisation: the Dutch khat market before and after the ban

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Abstract

Aims: To evaluate the consequences of criminalising khat, with a focus on the changes in law enforcement and the use, availability, price and quality of khat in the Netherlands.

Methods: Mixed methods, including law enforcement data, expert interviews, focus group interviews with members of the Somali community, and a survey among 168 current (last month) khat users.

Findings: Soon after the law changed (early in 2013), and khat had become an illicit drug, much of the khat imported from Africa was confiscated at Schiphol International Airport and users found it more difficult to obtain fresh khat leaves. About two years after the ban had been implemented, the price of fresh khat at user level had increased tenfold on average, and much of it was of poorer quality (e.g. sold in dried or powdered form).

Conclusion: Criminalisation of khat in the Netherlands had substantial consequences for the khat market, predominantly because the ban was actively enforced at a crucial stage in the distribution chain (transcontinental import by air) and there was a lack of alternative transportation routes that could supply users with fresh khat. It is highly likely that the total number of Somali khat users in the Netherlands dropped, but that the proportion of dependent and poor, “problem users” increased.

Keywords

Migrants, somali, drug policy, law enforcement, drug price, drug quality

Introduction

The leaves of the shrub Catha edulis (khat or qat) have been used as a stimulant for centuries in the Horn of Africa, including in Somalia (Rätsch, 1988). The potency of khat decreases within a few days of harvesting, and usually, fresh leaves are put in the mouth and chewed for several hours. The main active component in khat is cathinone, another is cathine. Both have a stimulating effect and are included in the UN International Convention on Psychotropic Substances of 1971. In 1994, cathinone and cathine were added to the Dutch drug law (Opium Act).

Khat itself is not on the list of controlled substances of the 1971 UN Convention, nor of later UN drugs conventions. This is in line with the advice from the WHO (WHO, 2006). Nonetheless, khat has become a controlled substance in a growing number of western countries in recent years. Sweden and Norway banned the substance as long ago as the late 1980s (Klein et al., 2012; Nordgren, 2013) and since then a khat ban has been implemented in 16 other European countries. In several of these, the rapidly increasing number of Somali migrants and the concomitant use of khat has particularly contributed to calls for a ban on the drug (Klein et al., 2009). Supporters of the ban included members of the Somali and other migrant communities, who emphasised the negative impact of khat use on psychological and social wellbeing, and on their family and community (Hansen, 2013; Nordgren, 2013; Patel et al., 2005).

The international scholarly literature has argued that, for example in the United Kingdom (UK), the political decision to ban khat was not based on scientific evidence in terms of health risks, but rather on considerations of crime control, nationalism, the backlash against immigrants and counterterrorism (Klein, 2013). More than a year before the khat ban came into force in the Netherlands, a scientific study had been carried out (De Jonge & Van der Veen, 2011). Although the authors in no way suggested that their findings were a call for a ban, in the parliamentary debate preceding the decision to make khat illegal referred to that study and also considered contributions from members of the Somali community, arguing that the ban was meant to improve the social position of migrants (Korf, Nabben, & Wouters, 2015). We cannot rule out that, perhaps implicitly, nationalism and antimigrant sentiments played a role, but these were not voiced during the parliamentary debate. Rather, the pro-ban arguments included...
that the Netherlands – just like the United Kingdom (Thomas & Williams, 2013) – no longer wanted to be out of step with neighbouring countries that had criminalised khat, in some cases many years previously. Therefore, it could be argued that the Netherlands and the United Kingdom were more reluctant than neighbouring countries to criminalise khat and the migrants who use it.

In the Netherlands, which, as detailed below, had also seen a rapid rise in the numbers of Somali migrants over several decades, khat was put on Schedule II (“‘soft drugs’) of the Opium Act, and possession, sale, cultivation and trade became illegal. The United Kingdom made khat an illicit drug in the summer of 2014. In both countries, the legislation aimed to improve the social position of migrants; to concure international; and to avoid the countries becoming commercial khat hubs for the rest of Europe (Thomas & Williams, 2013).

