

# Health Partnerships Overview and Scrutiny Committee 7<sup>th</sup> February 2012

## Report from the Director of Strategy, Partnerships and Improvement

For Action Wards Affected:

## Khat Task Group – Final Report

## 1.0 Summary

1.1 This report sets out the findings and recommendations of the Khat Task Group that are being presented to the Health Partnerships Overview and Scrutiny Committee for endorsement

### 2.0 Recommendations

2.1 The Health Partnerships Overview and Scrutiny Committee is recommended to endorse the Khat Task Group's recommendations for them to be passed to the council's Executive for approval.

### 3.0 Details

- 3.1 The final report of the Khat Task Group is attached at appendix 1. The task group was established because members were concerned about khat use amongst members of Brent's Somali community. Some of this concern came directly from the community, whilst non-Somali residents have also been affected in some way by the increase of khat use in the borough and reported this to councillors.
- The task group wanted to better understand the health and social impacts of khat because of the concerns raised by members of Brent's community about the drug. There were three main issues that the task group investigated:
  - The perceived impact of khat use on the community in Brent, particularly the health and social consequences of khat use.
  - Anti-social behaviour associated with khat cafes or *mafrish*
  - The perceived lack of treatment services and diversionary activities in Brent aimed specifically at khat users.
- 3.3 The task group worked to the following terms of reference:

- (i). Consider the social implications of Khat use to determine whether there are significant problems within user communities, especially Brent's Somali community.
- (ii). Consider whether the health of Khat users in Brent has suffered as a result of their use of the drug.
- (iii). Consider the impact that Khat use has had on families in Brent, particularly for women and children.
- (iv). Determine whether the Khat cafes in Brent are the cause or contributor to antisocial behaviour and health problems and whether there are any steps that can be taken to address these issues.
- (v). Consider whether more effective treatment services can be put in place in Brent aimed specifically at Khat use.
- (vi). Identify good practice already happening in Brent (such as the Help Somalia Foundations khat outreach work) and see what can be done to assist community organisations working with khat users.
- (vii). Work with the local community to develop possible recommendations and solutions that can be implemented and lead by the Somali community in Brent.
- 3.4 The members of the task group were:
  - Councillor Ann Hunter (chair)
  - Councillor Eddie Baker
  - Councillor Helga Gladbaum
  - Councillor Krupesh Hirani
  - Councillor Roxanne Mashari
  - Councillor Margaret McLennan
- 3.5 The task group has developed nine recommendations that it hopes can be endorsed by the Health Partnerships OSC. The members of the task group are of the view that these recommendations can make a positive contribution to those affected by khat, either because they are taking it or their friends or members of their family are taking it. The recommendations address the following subject areas:
  - Resolving immigration problems
  - Training, employment and diversionary activities
  - Treatment services
  - Regulation
  - Raising awareness of khat, its possible negative side effects, and promoting positive health messages
- Above all other issues, tackling unemployment is the one thing that the task group believes would go a long way to reducing khat use. Employment is crucial for health and wellbeing and to improve peoples' self esteem. Brent's Somali community has been fully involved in the review and happy to give their time to help members investigate this issue. There are some excellent organisations and impressive individuals working within the community to help people improve their lives in the UK.

But time and again members heard that unemployment was a major problem, from people who were unemployed as well as others within the community and this issue should be given top priority for those who are working with Brent's Somali community.

Background Papers - Khat Task Group report - Appendix 1 to this covering report

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