Annual Report 2012 Control of the c

KEEPING EYES ON PEOPLE WHO USE DRUGS



MAIN*line*

Mission Improving health conditions and conditions of living for people who use drugs

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Keeping Eyes on People who Use Drugs

Annual report Mainline 2012

Educating substance users on drug use and infectious diseases. Without being condemning. Using the same approach for over twenty years, Mainline has worked intensively all over the Netherlands with people who use drugs. And not without results. Substance users no longer die in the streets like they were when the organisation was founded in 1990. Nevertheless, Mainline continues to monitor the situation of people who use drugs. No other organisation has familiarised itself to the same extent with the problems and (sub)cultures of people who use drugs. The services and products that Mainline offers are modelled on experience and are still as relevant as they ever were.

Mainline also functions as a link between professionals and the field. Mainline offers support and training for people who work with substance users and manages contact with support workers and substance users in the streets, in shelters and in street prostitution zones. Risk taking behaviour of young people is monitored through online fieldwork. Also internationally, Mainline is committed to get the most out of its knowledge and expertise. Successful projects in Pakistan, Indonesia, Bosnia and South Africa are examples of how Mainline helps to improve the human rights situation and health of vulnerable groups worldwide.

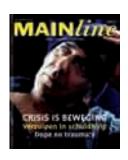
Contents

Mainline Brief
Magazine in Hand User Control Sex with HIV
Mainline 2012
'Rooted in the Field'
Fieldwork and Product development I
Intro Fieldwork Team / 'With you, I can be myself'
Mainline Brief
Sex on coke
Fieldwork and Product Development II
MOT-test for the Base Pipe In the Can
Doctor Mainline Mouth Wash after a Blowjob
Training Expertise and Communication
Intro TEC-team Sneaking into the Boys Room
Getting a Pint for an III User / RIOB
National
Feet and Needles A Typical Mainline Call
A list of all Opioid Substitution Treatments 'It's your Funeral'
International
Intro International team Worldwide Collaboration
Shooting up quietly in the Graveyard / Enormous Cooking Pots
Fieldwork
Mainline in Numbers
Partners
Collaboration across Borders
Finance
Mainline in euro's
Knowledge Centre
Overview of workshops 2012
Back cover
Sex after a song

Magazine in hand

"Hey look, it's Mainline!" You will hear this every time when the Mainline van arrives at a Methadone dispensary or a place where users are. "Already got that ... got that one too... Hang on, that one I haven't got!" Mainline's magazine, which appears three times per year, functions as its calling card. With the magazine tucked under their arm, fieldworkers approach substance users all over the Netherlands. People who are looking for support, as well as people who work in addiction care, have known the magazine for drug users for years. In 2012 the topics 'crisis', 'daytime activity' and 'drug scenes' were addressed. Personal stories from users are set

next to editorials, news items about health, and information about new treatments. The latest issue casts light on several distinct drug cultures. Drug user Tom relates his story of growing up in the fisherman's town of Katwijk. During the week people worked extremely hard and more often than not that resulted in a weekend of binging. By sharing his story he hopes to show people that after a life of drugs and calamity things can turn out right after all. The magazine has a circulation of 12,000 copies and is distributed to addiction care centres, shelters, penitentiary institutions and street prostitution zones across The Netherlands. •







User Control

"The annual Mainline conference is the ideal networking opportunity for people who work with substance users", Joost Breeksema, organiser of the Mainline conference 2012, says. "Support workers, researchers, medical addiction professionals, people from the pharmaceutical industry, mentors, coaches and drug users were all there to attend presentations, debates and to exchanges ideas. It was a very interesting blend of individuals."

The conference theme this time was 'the user in control and the client in a central position'. "For Mainline, the ability of users to manage independently has always been an important topic", Breeksema says. "But we received more and more stories and questions from the field about this topic. That made the choice for this year's theme an easy one." The presentation about a night shelter in Nijmegen forms a good example. "In this shelter drug users are in control", Breeksema says. "The rules aren't dictated. Instead they come from the people who use the facilities themselves. They ask themselves: what do we do when someone crosses a line? I could see people in the audience thinking: see, things can be done differently. That alone makes for a successful conference." •

Sex with HIV

Mainline has been actively providing information about HIV and hepatitis C ever since the nineties. When Mainline was founded in 1990, an AIDS epidemic among people who inject drugs was lurking around the corner. From that moment on, Mainline's fieldworkers have hit the streets to get into contact with substance users. The education material is always created from the perspective of the substance user. By hitting the right tone of voice and by addressing relevant topics, Mainline has succeeded in reaching key populations effectively. Three times per year the foundation puts out a newsletter, 'Take It', which contains the real life story of an HIV positive substance user and an interview with an expert. The circulation of 800 copies is distributed among users who are HIV positive. In 2012, the newsletters discussed 'sex with HIV', 'treatment adherence' and 'getting older with HIV', which are all issues that people who are HIV positive will come across.

The annual circulation C-Zicht is specifically aimed at users with hepatitis C. This disease occurs often among people who have (at one time) injected drugs. In 2012, to inform about new treatments, the topic of 'new medication' received attention. Because infectious diseases have a stigma attached, both newsletters are always handed out discreetly by our fieldworkers. To subscribers the publication is mailed anonymously.



Rooted in the Field

Drugs, health and street life. Mainline still stands for these topics. But a lot has changed since the nineties. The number of infections has been decreased. Drug users no longer die in the streets. Many have found a home or shelter. But for Mainline the job is not finished. The financial crisis also weighs heavily on addiction care and more groups in society are becoming marginalised. This is the message of new director Hugo van Aalderen who has been in charge since September 2012. Former director Janine Wildschut exchanged her administrative role for an executive role in the international team. The change in management in the head office in downtown Amsterdam offers the opportunity for a fresh approach.



The work field is changing within and outside of Mainline.

