ANNUAL REPORT 2016

MAINline

25 YEARS OF HARM REDUCTION
MISSION:
Promoting the health and improving the legal status of people who use drugs.

For the past 25 years, we’ve been providing health education and training, putting out a lifestyle magazine, and collaborating with international partners, all under the banner of harm reduction.
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This year marks the 25th anniversary of the Mainline Foundation, and this provides an opportunity to reflect on twenty-five years of harm reduction.

Our mission to reduce the number of HIV infections among drug users through education – the purpose of Mainline’s establishment in 1991 – has been achieved. Or at least the number of HIV infections is no longer on the rise, and most users have a roof over their head. But the fringes of this phenomenon remain. Crystal meth is slowly seeping into the Netherlands. GHB is being quietly used in the provinces. And freebase cocaine dealers are still doing a roaring trade each week when those who depend on drugs receive their allowance from the budget-maintenance service. And abroad, where Mainline is also active, improving the legal status of people who use drugs remains high on the agenda. As always, Mainline operates by going out onto the streets and making contact with our audience, be that at home or abroad. We never do so with a wagging finger, and we’re always ready to lend an ear. In addition, we’ve set out a new strategy this year and reformulated our mission, vision and goals. Everyone is now working even more collectively for a common purpose, and facing the next 25 years with renewed energy!

THE MAINLINE TEAM

Ferry Barendregt
Trainer, national department

Nick Veldwijk
Country Manager for Pakistan and Nepal
Mainline’s new strategy was approved by the board in 2016. Everyone is now working even more collectively for a common purpose. The plan lays out Mainline Foundation’s mission, vision and objectives, and outlines our strategy and activities for the next five years.

MAINLINE’S NEWLY STATED MISSION READS:
Promoting the health and improving the legal status of people who use drugs, without the primary objective of reducing their drug use in itself, and with respect for the users’ freedom of choice and human potential.

VISION
All of Mainline’s activities fall under the banner of harm reduction.
Harm reduction allows people to manage their drug use and regain control of their lives within a framework of realistic parameters.

In so doing, harm reduction restores the dignity of people who use drugs and enhances their quality of life.

CORE VALUES
Mainline operates from a starting point defined by the experience, motivation and social environment of its target group. In addition, our work is based on the following principles:

* Non-moralizing – maintain relationships of mutual trust with the client
* Competent – Scientifically sound
* Human-centred - empowering
* Authentic - imaginative and original
* Pragmatic – hands-on
* Activist - engaged

GOALS
* Provide and implement harm reduction interventions
* Improve the legal status of people who use drugs
* Support and promote harm reduction as a method and as a general approach.

We welcomed four new members to our team in 2016, all of whom we introduce properly later in this report.

Rian Warmoeskerken
National Programme Manager

Sara Woods
Project leader for the national department
The foundation became a household name in the drug scene. Mainline has now been around for 25 years, and to mark this milestone we are publishing an anniversary issue in which we take you on a journey through time from 1991 to 2016.

The AIDs epidemic was at its height in the late eighties, and users were falling in droves. Eventually, three members of the association for drug users (MDHG) could bear it no longer and established Mainline.

The glossy magazine of today began its life 25 years ago as a couple of stapled-together A4 sheets. Three young men joined forces to inform users about HIV and the importance of using clean syringes. That’s actually all they did, but the urgency was great and they got results. The magazine quickly became the favourite periodical of drug users throughout the Netherlands.

**Anniversary issue**
This special edition features Mainline’s founders looking back over the period of Mainline’s existence. It showcases different perspectives on drug use and dependency and pays a visit to the Mainline Museum, which

“We worked in a basement, on an old computer: formatting columns, inserting text, adding pictures. I was often completely exhausted when I cycled back home at night.”
Rob Brandsma, co-founder of Mainline

“People couldn’t understand why on earth we would concern ourselves with drug users. Aren’t those the people that steal car radios? But we didn’t care about that. We were concerned about the users’ health, and about the collective public health.”
John-Peter Kools, co-founder of Mainline
includes all manner of user paraphernalia collected over the years. You will be treated to memorable fieldwork encounters and, with the aid of photographs, taken on a 1991–2016 tour of red-light districts, drug policy and notorious drug-related spots.