However, critics doubt whether a khat ban will improve the social and economic conditions of Somali migrants. They point to, inter alia, the risk of the marginalisation of users (Bongard et al., 2015; Feigin et al., 2012; Klein et al., 2009; Nencini et al., 1989). In terms of the khat market, Klein & Metaal (2010) argue that, if banned, khat becomes more expensive and of poorer quality, and there may be a risk of a substitution effect: an example is the use of synthetic drugs such as mephedrone, which is chemically similar to the cathinone compounds found in the khat plant. Odenwald et al. (2010) mention the same risks, but are more specific:

If banned (…) the group of excessive users could continue to grow and there would be little way to monitor this change. The price is likely to increase making it a more valuable commodity but one that poorer people will either not take up or take up with greater financial strain. (p. 618)

The risks above may sound plausible, but to date, the evidence is generally based on a few cases or on local impressions. For instance, in several countries, some khat traders switched to other criminal businesses after the drug was banned (Anderson et al., 2007; Grayson, 2005).

An increase in the price of khat after criminalisation fits perfectly with the policy logic concerning the relationship between drugs and drug prices. Thirty years ago, Reuter and Kleiman (1986) argued that the core idea of this logic is that drug dealers translate all the extra costs they incur because of drug control (seizures, forfeiture of money and goods) into higher prices. To support their statement that a ban on khat leads to a large increase in price, Klein and Metaal (2010) refer to Toronto (Canada), where, after the ban, prices shot up “for a poorer quality product” (p. 587). However, this may not always happen in practice: Caulkins and Reuter (2010), for example, concluded that when law enforcement was intensified in the United States, the prices of cocaine, heroin and marijuana dropped rather than rose in the longer term. To explain this, they refer to the complexity, global and competitive nature of the illicit drug market. Reuter and Trautmann (2009) also argue that despite all drug control efforts, global drug production and trade has not diminished.

Overall, as yet there is little evidence that more stringent control measures (including the higher risk of arrest, imprisonment and confiscation of drugs) automatically lead to price increases at the different distribution levels (Pollack & Reuter, 2014). Killias et al. (2011) draw a different conclusion from their analysis of the development of the cannabis market in Switzerland. During the 1990s, the cultivation of cannabis became increasingly tolerated, but traditional repressive policies were resumed in 2004. The Swiss researchers conclude that this policy shift led to decreased availability, higher prices and lower levels of cannabis use.

Thus, we are far from a final conclusion about the effects of criminalisation and decriminalisation of cannabis, because in the long-term throughout Europe, up- and downward trends in the prevalence of cannabis use can be observed, regardless of the legal status of the drug (EMCDDA, 2016). In summary, the scholarly literature does not allow for generally valid conclusions regarding the consequences of the criminalisation of the drug market. The purpose of this paper is to present a better understanding of some of the consequences of the criminalisation of khat. In evaluating the Dutch ban, our areas of interest were the characteristics of the khat market in the Netherlands before the ban; how control and enforcement were brought into practice after prohibition; and, at khat user level, the consequences for the drug’s use, availability, price, and quality.

**Somalis in the Netherlands, the Dutch khat market, and policy before the ban**

In this section, we summarise the Dutch situation in the years before the khat ban. The arrival of Somalis in the Netherlands was predominantly due to years of war in the country of origin. Between 1996 and 2001, the number of persons who themselves or whose parents were born in Somalia rose from approximately 20,000 to 30,000 (Van Heelsum, 2011). Because some of these immigrants decided to move to other European Union (EU) countries, the UK in particular, the number of Somalis in the Netherlands dropped to approximately 19,000 in 2007 (Van Heelsum, 2011), but then increased again. At the beginning of 2011, approximately 31,000 Somalis were registered in the Netherlands. By early 2015, this number had grown to approximately 39,000 (an increase of 25% in four years). This increase was largely accounted for by children and adolescents (many of them born in the Netherlands)—the number of adults remained relatively stable.