Janine Wildschut: 'Our initial group of concern gets priority'

"This year was packed with ambition", former director Janine Wildschut says. "We conducted our usual fieldwork and education tasks for substance users in The Netherlands; we launched a digital magazine for teenagers and young adults about sex and drugs; and we conducted several research projects into known risk groups such as swingers and homeless adolescents. Internationally we managed to set up great projects as well. And all that in just one year."

Last year, Janine Wildschut exchanged her role as director for a position in the international department. "From my director's chair I could almost constantly feel the pull from the field and finally I couldn't resist", says Wildschut. "In a sense, my choice fits the spirit of the organisation. Getting things done occupies a central position in the way we work. We are rooted in the field."

The last year has provided lots of new insight. "We now know much better what we should focus on and which groups we can reach effectively. We launched the digital youth magazine Apexx. Via social media such as Facebook we are drawing young people to our website, on which we provide information in the form of real life stories,

without condemning any types of behaviour. Because that would only cause our audience to navigate away. We conducted pilot research into, for instance, swingers and young homeless people. What we found, mainly, was that problems can be very complex. Intensive fieldwork would have to be done to reach relatively small groups. That is why we had to make choices. Our initial group of concern gets priority."

Vulnerable Populations

As project leader in the international department Wildschut is pre-eminently positive about Bridging the Gaps. "I'm proud that we set up the project with five Dutch organisations. In 2012 new projects have been started up across the globe for sex workers, substance users and men who have sex with men. It is time for a strong cooperative effort to help these populations. Emancipation, human rights and health occupy a central position in this program. The knowledge and expertise that Mainline has built up about substance use is invaluable in countries where users are being marginalised and where little is known about infectious diseases. By acting now we can stave off impending HIV epidemics. On top of that, we help improve the position of substance users by helping



them to reintegrate in society. We are not achieving this by positioning ourselves over them. Instead, we are moving forward by walking hand in hand, next to them in the field."

Hugo van Aalderen: 'I'm going to give the organisation a facelift.'

"On an international plain Mainline's relevance is still indisputable", new director Hugo van Aalderen says. "Mainline has already been active internationally for fourteen years now. Especially the last five years we achieved a lot. The international network that we created together with regional partners in Central and Southeast Asia is tight knit and professional. We did not achieve this by dictating from up high, but by co-operating. Mainline has really shown the extra value of international collaboration in the field of substance use. I want to improve the continuity of the department and create a broader financial basis."

Van Aalderen started with a lot of enthusiasm in his new role in the organisation. Seven years ago he stepped back from the director's chair, but he has always kept in touch with the organisation, for instance as a member of the board. "Mainline is dear to me", Van Aalderen says. "The

organisation faces big challenges. Our task in The Netherlands is surreptitiously loosing its relevance. Our initial groups of concern, people who use heroin and people who use freebase coke, is getting smaller. Drug users no longer die in the streets as they did in 1990 when Mainline was founded. The problem has become less visible."

Drugs, Health and Street life

"Yet, fieldwork and education on substance use and health issues is still as necessary as it ever was. The subtitle of our magazine is 'Drugs, Health and Street life' and we intend to keep that title. But we do have to adapt to the social situation. Influenced by various developments, addiction with the older group is regarded more and more as a chronic state. This is an issue we have to address." Van Aalderen wants to do all he can to improve Mainline's position in a changing society. "In 2012 we started this process. Fortunately, we've got a great team with lots of talent and we are all looking in the same direction. The coming year the organisation will get a facelift. I will take care of that personally." •

Director Hugo van Aalderen starts in his new position with a lot of enthusiasm.

Team Fieldwork and Product Development

Mainline's fieldworkers stay in personal contact with drug users. In order to distribute information leaflets and to educate substance users, fieldworkers head out onto the streets, they visit shelters, drug consumption rooms (safe houses), and street prostitution zones. In the office, fieldworkers mold their experiences into education materials.



'With you, I can be myself'



The Mainline van is accessible for substance users

"Not long ago, we parked the van near a street prostitution zone", team leader of the fieldwork team, Renate van Bodegom, says. "One of the women entered the bus to get clean needles and information about hepatitis. She praised the fact that Mainline's fieldworkers do not condemn drug use. It is an attitude she did not come across very often with support workers. 'With you, I can just be myself', she said. That people are allowed to be entirely themselves is crucial in fieldwork. That is the only basis on which problems and possible solutions can be discussed. In the

last twenty years, Mainline established a relationship with drug users all over The Netherlands. They know our magazine and our van and they know that we have a lot of knowledge about drugs, infectious diseases and health. For us, some doors are open that for others stay closed.

Low Threshold

Every week Mainline goes to a Dutch city. The Mainline van, furnished with seating, coffee tables, tea and education materials, carries fieldworkers to methadone dispensaries, street prostitution zones, shelters and other spots where substance users can be found. "Our van has a low threshold", Van Bodegom says. "Users can relate their story without mentors or coaches listening in. Our strength lies in the fact that we aren't charity workers with an agenda. We keep an open view and offer a listening ear. Users can ask questions, pick up leaflets, or simply have a chat. There are no strings attached. In that way you can create space in which people are not afraid to say what is really going on with them."

Gullibility

For years, Mainline has been operating on the basis of 'presence theory'. This is an approach in which attention and acceptance of the other person's situation is key. The perspective and experience of the other person form the point of departure. "Much of the existing outreach work is constrained", Van Bodegom says. "By focusing on diagnosing, protocol and set goals, actual needs can be overlooked. Sometimes such a need is simple: listen to my story. In fieldwork we purposely leave out an agenda, and the main thing is to try to understand what is going on with the other person at the moment. As a fieldworker, this entails that you accept that people may sometimes unload the most fantastic stories on you. In such

Mainline Brief

Sex on Coke

"On some internet forums you can find teenagers bragging about using cocaine while having sex", editor in chief of the digital youth magazine www.apexx.nl, Sanne van Gaalen says. "You could disapprove of that, but that would only have an adverse effect. The articles on Apexx are based on real life stories that relate about the advantages as well as the disadvantages of using drugs while having sex. In this way you capture the attention of the youth and you will be able to provide them with information.