The fringes of the phenomenon remain
We’re now 25 years from our inception and the number of HIV infections among people who use drugs is no longer on the rise, and most users have a roof over their head. But the fringes of the phenomenon remain. Crystal meth is slowly seeping into the Netherlands. GHB is being quietly used in the provinces. And freebase cocaine dealers are still doing a roaring trade each week when those who depend on drugs receive their allowance from the budget-maintenance service. As usual, Mainline continues to operate by going out onto the streets and making contact with our audience, never doing so with a wagging finger, and always ready to lend an ear. And hand over a copy of our lovely magazine.

Onward and upward for the next 25 years.

“We went undercover to every pharmacy in Amsterdam and published a map showing where to get clean syringes.”

Tijs van den Boomen, co-founder of Mainline

Oprichter John-Peter Kools laat de eerste Mainline zien aan oom agent op de Wallen. Foto: Leo Erken
Mainline’s founders receive the first copy of the anniversary issue, handed to them by Joost Brantas and Annet Spin, long-time users and HIV veterans.

Adam de Jong van Ministerie van VWS sprak over het belang van harm reduction.
Current editor-in-chief Guido van Diepen hands over the Mainline anniversary edition to Mainline's first editor-in-chief and initiator Tijs van den Boomen.

A great night full of speeches, music, beer and carrots.

National programme manager Renate van Bodegom and international programme manager Machteld Busz presented the event.
The use of crystal meth (otherwise known as “Tina”) and injecting drugs during sex (otherwise known as “slamming”) is growing steadily within certain sections of the Dutch gay scene. Leon Knoops and Ingrid Bakker represent Mainline’s chemsex team.

“We’re committed to promoting harm reduction in these sections of the gay scene,” says Leon Knoops, “and we’re dedicated to increasing the understanding and expertise of professionals working in the field of health and drug dependency. We also provide explanatory material on drugs and transmissible infections, and hold open evenings for men who have engaged in chemsex – or, to put it another way, men who have used drugs in a sexual setting.” Two years ago, alarm bells began ringing at Mainline, prompted by signals from different quarters. “In collaboration with Soa Aids Netherlands, we began researching crystal meth use and drug injecting in a sexual setting.” The research and interviews resulted in the report Tina and Slamming. During the interviews, several respondents voiced a need for an accessible place in Amsterdam that offered information and advice on the use of drugs (also known as “chems”) during sex.

A Trial
No sooner said than done. In March 2016, Mainline organised a trial: open evenings in a safe and accessible environment where gay men could talk to one another about drugs and sex without judgment. The evenings were tailored to two groups of men: one evening for currently active users and the other for men that have stopped using. To promote the evenings, we distributed flyers in Amsterdam’s gay bars and at STI clinics, and to HIV counsellors working in hospitals as well as to several fetish shops. We also shared digital versions of the flyers via the Facebook pages of the COC (the country’s largest advocacy organisation) and Poz&Proud (the gay men’s group within the Dutch HIV Association).

Four to six men turned up for each of the nights. Knoops: “The participants were unanimous in stressing how much they valued the group discussions.” The evenings became monthly events from July onwards. The discussions between the active users focused largely on self-control, how to deal with craving, and how to limit the harmful effects of drug use. The discussions during the sessions for the men that had stopped using tended to be about issues...
like having sex while sober, insecurity, loneliness, peer pressure and the fear of relapsing. The participants expressed their desire to meet for these evenings more often, so Mainline began running them twice a month from January 2017 onwards.

**European Chemsex Forum**
In early April, our chemsex team were guests at the first European Chemsex Forum, which attracted over two hundred attendees from 22 different countries. Knoops was interviewed about the chemsex situation in the Netherlands. Ingrid Bakker: “We were one of the first European organisations to publish a report on the phenomenon. Our slamming booklet also attracted lots of attention. Many professionals in the Netherlands use the booklet to broach the subject during their discussions with clients. There’s a lack of knowledge about safe injecting in the slamming scene. Users typically learn how to inject from other users, and in so doing adopt unsafe injecting techniques. The booklet was well received and is currently in use by an English organisation. It was clear from the conference that slamming and the use of crystal meth in the gay scene is steadily on the rise in other countries, too.”

**Barebacking**
“Condoms still tend to be eschewed in the chemsex scene,” says Knoops, “raising the transmission risk of infectious diseases.” To address this, Mainline developed two mini magazines for people in the scene, one on hepatitis C and the other on chemsex. “The information therein was conveyed in a tone of voice appropriate to the scene, and the publications are finding favour among more and more professionals, HIV counsellors and STI nurses. They consider it a useful tool for broaching the subject of chemsex and hepatitis C on account of its non-judgemental tone.”