In the wake of the Somali migration to the Netherlands, khat also arrived on the Dutch market, because those who had used it in Somalia continued their khat use in the Netherlands. According to the national and local experts we interviewed (as described in the Methods section, below), as the number of Somalis in the Netherlands grew, more and more fresh khat was imported: before the ban in early 2013, khat was categorised as a plant or vegetable and so could be freely imported and traded. The United Kingdom and the Netherlands (where khat was still legal) were major hubs for the khat trade, including its transit to other European countries. During the years before the ban, three or four flights with fresh khat arrived from Nairobi (Kenya) every week at Schiphol Airport, a major gateway for people and freight near Amsterdam. Portions of three or four bundles wrapped in banana leaves (together approximately 125 g)
were packed in boxes of 50 portions, with a total weight of approximately 6.5 kg per box. After completion of the customs formalities at Schiphol, dozens of Somali importers, sellers and users transported the khat in cars and vans to distribution points such as marfreshes/mafreshis (café-type establishments, including in homes, where khat is bought and used) in the Netherlands. A proportion of the imported khat went to Germany and Scandinavia, where the police sometimes confiscated hundreds of kilograms of it.

Initially, groups of Somalis gathered at a parking place near the arrivals area of Schiphol to acquire the khat. After persistent complaints by the airport authorities, the police directed the group of traders and users gradually further and further away from the airport, and they eventually settled in an industrial and business area near the arrivals area of Schiphol. As the central distribution point, Uithoorn was soon nicknamed ‘‘khat city’’. Traders came to Uithoorn from all over the country to buy fresh khat, which was distributed among Somali users on the same day. Despite complaints from surrounding businesses in Uithoorn about gatherings of Somalis and the khat trade being similar to illegal activities, reports to the police were rare. Trading in khat was still legal, and, according to the Public Prosecution Service, did not conflict with the official regulations for the area as an industrial and business zone. In 2007, the price of khat (as valued by Dutch customs, not including VAT and transport costs) on entering the Netherlands was approximately €10.00 per kilo and increased to €16.50 per kilo in 2010.

In 2011, about 18 months before the ban, khat use among Somalis in the Netherlands was systematically researched for the first time, through interviews with local experts and a survey among 114 Somali khat users. During the years of the rapid growth in the number of Somalis around the beginning of the new millennium, some Dutch municipalities reported problems related to the use of and/or trade in khat, including social problems such as homeless khat users. Indeed, some years before the ban, some communities had already developed local policies regarding the drug. For example, in the city of Arnhem, a public order measure was included in the local bye-laws, prohibiting the sale and use of khat in certain areas, and not allowing khat use within a radius of 500 m around a location where selling khat was tolerated (De Jonge & Van der Veen, 2011).

The picture of the khat market in the Netherlands that local experts sketched in 2011 (De Jonge & Van der Veen, 2011) was very similar to that in the United Kingdom: mobile khat traders with small businesses and an intricate network of buyers/users (Klein, 2008; Kassim et al., 2015; Patel et al., 2005). As in the United Kingdom (Thomas & Williams, 2013), prior to the ban, there were no clear indications of the involvement of organised crime in the Dutch khat market (Pennings et al., 2008), and supplies of the drug that had arrived at Schiphol airport were distributed several times per week to local traders and users.

**Methods**

This section summarises the methods used to gather data about the effect of the criminalisation of khat in the Netherlands. From May till October 2015, more than two years after the khat ban was introduced, we examined the consequences, using a combination of qualitative and quantitative methods (Korf et al., 2015).