Since July 2012 when Apexx went life, Mainline is involved in active online fieldwork. "You can read the most outrageous claims on internet forums", Van Gaalen says. "Tall tales have a tendency to run wild on the internet. By keeping an eye out for knowledge gaps, we know where we need to provide." According to Van Gaalen, telling the youth they should not use drugs is ineffective. "On many information sites only the health risks of taking drugs are explained. Young people will then loose interest, because many teenagers regard the combination of sex and drugs to be positive instead. The youth likes to experiment. You've got to deal with that fact. Our message is: if you do it, do it consciously. And do it safe."



case, there is no immediate need to confront this person with actual facts. By allowing yourself to be gullible you recognise the function that tall stories can have for, for instance, someone's self-perception and their construction of an identity. So the building up of a relationship comes first. And this means that every once in a

Investing in Self-Regulation

sounding board.

while you are simply just someone's

Since the very beginning, Mainline has been focused on harm reduction: accept substance use as a phenomenon and try to limit health risks as much as possible. By providing information about ways of injecting, stimulating the use of new screens in a base pipe, and by educating on methods of using, health risks are being reduced. But the psychological aspect, too, is important, Van Bodegom stresses. "Where are the pitfalls? We always try to aim for self-regulation. What does the user himself do to control their use? Do they stock their fridge before they go out to score? These kinds of behaviour we try to reinforce. We make people aware of their own capacities. We stress that they carry it within themselves. People who use drugs often have a negative self-image. We try to turn that around by making them aware of their own strengths." •

Target number of youths reached

Year plan 2012: 1000 visitors Year plan 2013: 1.500 visitors

Goal: to grow a number of 8.500 unique visitors per year in 2015

Number of guests on the site December 2012:

Unique visitors per month: 967 Page views per month: 3848 Visits per month: 1407 visits

NB: this is the range of the digital magazine half a year after going life (July 2012)

Google search terms through which young people find apexx most often:

apexx, BDSM, coke en seks, Jim de Groot, slapen en blowen, sociale controle, mdma en depressie, soa





MOT-test for the Base Pipe

When Raymond hears he cannot participate in the test, he gets out of the Mainline van, to return after ten minutes with a mischievous look on his face. "I can't participate because I didn't bring my own base pipe", he whispers. "But I just quickly made one." He holds up an empty beer can. It is dented on the side and there are little holes in the dent. Covering the holes is a layer of cigarette ashes and tobacco. He holds his mouth to the can opening and draws in. The burning tobacco lights up. He can join the test, but his pipe does not score very high. It carries quite a few health risks. "We call this the 'base pipe's MOTtest", fieldworker Toon Broeks says. Dressed in white doctor's apparel he is sat behind a small desk littered with devices and forms.

"A couple of times per year we do

an on site check up of the users' pipes. We check length, hygiene and material. A pipe that is too short allows the inhaled smoke to be too hot, which could damage the alveoli in the lungs. Copper or iron pipe screens burn up quicker than those made out of stainless steel. So they need to be changed more often. Otherwise you will end up with hot smoke, metallic dust and ashes in your lungs."

A Waste of Cocaine

Broeks explains that the test mainly functions to make users aware of how they smoke. "Smoking cocaine is often done hurriedly, which involves all sorts of health risks. Many users have blisters, sores or cracked lips caused by a vitamin deficit. Sharing pipes can therefore easily cause herpes or other com-

A pipe that is too
short causes the
smoke to be too
hot for the lungs

municable diseases to be transmitted. We stimulate users to use mouthpieces."

A large apparatus is used to measure the temperature of the flame of a lighter. The participants can see the gauge rise high above the melting point of cocaine. "A waste of cocaine", Broeks says. "At lower temperatures you can get a lot more of the effect out of your cocaine. It's a lot better for the lungs, too."

Since the rise in consumption of freebase cocaine in the nineties, the use of the base pipe in the scene has become common practice. Lung complaints, such as COPD, also become more common among substance users. Broeks: "Through posters, playing cards with tips, education and Baselab, Mainline contributes to the awareness of the smoking user".

Mouth Wash after a Blow Job

"During fieldwork we were told by women who work the streets that they washed their mouths with mouth wash after a blowjob", fieldworker Sanne van Gaalen says. "After some investigation it turned out that they did this out of the conviction that mouth wash helped prevent infections and killed bacteria. The women were convinced that this would decrease the chances on attracting STDs. It is these kinds of fairy tales that we try to eliminate by providing information."

In 2012, Mainline visited the five street prostitution zones in The Netherlands: Groningen, Utrecht, Arnhem, Nijmegen and the now closed zone in Heerlen. "Many women working the streets use drugs, either alone or

In 2012 Mainline visited all five Dutch street prostitution zones

together with their clientele", Van Gaalen says. "During visits we talk about drug use and health issues with the women who want to.

Sometimes we meet in the van, but we often find ourselves in the zone's 'living room'. This is a room where the women can take a break and find relief from the cold, get a cup of coffee or pick up condoms. This way, the people who run the 'living room' can also profit from our information."

Together with her colleague, Renate van Bodegom, Van Gaalen organised a special, themed meeting in the street prostitution zone in Utrecht. "We played a game, complete with trivia and prizes, themed around the sexually stimulating drug GHB. Informally we came to talk about true or untrue stories about sex and drugs. Often, the mood is relaxed and the women openly relate about strange or funny requests from their customers. The 'living rooms' provide all kinds of facilities for the women, but they hardly actively raise awareness about drugs or infectious diseases. Mainline fills this gap and our presence is truly appreciated in the street prostitution zones."