**Amsterdam Chemsex Consultation Meeting**
In May 2016, in response to the European Chemsex Forum in London, Mainline established the Amsterdam Chemsex Consultation Meeting. Bakker: “This is a biannual, chemsex-themed consultation meeting involving a variety of organisations in the field of health and substance dependency. The aim is to keep each other updated and provide opportunities for collaborative activities and interventions around the phenomenon of chemsex. It has already attracted ten member organisations.” Also in May, Mainline organised an expertise day for professionals from the fields of health and substance dependency, during which the European chemsex expert David Stuart talked about how to broach the subject of chemsex and about developing interventions. All in all, in 2016, Mainline organised twelve training sessions, presentations and workshops about chemsex for healthcare professionals. Mainline, in collaboration with Soa Aids Netherlands, also developed a digital training module for professionals so as to provide them an insight into the phenomenon.
Mainline’s fieldworkers continuously tour the peripheral areas of the country to talk to people who use drugs and keep tabs on what’s going on. What did we get up to in 2016, and what did we find? Some highlights.

**SUBSTANCE USE IN TWENTE**

Mainline performed a Quick Scan of Hof van Twente in response to a request by the municipality, who said they’d seen signs of copious drug use among the young people in the area. Mainline teamed up with the research firm Mark Bench (Quick Scan) and the Trimbos Institute (Drugs Scan) to roam the streets and question police officers, outreach workers, parents and, naturally, young people themselves.

The Quick Scan revealed that alcohol was a particular problem. Young people in the municipality had a higher per capita consumption of alcohol than those in the neighbouring regions, and excessive drinking was not uncommon. Young people were binge drinking in shacks before and during social outings. Some parents appeared to approve of this, and even facilitated it. Other parents were found to underestimate the scope of the problem, as well as the risks.

Despite the revelation of the problem of excessive alcohol use, the primary local concern was about possible drug use.

But the Quick Scan revealed drug use to be a less acute problem. Some of the kids used cannabis, but not to an alarming extent, and a handful of the kids occasionally used hard drugs. What struck us was that drugs had become more mainstream in Twente, as they had everywhere else. At the same time, there appeared to be a fair degree of ignorance and anxiety around drugs that tended to make people magnify the problem beyond reality. The taboo around drug use might make it difficult to establish relationships of mutual trust with the young people in this municipality.

The most important recommendation with respect to our findings was to focus on establishing relationships with the young people and to strengthen their resilience – especially with regard to the more vulnerable kids – and to raise the level of knowledge and understanding among both parents and kids.

The report and its recommendations (Substance-using adolescents and young adults in the municipality of Hof van Twente) can be downloaded at www.mainline.nl/page/rapporten-onderzoek
THAI MASSEUSES ON CRYSTAL METH?

Mainline heard from a number of sources that crystal meth was being used in some Thai massage parlours. This is a typically secluded world of legal and illegal workers who often don’t speak Dutch. Mainline sent a trusted Thai contact to investigate.

What we found
It turned out that this group of women rarely used drugs, but that certain Thai women occasionally used Ecstasy and Yaba, the latter of which does contain methamphetamine (crystal meth) and is mostly sold in Thailand. A handful of them had problems on account of the drug. However, they had no idea about the availability of relevant support services in the Netherlands. As a result, Mainline put together a Thai booklet with information and advice on drug use and a detailed map with addresses of helpful organisations.

The research report (Drug Use and Access to Service Provision among workers at non-sex-licensed Thai massage salons in Amsterdam and The Hague) can be downloaded via www.mainline.nl/page/rapporten-onderzoek

WHO YOU GONNA CALL?
MAINLINE FOUNDATION!

Have you noticed a sudden spike in drug use in your social environment, or the sudden appearance of new and different drugs? Or would you just like to know what’s been happening all along anyway that you just weren’t aware of? Mainline developed two methods in 2016 for identifying and understanding local signs and trends around drug use in a given area: Drugs Scan and Quick Scan. Using these methods, Mainline is able to sketch a relatively quick picture of drug use in the region based on interviews with relevant parties, such as the police, club owners, fieldworkers and substance dependency experts. Mainline follows this with a more comprehensive report explaining the necessity or lack thereof of further research. A combination of both scans is also possible.

Want to know more? Contact project manager Sara Woods: s.woods@mainline.nl 020 68 22 660
Mainline offers a variety of training sessions, not only to healthcare professionals but also to users. They’re a useful way to talk to clients about their drug use and to raise their awareness of the health risks.