In addition to the collection and analysis of documents, reports and quantitative law enforcement data, we conducted individual interviews (face-to-face or by telephone) with six law enforcement experts at national level and 27 local experts working in the 11 municipalities with the largest number of Somali residents (comprising 30% of all Somalis registered in the Netherlands). Interviews took 30–90 min. Three focus group interviews were held with a total of 20 members of the Somali community, including persons who used khat and/or were involved in selling it. In one focus group, all participants were female, in another they were all male and the third focus group was gender-mixed.

A survey was conducted among a convenience sample of 168 current khat users (who used the drug at least once a week). Respondents were recruited and interviewed face-to-face by a team of five trained privileged access field assistants who had many contacts within the Somali community across the Netherlands, including khat users and who spoke Somali and Dutch fluently. At the initial stage of fieldwork, field assistants identified potential participants through their own social networks (friends, relatives, acquaintances and colleagues) in different parts of the country, and then continued recruitment through snowball referrals as well as in marfreshes/mafreshis and other settings where Somalis meet (such as restaurants and community organisations). The interviews were conducted individually (i.e. in the absence of others) and began only after participants were informed about the purpose of the study and their informed consent acquired. A structured questionnaire was used, with mostly closed, but also some open questions, either in Somali or Dutch, according to participants’ preference. During the interviews, responses were entered onto a laptop by the interviewers. On average, interviews lasted approximately 45 min. After completion, respondents received a small compensation (€10).

In both the 2011 and the 2015 surveys, problem use of khat was determined by respondents’ scores on the Severity of Dependence Scale (SDS). This scale consists of five items about substance use in the last 12 months, with scores of 0, 1, 2 or 3 per item and a total score ranging from 0–15. In line with Griffiths et al. (1997), the cut-off score was set at 7. An SDS-score of 8 or higher indicates clinically problematic use.

In the interviews with national and local experts, the focus group interviews and the survey, various khat-related issues were addressed, including health and social problems. However, in this paper, the focus is on (changes in) the khat market in relation to the khat ban.

More than a year before the Dutch khat ban came into force, a similar survey among current Somali khat users had been carried out by privileged access field assistants, using a
similar recruitment strategy (De Jonge & Van der Veen, 2011). Our 2015 study used largely the same questionnaire and where possible and meaningful, results of the 2015 survey were compared with those of the 2011 survey. Differences were statistically tested, using SPSS (version 22, Chicago, IL). In this paper, differences are reported only when statistically significant ($p \leq 0.05$).

Findings

In this section, our findings on what has happened after the ban will be presented. Firstly, we describe how the de jure criminalisation of khat in the Netherlands was implemented. Subsequently, the focus shifts to the consequences for the Dutch khat market in terms of changes in the use of khat and other substances and the introduction and use of new khat products; the availability of khat at consumer level; and its price and quality.

Changes in law enforcement after the khat ban

We examined how and to what extent law enforcement changed after the ban. Although the priority in criminal investigation in terms of illicit drugs remained on cannabis, cocaine and synthetic drugs (MDMA and amphetamine), the distribution of imported fresh khat in Uithoorn ceased almost immediately after the ban had been implemented. There was some increase in khat smuggling from the United Kingdom to the Netherlands (e.g. overseas by the ferry to Hoek van Holland), but this considerably diminished after khat was also banned in the United Kingdom in the summer of 2014.

The disappearance of the distribution of fresh khat from Uithoorn was a direct consequence of the enforcement of the new law at Schiphol Airport, a major gateway for people and goods. Every day, 5–10 ‘risk’ flights arrive there from drug source countries, including those importing khat, and two-thirds of the passengers at ‘risk’ flights transfer from Schiphol to other European cities. Dutch Customs officials check the passenger lists (e.g. names, travel route, transit) and interview those about whom they have suspicions. In the case of travellers from khat-producing countries, officials also interview some persons on flights from Addis Ababa (Ethiopia), Mogadishu (Somalia) and Nairobi (Kenya). If drugs are found in luggage, the owner is referred to the Public Prosecution Service. In 2013 and 2014, only five persons were arrested, with a total of 1200 kg of khat (both fresh and dried). However, from January to July 2015 (the period for which we received the most recent data), there were significantly more arrests involving khat ($n = 34$), because a more intensive profiling strategy was applied. Most of the predominantly male suspects were born in Somalia but living in the Netherlands, the United Kingdom or in a Scandinavian country.