Dokter Mainline

The 'Doctor Mainline' leaflet is a real 'evergreen'. It is one of our publications that is always picked up easily by users. "Success through simplicity", says Leon Knoops who is one of the people responsible for the production of the information leaflet. "It is an accessible publication with a recognisable title. No pictures, just plain clear text. Over the years we've written dozens, each with its own theme. They are presented in a flyer rack in our van, so all the different subjects can be seen in one glance. They are also easy to duplicate. It's just a double sided, A4 size print folded in three. We address topics such as HIV, safe injecting, and freebase cocaine; all topics we regularly encounter during fieldwork and about which we often receive questions from people who use drugs. Over the last few years, we developed three new information leaflets and renewed two old ones that were no longer up to date. There is new medication for HIV, for instance, with hardly any side effects. In such a case we immediately update our material. In 2012, among other things, we published 'ABC Hepatitis'. We discovered during fieldwork that many users were confused about the different forms of hepatitis. In the leaflet we list the different forms clearly, together with the symptoms, treatments and tips for prevention. We can't put all the detailed information into one book, so leaflets are the ideal form for our purpose: specific information for specific groups. The 'Doctor Mainline' leaflet series is simply informative, clear and accessible."

The 'Doctor Mainline' leaflet series is simply informative, clear and accessible "

Mainline developed three new leaflets in 2012.

The ABC of Hepatitis - 2.500 pcs. 1+1=3 Alcohol and Cocaine - 2.500 pcs. Cocaine in my Brain - 2.500 pcs.

Two leaflets were renewed.

HIV+ and Now? - 2.500 pcs. Injecting: How and What? - 2.500 pcs.



In the Can

"Fieldwork in prison is a real challenge", fieldworker Klaas van Altena says. "It can be like a Hollywood film set sometimes, complete with guards, metal detectors and weightlifting men eyeing you in contempt. We usually enter the yard together, so we can talk with as many men as possible."

In the yard, fieldworkers talk with

inmates about their drug use. "For some, prison can be a place for selfreflection", Van Altena says. "Especially for first-timers. In prison they reflect on their behaviour and drug use. We offer a listening ear and we use a motivational communication approach. We try to make people more self-conscious, without being condemning.

If people want to quit using, I ask them how they see themselves managing that concretely. We talk a lot about self-regulation. I try to make people aware about the influences their surroundings have on them. Maybe that is something that sticks with them when they are released and have to make choices anew."

Training, Expertise and Communications Department

The Training, Expertise and Communications department (TEC) gathers experience and recommendations from the field and turns them into products for professionals working with substance users. The first hand experiences of fieldworkers, gained through being in direct contact with people who use drugs, form the point of departure. The TEC department delivers tailor-made improvement strategies for professionals, such as policy makers, support organisations, and social workers. The demand for training explicitely determines the form.



Getting **a Pint** for an ill User

Trainer Joost

Breeksema

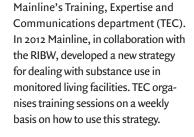
challenges the

coaches to take

a stance.

"A dickhead", Willem says. The group displays a questioning look. "Sometimes you have to be a dickhead. In order to secure your personal boundaries", he explains. Willem is the first of the group to answer in a round of questions

about which character traits can be useful when working with drug users. He is one of the fourteen coaches of the Regional Institute for Monitored Living (RIBW), who are taking part in a training session hosted by Joost Breeksema from



"Many residents use drugs", regional director Wilma van der West from RIBW Arnhem and Veluwe Valley says. "But because drugs officially weren't allowed on the premises, many residents didn't want to talk about it. Coaches and support workers sanctioned the use of drugs but that proved to be counter effective. Drugs were still being taken, only now it was done secretively. Mainline was approached to develop a strategy to train our staff to accept drug use from residents and to make it discussible." There is a relaxed atmosphere in the room in Arnhem when Breeksema asks the staff about their positive character traits.

'A sense of humour', 'attention', 'patience' and 'an open mind' are mentioned often. "That's good", Breeksema says. "A non-condemning attitude towards drugs use is crucial. The user and his choices occupy a central position. Other key elements of the strategy are quality of life and the possibility to discuss issues."





Breeksema asks the members of staff to take a stance on particular statements by standing to the left or to the right of the room. 'A resident is ill, I'll get him a pint', appears on the screen. All members of staff walk to the 'I Agree' side of the room. "But if he asks me to get him a gram of weed? Or a line of cocaine?" Breeksema asks. The members of staff look at each other for answers and a discussion ensues. Part of the group goes to the other side of the room. "That is one of the good things about this training," member of staff Michel says. "Through interaction you learn from your own colleagues. You are confronted with your own opinions and behaviour." Michel, too, is impressed by the real life story of ex-user Franky, who relates candidly about his past life of drug taking. "It is really disturbing if people relate everything to your addiction..." Franky says with a stern look for the members of staff, "... instead of your person. Please be careful, too, with blaming people. Not everyone that uses drugs is also a thief." The day finishes with a workshop on different kinds of drugs. Various seal bags with plants, pills, powders and liquids are passed around, one of which contains brown granules. The bag is studied with fascination, but no one guesses what the substance is. Until Breeksema delivers them from the dark: coffee.

Sneaking into the Boys Room

'When you've got an itch, you've got to scratch,' Brenda (19) says about her after hours pastimes. This homeless girl often sneaks into the Boys Room of the night shelter to have sex with one of the boys.

"Teenagers and young adults who live on the streets show more risk taking behaviour when it comes to sex and drugs", Hilde Roberts from the TEC department says. "Partly, that's because information for them is less accessible than for teenagers who live at home and go to school."

In collaboration with Rutgers WPF, Mainline conducted a survey about substance use and sexual behaviour and the need for support among young, homeless people between the age of 16 and 25. Ten professionals and 28 young people were interviewed. "The loose sexual morals stood out", Roberts says. According to the professionals interviewed, Brenda's attitude is not exceptional." Pregnancies and abortions occur relatively often among homeless girls. Especially the ones with slight mental retardation are a risk group when it comes to sex and drugs. "They are more often subject to abuse", Roberts says. "We found that there is a necessity to make existing interventions and information material better available for this vulnerable group."



