ABSTRACT:

The United States is a nation of immigrants. New immigrants bring their customs and their cultures to this country. Among many immigrants from Eastern Africa and the Middle East, the usage of the drug Khat is a cultural phenomenon. This often brings these new immigrants into conflict with the American legal system as Khat is a controlled substance in the United States. This paper examines the production and usage of Khat by these new immigrant groups in the United States.

The usage of the drug Khat by the many African and Middle Eastern immigrants throughout the United States may cause dangerous crimes in the future. This has been the experience in many parts of Africa where virtual chaos has been caused by usage of this drug. Common street names for Khat include: Abyssinian tea, African Salad, Miraa (Kenya) , Quat (Yemen), and Tschat (Ethiopia) . The usage of Khat is often associated with violent behavior by users.
Immigrants from Yemen, Ethiopia, Eritrea and Somalia are quietly fueling a growing demand in the United States that has seen a dramatic increase in the usage of Khat. Khat has been seen in Boston, rural California, Detroit, Dallas, Kansas City, New York Newark, Minneapolis, and Portland beginning in the 1980’s. It is smuggled from its’ natural habitat to be used by individuals of East African and Arabian decent. In some U.S. cities the shrub Khat has been openly advertised in grocery stores and restaurants. Many users openly admit to the police their use of Khat and their unawareness of the laws prohibiting it. The demand among East African immigrants in Canada fuels the trade in Khat as well. In a 1998 study in Canada by the Centre for Addiction and Mental Health (CAMH), Stephen Meredith interviewed members of the East African immigrant community and found that 95% were aware of the use of Khat by community members, 68% felt that frequent usage of Khat was very common, and that 92% felt that the usage of Khat affected family relationships (Nasrulla, 2000).

Ethiopia is a major Khat producing country, it is believed that this has contributed to the recently observed greater use of the shrub worldwide. With the influx of immigrants from East Africa and Arabian peninsula countries combined with the increased production of Khat by Ethiopian farmers, the utilization of Khat in the United States has increased in the past few years. Although Khat is illegal in the United States, it is a lawful product in many parts of the world including parts of Europe. The leaves from the green Khat shrub have been chewed like tobacco by millions across the Arabian Peninsula and Africa for over a millennium. Although chewing is the most common form of usage, dried Khat has also been made into a type of tea, sprinkled on food and even smoked (DEA, 2002).

**What is Khat?**

Khat (Catha edulis Forsk) is an evergreen shrub that grows naturally on the mountains of Yemen, Kenya, and Ethiopia. The plant has been cultivated and used for centuries by the indigenous people in Ethiopia and surrounding countries including Eritrea, Kenya, Somalia, Sudan, and Yemen. Fresh leaves and stems of Khat are chewed primarily to attain a state of stimulation and euphoria. The plant has reddish stalks like rhubarb that look like (other than the color) green onions. For the majority of these people, the use of Khat is an established cultural tradition for a variety of social situations. In these countries, the consumption and trading of Khat are legal in most cases. Due to adverse political, social and economic factors, the cultivation and usage of Khat in Ethiopia and Kenya has increased significantly in recent years. Richards (1993) observed that the active ingredient in Khat was Cathinone and that it closely resembled amphetamine in chemical structure (pp. 12).
Etter and Ali: Drug Usage --- The Khat is out of the bag

Cathinone, (S)-2-aminopropiophenone, the active component in khat, closely resembles amphetamine and ephedrine in chemical structure.
Trafficking

Woldemichael observed that in 1991, Khat related charges were filed against 10-20 Somali immigrants in the Minneapolis area. In January, 2001 a Khat smuggler was sentenced to an 8 month prison term after being convicted of Federal charges after U.S. Customs officials caught him at the Dallas airport with two suitcases stuffed with Khat (Global News and Addis Tribune).

The ban on Khat has raised prices on the drug. In an interview of Khadigia Ali, a community health worker at the Rexdale Community Health Center in Toronto, Canada: Nasrulla (2000) was told that: “On May 17, 1997, Canada made it illegal to possess, traffic or import khat under the Controlled Drugs and Substances Act. The effect was immediate and the price went through the roof. The street price of maruuf, a handful-sized bundle of khat, enough for one person to consume for one session, shot from as little as $45 to as much as $80.” Williams (2004) found that a dosage unit of Khat in Minneapolis, Minnesota went for around $60. Randall (1993) observed that a normal dosage unit of Khat consisted of 100-200 gm of leaves and stems that is chewed over a period of 3 or 4 hours be the user (pp. 12). Khat is often stored in plastic bags to keep it moist and is often labeled as vegetables.

Nationwide the number of Khat investigations and related seizures are increasing dramatically. This has resulted in prosecutions at the local and federal levels. In 1991, U.S. Customs inspectors seized over 17,000 pounds of Khat leaves at the Newark Airport. Within three years, that figure had doubled (Global News). According to EPIC, seizures of Khat at U.S. ports of entry jumped from 17.6 metric tons in 1996 to 37.2 metric tons seized in 2001 (www.usdoj.gov/dea/pubs/intel/02032/02032.html). Hennepin County Attorney (Minneapolis, Minnesota) stated that she prosecuted about 30 khat related cases a year (Williams, 2004).