Dutch Customs at Schiphol Airport also investigates freight. All intercepted drug shipments, including khat, go to the Hit And Run Cargo (HARC) team, which deals with shipments from abroad meant for the Netherlands or direct transit to other countries, and also with exports from the Netherlands to other countries. The number of intercepted khat shipments (boxes, packages) and the quantities of khat seized show a similar pattern from the first quarter of 2013 until the second quarter of 2015 (Figure 1). In the whole of 2013, more than 900 shipments were intercepted (the main destination was the USA), with a total of over 7500 kg of khat. The last quarter of 2013 (over 600 consignments, totalling over 5000 kg) saw a sharp rise from previous quarters. In 2014, seizures were back to the previous lower level (350 khat shipments, totalling approximately 2000 kg). From the fourth quarter of 2014 onwards, however, there was another rapid rise. This can be explained because after khat was made illegal in the United Kingdom in mid-2014 that country could no longer function as the hub for transporting the product to the Netherlands.

Before khat became a controlled substance in the Netherlands, the Dutch police registered observed or reported ‘incidents’ in an automated national computer system. This system does not have a separate category for khat. In order to investigate how the khat ban led to changes in law enforcement within the country and thereby in the domestic market, the police (at our request) made a selection of the incidents that included ‘khat’ and/or ‘qat’ for the period 2011 till the first quarter of 2015. Figure 2 gives an overview of the number of incidents per quarter-year in which khat was confiscated. The years 2011 and 2012 show a relatively ‘quiet’ pattern (respectively 13 and 21 khat-related incidents on an annual basis). Khat was not yet an illegal substance and confiscated only occasionally, such as when it was found in cases of traffic offences, nuisance behaviour by users, or street dealing. However, immediately after the introduction of the ban (January 2013), the number of registered incidents strongly increased (total 157 in 2013) until summer 2014 (71 incidents during the first and second quarters), when khat was also banned in the United Kingdom. From then on quarterly figures were again similar to those before the Dutch khat ban.

Although overall, in the 11 Dutch municipalities with the largest number of Somalis not much changed in local policies
regarding khat users, the ban did allow for more opportunities for repressive measures. Because khat was included in the Opium Act, there was now a legal basis for (temporarily) closing down locations where khat was used and/or sold. For example, in the city of Tilburg, the police closed an apartment for three months after they found khat there on two occasions (121 bundles on one occasion and four on the other), and another property was expropriated when, after persistent complaints about nuisance related to dealing khat and warnings by the police to the tenants, the police found small quantities of khat there. The khat ban also provided community police with a legal tool to reduce the dealing and use of khat in public spaces. Within a year after the ban had come into force, the community police officers that were interviewed reported that they no longer observed khat-related activities on the street, and that there were hardly any reports of khat-related nuisance.

In terms of khat imports to the Netherlands, the interviewed experts from the National Crime Squad had the impression that new smuggling and transport routes (including parcel post) had evolved, but they had no evidence for the involvement of organised crime in the khat trade.

**Consequences of criminalisation for khat users**

The vast majority of the 168 current khat users in the 2015 survey were male (85.1%) and were born in Somalia (95.2%). Over half lived alone. As shown in Table 1, these demographic characteristics did not differ from participants in the 2011 user survey reported by De Jonge & Van der Veen. However, the 2015 participants were an average of almost two years younger (mean 36.7 vs. 38.5 years). A more significant difference was the poorer economic situation: a smaller proportion of the 2015 participants had paid employment and a much larger proportion had a monthly income per household below €500 (28.4% vs. 4.8%). Questions about receipt of social benefits (welfare, unemployment) were not asked in the 2011 survey, but were the most common source of income for the 2015 sample (67.3%).