The information leaflet 'Treat Yourself . Right' provides information about different treatments for people who use opioid substances. Mainline published this leaflet in 2012. · based on the amended guidelines for opioid maintenance treatment (RIOB). • The information leaflet presents an overview of treatments based on the experiences of people who use drugs, social and support workers and the latest research. The leaflet can be downloaded freely from www.mainline.nl.

The F&P and TEC departments, brought together in the 'national' department, collaborate when it comes to transferring knowledge, expertise and best practice. In the office as well as in the field, forces are combined to answer questions, organise training sessions and workshops and to distribute products.

Feet and Needles

In 2012 Mainline organised three injecting courses for people who use drugs



"Some users do extremely dangerous things with needles", Hilde Roberts from TEC says. "Shooting up the wrong way can have disastrous effects on your health. Take, for instance, groin injecting. The chances of hitting an artery are relatively high and that could cause a fatal hemorrhage. During an injecting

course we show how to shoot up as safely as possible. Always inject in the direction of the blood flow, for instance, towards the heart. If you're injecting in the opposite direction you will damage the valves in the vein with a disfunctional vein as a result."

In 2012 Mainline organised three injecting courses for substance users. According to fieldworker Toon Broeks there are a couple of things that often go wrong. "Some users lick the needle to not waste any stuff", Broeks says. "But by doing that, bacteria from the mouth can get on the needle and from the needle they get into the blood and under the skin, which could cause an abscess. Also, you

often see overuse of ascorbic acid to prepare heroin. Too much acid causes damage in the veins." At the last injecting course there was a participant who injected in her foot. This young woman did not want to inject in her arms, because her mother would notice the scars. "Injecting in the foot is accompanied by risks", Roberts says. "Because feet are in shoes for most part of the day, they form an environment in which bacteria thrive. This increases the chances of infection. Besides that, the veins there are smaller and more fragile. It is safer for her to use a thin needle. But I explicitly told her about the risks. We always discourage injecting in the foot." •

A typical Mainline Call

As he cradles the horn, Joost Breeksema from TEC classes it as a 'typical Mainline question'. "A nurse wanted to know if people who inject drugs (PID) ever get a portacath — a small medical appliance that is installed beneath the skin through which drugs can be injected — for heroin. The woman concerned has damaged veins and infections on her arms and legs, so she can no longer inject. She only weighs 35 kilograms, has severe respiratory illness and stage III throat cancer, so she cannot smoke heroin. Methadone she takes rectally. She asked her physician for a portacath so she no longer had to damage her veins with the needle. But her request was refused. The nurse wanted to know how this problem is dealt with elsewhere in the country."

Daily, Mainline receives phone calls from all over The Netherlands. Some substance users feel depressed and



Fieldworker Toon Broeks is happy to answer questions about drugs and health. simply want to talk with someone, or they have a question about their health. Support workers call because they do not know to which institution they should refer a client. Breeksema presented the question about the portacath to the fieldwork team. "We came to the conclusion that there is not one physician in The Netherlands that wants to prescribe a portacath for the purpose of injecting heroin", Breeksema says. "So it is not just this particular physician. I informed her about alternative ways to administer heroin. It is a typical Mainline-question because few organisations would give a question like this one serious consideration and look for a tangible answer. This is really radical harm reduction. We always reason from the perspective of the user. The damage to her health will get worse if she continues to inject the drug, so I advised her to opt for snorting or taking it rectally." •

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Rinaldo (48): "Many swingers start using drugs strategically in order to help push sexual boundaries. People can play pretty rough. Both with themselves and their partner. I know and I've seen swingers who were having unsafe sex, even though that wasn't the plan. Often this happens after drugs have been taken. In such moments I think: do as you like, it's your funeral."

'It's your own **Funeral'**

In 2011 Mainline started a preliminary investigation into the swinger scene: couples look for erotic contacts outside their relationship, which can vary from having sex with others present to a complete partner switch. Mainline interviewed five swingers and five STD nurses in depth about substance use in relation to sexual choices. In 2012 the results of the investigation were published in the report 'swingers: substance use and sexual choices'. Fieldworker Leon Knoops led a workshop about swinging on the

Dutch National Conference about STDs and HIV. "It was a full house at the conference", Knoops says: "The topic is hot. That is not entirely surprising. Substance use is accepted for many swingers. The risks of attracting an STD are high. We took a first step towards charting the outlines of this group and the risks they subject themselves to. Hopefully, there will more awareness among swingers. "The full investigation report can be downloaded from our website: www.mainline.nl.

A list of all Opioid Substitution Treatments

Any idea what methadone or buprenorphine does to your body? And how hard is it to quit heroin? What alternative opioids exist? A new information leaflet, My Treatment My Choice (MTMC) is now being distributed all over The Netherlands to provide answers to these questions.

In 2012 the European project My Treatment My Choice started. Its goal: to provide information about opioid dependency to users of opioid substances and their surroundings. Detox treatments as well as maintenance treatments are described in detail. What are the advantages of detoxification treatment? What options exist for quitting without taking medication? Some treatments are better or lesser known in some countries than in others. A user is, therefore, presented with a large choice of treatments. In The Netherlands, for instance, the treatment with buprenorphine is lesser known than methadone, but many people who have experienced the treatment find the withdrawal easier.

The information is presented in fourteen languages on leaflets, postcards, in information booklets and on the website www.mytreatmentmychoice. eu. Mainline took up the responsibility to distribute the information material to addiction centres all over the Netherlands. On our regular visits with the van the material was handed out together with the Mainline magazine to substance users and support workers. It is now available at addiction centres, methadone and heroin dispensaries, penitentiary institutions, homeless shelters and at street prostitution zones. The material can also be ordered through www.mainline.nl. The project was initiated by the medical education specialist company PCM Scientific.



