Mark spoke during an adjournment debate in parliament last night to call upon the Conservative's previous pledges to ban the drug khat. He applied pressure on the Minister to carry out the promised action, which would see tighter controls on the 10 tonnes entering the UK every week, and better support for users of the drug.

Khat is a plant grown in East Africa and the Arab Peninsular. It is chewed primarily within Somali and Yemeni communities. The hallucinatory effects are achieved by chewing the drug for hours, with liver failure and psychosis being just two of the dangerous health implications. It is often the cause of unemployment and family breakdown, and Mark's office has received countless complaints of violence and neighbourhood disturbance.

With over 6000 Somalis living in Milton Keynes, Mark has witnessed the detrimental effects of this drug on minority communities. In the debate Mark questioned why, in the 19 months of coalition government, nothing has been done to tackle this problem, whilst just this week the Netherlands have banned the drug. The UK now stands alone in being the only legal port of entry into Europe.

James Brokenshire, the Minister responsible, stated that there was no manifesto promise to ban the drug and that classification of khat was not part of the coalition government's programme. However, this issue is one which the government is concerned about and that they do not wish to kick it into the long grass. Under the Misuse of Drugs Act 1971, the Government are required to look to the Advisory Council on the Misuse of Drugs to provide advice on drug-related issues, including on the case for control based on available evidence at the time of its consideration.

The ACMD last formally considered the misuse of khat in 2005, when it advised against bringing the plant under the control of the 1971 Act and made recommendations for health and prevention approaches responding to local community needs, which the last Government accepted. In the light of those 2005 recommendations, the handling of khat-related issues has focused on the tailoring of health and education responses to local community needs, such as the availability of appropriate drug prevention materials and information to raise awareness among practitioners and khat-using communities.

Mark is going to continue to press this issue with the Minister and the coalition government.