According to both the individually interviewed local experts and the Somali participants in the focus groups, after the ban, publicly visible khat selling disappeared and distribution to users went underground, but on a smaller scale than before the ban. Both groups were convinced that the ban had resulted in a substantial decline in khat use and a significantly smaller user population. More specifically, there was strong agreement in the focus groups that the ban had resulted in far fewer recreational users, but that within the smaller user population there was a larger proportion of persistent frequent and dependent users, with more financial problems. Focus group participants also reported that since the ban, users had to search more actively for khat; that there was more dried khat (and to a lesser extent khat in powder form); and that due to decrease in availability, the price of fresh khat had increased sharply. Although there are no statistics available, the interviewed experts from the National Crime Squad reported that first time freeze-dried khat was confiscated at Schiphol occurred after the Dutch ban was introduced, and, particularly after khat was also banned in the United Kingdom, both border control officials and the police found dried khat instead of the usual fresh leaves.

Almost three-quarters (71.4%) of all the 2015 respondents had used khat when living in Somalia. The mean age of respondents’ first use of khat (whether in Somalia or elsewhere) was 19 years. Current khat use took place mainly during the weekends: 47.0% used it one day per week and 14.3% were daily users. These findings were similar

| Table 1. Demographic characteristics of khat users in 2011 and 2015. |
|-----------------|-----------------|-----------------|
|                 | 2011 (n = 114)  | 2015 (n = 168)  | p    |
| Gender          |                 |                 | 0.880|
| Male            | 84.7%           | 85.1%           |      |
| Female          | 15.3%           | 14.9%           |      |
| Age             |                 |                 | 0.023|
| Range (years)   | 20–70           | 20–62           |      |
| Mean (years)    | 38.5            | 36.7            |      |
| Country of birth|                 |                 | 0.768|
| Somalia         | 95.7%           | 95.2%           |      |
| Other           | 4.3%            | 4.8%            |      |
| Living situation|                 |                 | 0.107|
| Alone           | 45.6%           | 51.8%           |      |
| With others     | 54.4%           | 48.2%           |      |
| Paid employment |                 |                 | 0.006|
| Yes             | 39.5%           | 29.2%           |      |
| No              | 60.5%           | 70.8%           |      |
| Monthly income respondent’s household | | | <0.001|
| <500 Euro       | 4.8%            | 28.4%           |      |
| 500–1000 Euro   | 41.9%           | 33.9%           |      |
| 1000–1500 Euro  | 34.3%           | 19.8%           |      |
| >1500 Euro      | 19.0%           | 17.9%           |      |

Figure 2. Khat-related incidents registered by Dutch police, per quarter.
to those of the 2011 survey. However, weekly expenditure on khat was more than three times higher for the 2015 respondents than for those in 2011 (average €75 vs. €22).

Since the ban, the price of khat at user level has increased dramatically – almost tenfold – from an average of €3.50 for a bundle of fresh khat in the 2011 survey to an average of €32 in the 2015 survey.

Of the respondents in 2015 who reported they had been using khat for at least three years, nearly three-quarters (70.4%) reported less frequent use at the time of the interview. Nevertheless, a large majority (87.5%) said they spent more money on khat than they did in 2012 (before the ban).

In the 2015 survey, almost twice as many respondents scored as ‘‘problematic users’’ on the SDS (18.8% vs. 10.5% in 2011).