International Department

Mainline's International Department takes health education of substance users abroad. Mainline seeks to offer support especially in countries where drug use is the result of poverty. The international department aims to provide a continuum of care and offers support in all stages of substance use.



Worldwide Collaboration

A portable device that can determine a person's CD4 cell count from only one drop of blood. CD4 levels are an indication of how far someone with HIV has progressed into the illness and when treatment should be begun. Testing with this device is only one link in a much longer chain implemented through the Bridging the Gaps project that has been implicated in 2012 across sixteen countries worldwide.

For over twenty years we have been sharing our expertise with partners • worldwide.

In many southern countries people do not have enough money to regularly travel to a town hospital in the city", project leader Janine Wildschut says. "And sometimes the hospital only barely has enough capacity to treat everyone. Drug users are sometimes simply not welcome. With the help of the CD4 analyser, people living in the countryside in Pakistan or people who are afraid to go the hospital, can now determine CD4 counts on site. If the count is too low they will be referred. Support workers from Nai Zindagi accompany them to the hospital for treatment."

Vulnerable Groups

Worldwide, sex workers, lesbian, gay, bisexual, and transgender people (LHBT) and people who use drugs have a ten to twenty percent increased risk of attracting HIV. Yet, only eight percent of this group has access to treatment and information about HIV. That was the reason why

in 2012 the ambitious Bridging the Gaps project was instigated, which is a collaboration between five Dutch organisations and more than sixty partner organisations in the respective countries. The goal of the project is to provide vulnerable key populations with universal access to prevention, treatment and support to help fight infectious diseases. A guiding principle for achieving this is to improve the human rights situation of these groups.

According to Wildschut, Mainline, as a harm reduction pioneer, fulfils a crucial role in the project. "We have over twenty years of experience in providing information and harm reduction in The Netherlands. It is great to be able to share that with international partners."

A New Life

A great example forms the collaboration with the Pakistani partner Nai Zindagi (a new life). "The continuum of care model has been realised successfully. All aspects of care are present and available: outreach work, support for drug related problems, HIV treatment and the generation of income. We do not exclusively focus on needle exchange, basic health care and HIV testing, but we also support detoxification treatment or finding a job when there is a need for it. Substance users, for example, can generate their own income on the project farm. By picking grapes or growing vegetables they can earn money on the local market. On the farm, also hand bags and coffins are produced. Nai Zindagi represents the perfect example for other organisations all over Pakistan. It shows how a continuum of care model supports vulnerable groups in all stages of their drug use. We try to implement this in as many places as possible around the globe, by collaborating with regional partners."





Enormous Cooking Pots

Enormous Cooking Pots on big fires in a confined space. "The heat was unbearable", international team member Hatun Eksen says. In 2012 she visited two prisons in Kenya. "People are packed together in small rooms. The fires turn the places into real boiling rooms. People use drugs, but there is little knowledge about infectious diseases." Since 2012 Mainline finances the Omari pilot project. Every week support workers from a local organisation visit two prisons in the cities of Malindi and Lamu to support and educate substance users.

"The men and women are separated", Eksen says. "But in both rooms drugs are being taken. Many of the women are detained together with their babies and children. It is a sad reality. Fortunately, we can reduce some of the harm with this project. We focus on the use of clean needles, providing information about infectious diseases, such as hepatitis and HIV, and we test for illnesses. Fortunately, the prison population is proactive. They are eager to collaborate and are helpful. They even repaired my flip-flops." If the Omari-project proves to be successful, a nationwide implementation of the project is a realistic goal. •

Shooting up quietly in the Graveyard





Shooting up in the graveyard. It sounds lugubrious, but it happens every day in the 43 graveyards in Rawalpindi in Northern Pakistan. "Drug users are harassed and have nowhere else to go", project leader Janine Wildschut says. "Only in the graveyards there can be found a little quiet. It is ironic that drug users are now finding a place in society by producing coffins." On the Nai Zindagi's support farm in Pakistan,

drug users are supported in creating a new existence for themselves. The Dutch entrepreneur Radbout Spruit travelled to Pakistan to teach them how to make coffins. But because in Islamic Pakistan there is no need for this product, the coffins are being sent to The Netherlands. The coffins, with their unique seals – a wooden butterfly – attracted attention in The Netherlands and they are being sold

successfully among other channels through www.grafkist.nl. "We came full circle", Wildschut says. "Pakistani users are earning their own living. People who use drugs are commonly regarded as nonproductive. It is great to see how people, with the help of Bridging the Gaps, are picking up the pieces to construct an existence in which they are starting to have faith in their own capacities." •

A group of Pakistani substance users gathers around a gravestone to use

The wooden butterflies are coffin seals that are being sold in The Netherlands

Mainline in numbers

Mainline's policies and mission statement are brought into practice by the fieldworkers. They meet with support workers and people who use drugs, and talk about substance use, health and strategies for harm reduction. In 2012 they did this no less than 1931 times. The fieldworkers go when and where they are needed. Whether this is to a prison in Amsterdam, a 'safe house' in Heerlen, or a prostitution zone in Groningen.

Mainline in Amsterdam

In Amsterdam, there were 802 occasions, 99 of them took place in prison, on which Mainline talked with people.