Significant Khat Seizure

On October 19, 2004 in Baltimore, Maryland agents from the Bureau of Customs and Border Protection (CBP) seized 1,150 kilograms of khat, from a container aboard the MSC Uruguay. The container originated in Djibouti, Ethiopia and was manifested as spices and hot peppers.

As with trafficking in any other drug, violence follows the drug trade. Williams (2004) reported on the case of the killing of a Khat dealer in which 5 men were charged on November 30, 2004 by the Hennepin County Attorney’s Office with 2nd Degree Murder:

“Officials in the Hennepin County attorney’s office say Yasmin Ali Greele, 32, was selling khat from her south Minneapolis apartment. They say a few weeks ago, three of the five suspects entered her apartment, killed her and took her money and khat plants.”
Effects of Khat Usage

The effects of Khat usage resemble those of amphetamines in many respects. Khat users have experienced euphoria, increased alertness, garrulousness, hyperactivity, excitement, aggressiveness, anxiety, elevated blood pressure and manic behavior. Bowden (2002) observed that in Somalia during the 1993 intervention by United States military forces:

“Many Somali men, particularly the young men who cruised around Mog on ‘technicals’, vehicles with .50 caliber machine guns bolted in back, were addicted to khat, a mild amphetamine that looks like watercress. Midafternoon was the height of the daily cycle. Most started chewing about noon, and by late afternoon were wired, jumpy, and raring to go. Late at night is was just the opposite. The khat chewers had crashed (pp. 23).

The most common side effect of Khat is constipation. This is caused by the tannins and alkaloids contained in Khat. Other side effects such as stomatitis, esophagitis and gastritis are believed to be caused by the astringent tannins contained in Khat have been seen in chronic users. Oral side effects observed in chronic users have included: oral cancers, periodontal disease, dental caries, temporomandibular joint dysfunction and keratosis of buccal mucosa. Combined effects of Khat usage has resulted in anorexia leading to malnutrition, immune deficiency and increased susceptibility to infectious disease. Khat produces cardio vascular effects after 15-30 minutes including tachcardia, palpitation and increased blood pressure. Khat has also been implicated in hypertension in chronic users. Other side effects may include insomnia, malaise, dizziness and lack of concentration. Psychotic reactions including suicidal behavior has been noted by authorities. Physical addiction is present, but psychological addiction in predominant. While providing temporary pleasures, the constant usage of Khat is detrimental to the overall health of the user (African News).

A Spreading Immigrant Population

Immigrants from East Africa and the Middle East are just some of the latest groups to arrive on our shores. The United States is a nation whose population has been steadily increased by immigrants since the beginning of the country. Each new group of immigrants has its’ own language, customs, and religions. America has always been viewed a the melting pot as each new group is eventually assimilated into the overall American culture. However, each group still retains some of their own ethnic identity and customs in this process.

The locations that these groups are settling in are across the United States. Ethiopian immigrants have settled in Houston, Texas; Portland, Oregon; and Wichita, Kansas. Detective Aljaray Nails of the Burlington, Vermont Police Department
stated that Sudanese and Somali immigrants were beginning to settle in New Hampshire, Maine, Rhode Island and Vermont (personal interview, 06/02/04). William L. Hamilton (2004) observed that Somali immigrants to Arizona were overcoming language and cultural barriers and finding work in the Tucson area’s hospitality industry working in hotels and restaurants (http://www.nytimes.com/2004/07/05/national/05SETT.html?th). Large groups of East African immigrants have also settled in the Toronto, Canada area (Nasrulla, 2000).

National Security and Officer Safety Implications

Normally the emergence of a new drug would be a local problem or at best an emerging national problem. However, since 9/11, terrorism has been a major national security issue in the United States and elsewhere. The tactics of the terrorists have included suicide bombers including the attack on the U.S.S. Cole in Yemen (a major Khat producing country) on October 12, 2000 by Ibrahim al-Thaer and Abdullah al-Misawa on behalf of al-Quida. Six other al-Quida members were latter convicted including Abd al-Rahim al-Nashiri who was the head of al-Quida operations in the Arabian Peninsula http://en.wikipedia.org/wiki/USS_Cole_bombing. The usage of drugs by suicide bombers and assassins is a time honored tradition that dates back to the 11th Century AD in Iran where a leader named Hasan employed a group of assassins that used hashish and “were not much bothered by being killed in the act” (Dunnigan, 2001). Documented usage of drugs by suicide bombers has occurred in Chechnya, Iraq, Israel, Kashmir, Russia, Thailand and Yemen (Beyler, 2004; Chivers, 2004; Dunnigan, 2001; Milner, 2001; Bombers on Drugs, 2005). Traditionally the suicide bombers have been men, but recently there have been a large number of women who have chosen to participate (Milner, 2001; Beyler, 2004). The demographic of Khat users includes groups that would also be prone to entertain the idea of a suicide bombing.

The increased propensity towards aggression and violence by Khat users makes this an officer safety issue. There is a documented increase of domestic violence and bizarre behavior by users. Officers should be aware of the signs and symptoms and take appropriate precautions when dealing with Khat users.

Summary

Khat is an old drug that is finding a new home in the United States and Canada among some East African and Middle Eastern immigrants. Khat is illegal in both the United States and Canada. Khat users have been linked to violence and thus are an officer safety issue. Khat may be the drug of choice sold by any emerging gangs of these ethnic groups. It is a drug worth watching.
Bibliography


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