Consequences of criminalisation for the supply of khat

Changes in the availability and supply of khat were examined by two methods: by comparing the survey data of 2015 and 2011; and by items in the 2015 survey. In both surveys, respondents most often bought khat in a marfresh/marfish, but less often in 2015 than in 2011 (46.1% vs. 57.1%). The most notable change was an increase in home delivery, that is, sellers specialising in khat, who deliver it to customers who have usually ordered it by telephone (17.9% vs. 2.7%). Other ways of acquisition (e.g. through friends/family, on the street) did not differ significantly from 2011. In reply to the question in the 2015 survey about whether it is now more difficult or easier to acquire khat than three years ago (in 2012, before the ban, although this was not mentioned explicitly in the question), the majority (65.1%) replied that it had become more difficult. The remainder answered that it was difficult, equally difficult or easy, but no-one stated that it had become easier. In their (qualitative) explanation as to what had become more difficult, the overall responses indicated that there was less supply and fewer sellers, so users need to search harder to find khat, including away from their home town. To explain their ‘‘more difficult’’ response, some participants spontaneously referred to illegal status of khat as a result of the ban, and that because the import of khat to the Netherlands is considerably less than previously, there are fewer vendors, who now have to take more precautions to avoid arrest.

Consequences of criminalisation for the quality and availability of fresh khat

In reply to the question of whether the quality of khat was better, worse or the same compared to three years ago, two-thirds (62.7%) of respondents in 2015 said that it had become worse. Most of the other participants (36.1%) said the quality had remained the same and only a few (1.2%) said that it had improved. Deterioration in the quality was mainly attributed to more time now being needed for transporting fresh khat from the source country to seller and consumer, meaning that the khat arriving in the Netherlands was already too dry and/or of poorer quality, as it loses its potency within a few days of harvesting.

Thus, khat had not only become more difficult to obtain, much more expensive and of poorer quality, the product also changed from being almost exclusively fresh to increasingly dried and powdered. Although, as in the 2011 survey, all respondents in 2015 had used fresh khat in the month prior to the interview, over one-third (37.5%) of those interviewed in 2015 had also or predominantly used dry khat and/or khat powder.

Almost two-thirds (61.9%) of the 2015 respondents had ever been offered dry khat (sometimes freeze-dried) in the Netherlands, some of them before the ban, but most afterwards. Almost half of all respondents (47.0%) had used dry khat in the Netherlands at least once, commonly for the first time after the ban, many reporting they did so because of the unavailability of the fresh product. More than one in three respondents (36.9%) had used dry khat in the month before the interview. The most common practice was to chew dry khat in the same way as fresh leaves. Other users preferred to soak the dry leaves in hot water first and then chew the wet product, or let freeze-dried leaves slowly defrost (without hot water) before using it like fresh khat.

One in three respondents (31.2%) in the 2015 survey had ever been offered khat powder in the Netherlands. Some reported they had used the powder before the ban, but more had used it afterwards. About one in eight (14.6%) had also used khat powder in the Netherlands. The vast majority used the powder for the first time in 2014, after the khat ban. One in 10 respondents (9.5%) used khat powder in the month before the interview. As with fresh khat, khat powder was usually chewed into a little ball in the cheek, although some made it into tea or mixed it with water. Still others first cooked the powder in water, then sieved and drying it before chewing the result. Like dried khat, khat powder was also primarily used because there was no fresh khat available.

We found no evidence that because of the khat ban, khat users were diverted to khat-like synthetic substances. None of the respondents in the 2015 survey reported to have ever used synthetic mephedrone, methylene, flephedrone or 4-fluoro. Only a few had ever used other stimulants (2.5% cocaine, 0.6% MDMA, 0% amphetamine). Daily tobacco smoking was reported by 55.4% of all respondents. Alcohol was much less popular (31.1% lifetime, 20.8% last month), but the majority of lifetime drinkers (63.4% of them) were drinking more alcohol than they did before the khat ban.

Conclusion and discussion

The purpose of this paper was to present a better understanding of the consequences of the criminalisation of khat. At the beginning of 2013, in the Netherlands khat was put on Schedule II (‘‘soft drugs’’) of the Opium Act, and possession, sale, cultivation and trade became illegal. In this paper, we focussed on the consequences for the availability, price and quality of the drug. In 2015, more than two years after the ban had been introduced, we conducted a mixed-methods study, including law enforcement data, expert interviews, focus group interviews with members of the Somali community and a survey among 168 current (last month) khat users. Our findings show that after khat had been banned in the Netherlands, the market adapted, in terms of distribution, product and price.
More than two years after khat had become an illicit drug, fresh khat had become 10 times more expensive for the consumer than before the ban. The most plausible explanation for this is that the formal change in legal status (i.e. law in the books), was translated into a real change in law enforcement (i.e. law in action).