Mainline in numbers

Mainline in numbers		
Cities visited by fieldworl	kers (N=3	8):
Alkmaar:	25	1,3%
Almelo:	16	0,8%
Alphen ad Rijn	1	0,1%
Almere:	22	1,2%
Amsterdam:	802	41,9%
Antwerpen	1	0,1%
Apeldoorn:	131	25,1%
Arnhem:	66	3,5%
Assen:	31	1,6%
Breda:	40	2,1%
Delft:	39	2,0%
Den Bosch:	8	0,4%
Den Haag:	36	1,9%
Den Helder:	7	0,4%
Deventer:	13	0,7%
Dordrecht:	33	1,7%
Eindhoven:	39	2,0%
Enschede:	55	2,9%
Gouda:	17	0,9%
Groningen:	82	4,3%
Haarlem:	8	0,4%
Heerlen:	32	1,7%
Hoorn:	37	1,9%
Katwijk:	7	0,4%
Leeuwarden:	28	1,5%
Leiden:	65	3,4%
Maastricht:	14	0,7%
Nijmegen:	82	4,3%
Oss:	12	0,6%
Purmerend:	3	0,2%
Rotterdam:	53	2,8%
Tilburg:	27	1,4%
Utrecht:	36	1,9%
Venlo:	28	1,5%
Vlissingen:	27	1,4%
Zaandam:	7	0,4%
Zutphen:	15	0,8%
Zwolle:	43	2,3%
Total:	1913	100%
Sex:		
Male:	1513	79,1%
iviale:	1313	79,1%

Age:		
25m:	74	3,9%
25p:	372	19,4%
40p:	947	49,5%
50p:	477	24,9%
60p:	43	2,2%
Total:	1913	100%

Conversation topics:

Aids/hiv:	161	8,49
Combination therapy:	28	1,59
Drugs:	1824	95,39
Health:	1832	95,89
Harm reduction:	1640	85,79
Hep B:	281	14,79
Hep C:	367	19,29
Housing:	990	51,89
Psychological/social:	1403	73,39
Sex:	240	12,59
STDs:	159	8,39
Alcohol & HCV:	66	3,59
Total:	1913	1009

Places where contact was made:

Van:	650	34,0%
Prison:	65	3,4%
Addiction Care Centre:	319	16,7%
Near ACCs:	56	2,9%
Drug Consumption Rooms	: 123	6,4%
Open consultations:	316	16,5%
(Social) Boarding houses:	181	9,5%
Street:	82	4,3%
Telephone:	22	1,2%
Home visit:	6	0,4%
Other:	93	4,9%
Total:	1913	100%
Palent stann		

Ethnicity:

Dutch:	1213	63,4%
North African:	110	5,8%
Eastern Europe:	37	1,9%
Surinam/Antilles:	366	19,1%
Western:	104	5,4%
Other:	83	4,3%
Total:	1913	100%

Ways of Administering:

intravenous:	1040	37,0%
Ex-intravenous:	198	7,0%
Non-intravenous:	687	25,0%
Unknown:	873	31,0%



prostitut	

Yes:	58	3,0%
No:	1855	97,0%
Total:	1913	100%
Prostitution:		
Yes:	87	4,5%
Incidentally:	38	2,0%
No:	757	39,6%
Ex prostitution:	26	1,4%
Unknown:	1005	52,5%
Total:	1913	100%
Substances:		
Alcohol:	623	32,6%
Freebase coke:	1244	65,0%
Benzos:	239	12,5%
Cannabis:	449	23,5%
GHB:	42	2,2%
Heroin:	771	40,3%
Kamagra:	2	0,1%
Ketamine:	25	1,3%

22

21

150

113

23

8

95

116

1,2%

1,1%

62,6%

7,8%

5,9%

1,2% 0,4%

0,4%

5,0%

6,1%

LSD:

MDMA.

Methadone:

Snorted coke:

Mushrooms:

Poppers:

Viagra:

Nothing:

XTC:

Speed/amphetamines:

20.9%

Female:

Total:

Collaboration across Borders

Mainline takes part in the Bridging the Gaps Programme – health and rights for key populations. The programme focuses on the human rights and the accessibility of health care of sex workers, lesbian, gay, bisexual and transgender people (LGBT), and people who use drugs. These groups often face similar challenges.

The Bridging the Gaps programme is an innovative programme that aims to:

- · Link human rights to health care
- Connect members of key populations (sex workers, lesbian, gay, bisexual and transgender people (LGBT) and people who use drugs)
- Link community level work to international lobbying

National partners:

- Aids Fonds
- AIDS Foundation East-West (AFEW)
- COC
- Global Network of People Living with HIV (GNP+)

International partners:

- Global Forum on MSM and HIV (MSMGF)
- Global Network of Sex Work Projects (NSWP)
- International Network of People Using Drugs (INPUD)
- International Treatment Preparedness Coalition (ITPC)

Especially INPUD forms an important international partner for Mainline. In a joint effort the rights of people who use drugs are advocated on various levels of government.



Within the Bridging the Gaps programme Mainline operates in four countries.

In Indonesia we collaborate with

- LARAS; a local NGO that supports sex workers and people who use drugs in Kalimantan, Indonesia.
- PKNI; a network of organisations in Indonesia that support, and are at the same time operated by, people who use drugs.

In Kenya we collaborate with

- Mewa; an NGO based in Mombasa that supports people who use drugs. Mewa has drop-in centres, detox facilities and organises outreach activities in the streets of Mombasa.
- Omari; an NGO who supports drug users in Malindi, Kenya. Omari has drop-in centres, organises outreach activities, has detox facilities and focuses on the health of people who use drugs in local prisons.
- Reachout; an NGO that supports people who use drugs. Reachout is active in Mombasa and in the region south of the city.
 They have drop-in centres, detox facilities and they organise outreach activities.

In Nepal we collaborate with

- Nepal Harm Reduction Association (NHRA); a network of organisations in Nepal that support people who use drugs.
- Youth Vision; an NGO that supports people who use drugs. Youth Vision organises outreach activities, has detox facilities and provides buprenorphine treatment.
- Wisdom Foundation; an NGO that supports people who use drugs, through, among other activities, the organisation of outreach activities and by providing buprenorphine treatment.

In Pakistan we collaborate with

 Nai Zindagi; an NGO based in Rawalpindi that provides comprehensive services to people who use drugs. Nai Zindagi follows the guidelines of the continuum of care model. The organisation is geared towards harm reduction and takes heed of a drug user's social situation. They also provide detox treatment and ways to generate income. Nai Zindagi is a pioneer for harm reduction and social reintegration, and they have a pivotal role in functioning as a knowledge centre for issues concerning drug use in Pakistan.

More information about the Bridging the Gaps programme can be found on www.hivgaps.org.

South Africa

In South Africa, Mainline collaborates with the local NGO Health4Men. The Tikking the Boxes project is financed by the Dutch Aids Fonds. The aim is to improve the health of substance users and men who have sex with men (MSM).

Mainline is also involved in collaborating with a number of South African and international organisations, among which OUT!. Together we are producing a guide book for hospital staff on how to treat members of key populations, among which people who use drugs, more sensitively.

Other Mainline Partners

Mainline is often involved in collaborations of shorter duration and can also function as a consultant. In 2012 we collaborated with

- Alternative Georgia in Georgië
- · Tanadgoma in Georgië
- · Association PROI in Bosnië

AFEW

Within the Bridging the Gaps programme, Mainline has collaborated intensively with the Aids Foundation East West (AFEW), which focuses on problems related to infectious diseases in Eastern Europe and Central Asia. The collaboration has been made formal by the appointing of a project leader who co-ordinates both organisations' projects for people who use drugs.

Mainline in euro's

Statement of assets and liabilities			Profit and loss account		
per December 31st 2012	2012	2011	December 31st 2012	2012	2011
Tangible fixed assets	21.918	25.145	Subsidies	1.722.951	1.261.855
Debtors	23.556	44.977	Other gains	0	0
To be received from donors	9.350	33.649	Total revenue	1.722.951	1.261.855
To be received from others	120.305	71.588			
Subtotal	175.129	175.359	Direct project expenses	986.685	618.187
Cash, bank and equivalents	617.949	590.473	Forwarded project expenses	770.186	659.318
			Subtotal expenses on goals	1.756.871	1.277.505
Total assets	793.078	765.832			
			management expenses	702.054	651.158
Continuity reserve	90.789	56.577	Forwarded project expenses	-770.186	-659.318
special purposes reserve	62.644	80.000	Subtotal expenses on management	-68.132	-8.160
			Total expenses	1.688.739	1.269.345
Total reserves	153.433	136.577			
			Saldo revenue and expenses	34.212	-7.490
Long-term subsidy commitments	534.566	512.008			
Other debts	105.079	117.247	Allocation of results 2012 and 2011		
			Continuity reserve	34.212	-7.490
Total debts	639.645	629.255	Special purposes reserve	0	0
Total debts	793.078	765.832	Total allocation of results 2012 and 2011	34.212	-7.490



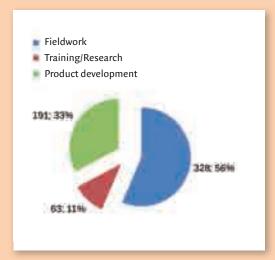
Herman Kalter Finance manager and head of support

"In 2012 we again managed to balance things nicely." Desiree van Dok
Office manager

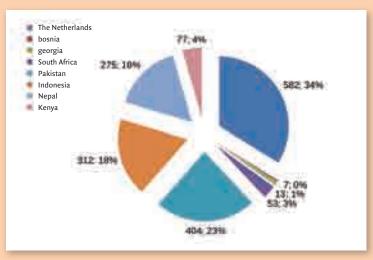
"We have an excellent staff of fine people. Never a dull moment."



Dutch turnover of activities in € 1.000



Turnover per country in € 1.000



Knowledge Centre

In 2012, Mainline organised a total number of 58 training sessions, workshops and presentations. The training sessions for staff members of the Salvation Army mainly focused on perspectives on substance use and on establishing relations with people who use drugs. The courses for RIBW Arnhem & Veluwe Valley focused on the substances itself and on expertise.

From session evaluations transpired that these were the most useful parts:

- Discussion of perspectives on substance use
- Discussion of collaboration between co-workers
- Causing a change in behaviour through a motivational approach
- · Debate on the work field
- · A perspective on what goes on in the user
- Presence approach

Several stimulating substances are studied during training courses



Overview of workshops 2012

Training session	Organisation
Eyes on the Needle: Safe Injecting	Tactus Enschede
	Methadone dispensary Leiden (2x)
Just Around the Corner: Staying in Contact with the User	Salvation Army Amsterdam (12x)
	Tactus Enschede
Safer Sex and Dangerous Seductions: MSM, Substance Use en	Open courses for STD nurses and HIV consultants (2x)
Sexual Risk Taking	
Substances and Harm Reduction	Hogeschool Inholland Alkmaar (2x)
	Hogeschool Inholland Diemen (3x)
Substances Workshop	Rino Group 'Bemoeizorg'
Young People and Substance Use	Sense Utrecht
	National Congres STDs HIV Sex
Advice Drooghuis Weert	Mensana RIBW Noord and Midden Limburg
Complex customers: Substance Use and Psychiatry	HVO Querido Amsterdam (2x)
Coffee and Contact: Drugs and Psychiatric Support in	HVO Querido Amsterdam (2x)
Walk In Shelters	Tactus Deventer (2x)
Going over: First Aid in the Case of Overdosing	Salvation Army Zuid Limburg (3x)
	Tactus Deventer
	Tactus Enschede
Discussion on Attitudes Towards Substance Use in Housing Projects	RIBW Arnhem and Veluwe Valley (11x)
Motivational Communication Approach	Salvation Army Zaandam (2x)
Streetwise: Drugs and Ways of Using	Domus Amsterdam (2x)
Baselab: Being in Control and Becoming Aware of the Risks	HKPD Vlissingen
of Freebase Coke	Twaalfde Huis Groningen
GHB Information Session	Street Prostitution Zone Utrecht
Perspectives on Substance Use among Women	Proi Sarajevo
Swingers, MSM, Substance Use and Sexual Choices	National Conference STDs HIV Sex