At local level, the ban allowed for new policing strategies, such as arresting khat dealers and confiscating khat, and some locations where khat use was associated with nuisance were temporarily closed down and some apartments of khat dealers were confiscated. Police statistics show that these strategies were also brought into practice – albeit not very often and only in the first 18 months after the implementation of the ban. Active enforcement of the new law at Schiphol Airport had a much stronger impact on the Dutch khat market, because it resulted in the confiscation of large amounts of fresh khat imported from Africa. Initially, this could still to some extent be compensated for by khat that was exported from Africa to the United Kingdom, and from there transported to the Netherlands. However, this method was severely curtailed when khat was then also banned in the United Kingdom and imports to and exports from there were confiscated.

It could be argued that the effectiveness of the ban has been facilitated by the characteristics of the psychoactive ingredients in khat: freshness is essential, because its potency decreases within a few days after harvesting. Thus, the speed of its transport from the source country to users is also essential, and khat traffickers have to operate within a tight global time frame (Carrier, 2005). This also explains why fresh khat is so different from other drugs, whether licit or illicit. This difference could explain the sharp rise in price – a phenomenon that, according to some of the literature cited in the introduction (Caulkins & Reuter, 2010; Pollack & Reuter, 2014), does not apply to other illicit drugs – albeit that the latter may well be a consequence of increased production, adulteration and substitution.

However, our findings support previous claims that a ban on khat leads to higher prices and a poorer quality product (Klein & Metaal, 2010; Odenwald et al., 2010). In addition to a much higher price, the product itself changed. Less fresh khat was available, replaced by dried and powdered versions. An explanation for this is that these variants have less volume, making them easier to transport. The disadvantage is of course that they are less fresh. In adapting to this change, many users combined innovation and maintenance of the sociocultural tradition from their countries of origin by first making dried or powdered khat wet (thereby more like fresh khat) and then chewing it in the same way as fresh khat. The importance attached to the ritual of chewing could explain why, according to our user survey, synthetic cathinones have not gained popularity within the Somali community in the Netherlands.

Our findings confirm concerns about marginalisation. Compared with those from a Dutch survey among khat users in 2011 (De Jonge & Van der Veen, 2011), using largely the same methodology and respondents with similar demographic characteristics, larger proportions of those in our 2015 user survey had a very low income and, based on their score on the Severity of Dependence Scale (SDS), were classified as ‘problem users’.

Our survey among khat users does not allow for final, “hard” conclusions about changes in khat use among all Somalis in the Netherlands after the khat ban: we did not have the opportunity to survey a representative sample, but rather interviewed a convenience sample of current users. However, in the interviews with local experts and in the focus groups with participants from the Somali community, there was strong consensus that since the implementation of the ban, the number of khat users had substantially dropped and that a larger proportion of the remaining current users were khat dependent and poor. Thus, it is plausible to propose from our findings that one of the consequences of the ban was a smaller population of khat users, with smaller proportion of “recreational” users and a larger share of problem users.

In this paper, we evaluated the criminalisation of khat in the Netherlands during a period of just over two years. It might be that the observed developments in the Dutch khat market will persist and that the prevalence of current khat use will continue to decrease. However, since illicit drug markets are highly dynamic, it might also be, for example, that in the longer term khat-like synthetic drugs will become more attractive for the Somali community in some countries where khat is an illegal substance. To capture such market developments, future research over a longer period and in more countries is needed. Equally valuable would be investigations into the health and social consequences of a ban on khat, which space precluded us addressing in this paper.

Declaration of interest
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