Our fieldworkers and base pipe specialists Toon Broeks and Annet Vogelaar travel across the country every year in order to visit smoking rooms and check out people’s pipes. They set up their mini laboratory – with magnifying glasses, thermometers and other measuring instruments – right on location, and, quite literally, subject people’s base pipes to a detailed examination under the microscope.

**What we check**

- length and thickness of the stem
- diameter and depth of the bowl
- material from which the pipe is made
- type of filter
- lighting method

Participants are more than happy to offer their pipes up for inspection, and to discuss their smoking rituals. We always end these checks and discussions by raffling a unique base pipe. Mainline hopes these workshops will serve to make users more aware of their smoking habits.
OPIATE USERS ARE GENERALLY SATISFIED

In 2017, a diagnostic and treatment process (standard of care) will be introduced for people with opiate dependency. In developing the guidelines, it is important to ensure they correspond to the experience and needs of clients undergoing or seeking treatment. To this end, Mainline conducted a survey.

Interviews with users
In the spring of 2016, Mainline’s fieldworkers fanned out across the country to interview users about their experiences with methadone treatment.

We talked to fifty people about:
- their views on methadone
- their relationship with the service provider
- the facility’s opening hours and its accessibility
- what manner of care was provided
- their input in the treatment
- how users felt about the way they were treated and any complaints they might have

Frequency and support
All in all, the users were quite satisfied with the treatment and service, and thus so were we. Nevertheless, there’s always room for improvement. Frequently mentioned areas for improvement were the frequency of supply and the lack of support for those wishing to come off methadone.

Correspondent to users’ needs
The survey, whose results we compiled in a report, reveals the clients’ level of satisfaction with the current treatment.

Mainline aims to use this additional information to assist in drafting an appropriate set of guidelines for a standard of care for people with opiate dependence.

The status report (Opiate treatment from the client’s perspective) can be downloaded at www.mainline.nl/page/rapporten-onderzoek

INTRODUCING RIAN WARMOESKERKEN

In 2016, Rian filled in for our national programme manager Renate van Bodegom during her leave. Managing the national team went splendidly, which was not surprising considering he’d been a manager at VluchtelingenWerk (the Dutch Council for Refugees) for the previous 14 years, where he’d been involved both at the centres for the reception of refugees as well as in the resettlement of said refugees within local communities. Needless to say, when Renate decided to move to New York with her husband, we asked Rian if he’d be interested in taking over her responsibilities indefinitely.

Rian: “Naturally, I didn’t hesitate to give a resounding yes! I think it’s absolutely wonderful to be able to contribute via this role to achieving our mission and preserving Mainline’s unique, independent and critical perspective.”
SCREENING FOR HEPATITIS C

AWARENESS RAISING, DETECTION AND TRAINING FOR EFFECTIVE HEPATITIS C CARE

In 2014, Mainline conducted research among visitors to accessible day care and walk-in facilities in Amsterdam to get an idea of their level of understanding of hepatitis C and its prevalence. Preparations for the Amsterdam HCV Project “Awareness raising, detection and training for effective hepatitis C care” began in 2016 with the aim of eradicating the virus among people who had injected drugs. The project was initiated by De Regenboog Groep (an organisation that facilitates the participation in society of people living in social poverty).

Training for counsellors at homeless shelters and social service facilities (MO) begins in May 2017. From June, Mainline’s fieldworkers will begin disseminating information to the primary target audience, MO residents and walk-in centre visitors. The project will run until March 2018, and will be followed by a review and report.

For more information, please visit www.mainline.nl/page/projecten: Hepatitis C - Amsterdam
Our new recruit, Ferry Barendregt, has been our national team’s trainer since October 2016. Although he joined the team with a lot of training experience, his substance-related knowledge was limited. However, it took no time at all for the wealth of knowledge at Mainline to turn him into an expert.

Bite-sized information delivered in a day
Mainline offers a range of training programmes, both for healthcare professionals and for people who use drugs. The first training programme Ferry led on joining the team was called “Coffee & Contact”, a programme designed specifically for people working in care services whose job involves dealing with people who use drugs or alcohol. Ferry: “First, I introduce the group to the concept of harm reduction. Then I show the participants a variety of drugs that I’ve brought with me and ask if they can identify them. We discuss how to help users minimise the adverse health effects of drugs. Then I have a user talk to the group about his or her experience with drugs and with healthcare providers. A doctor specialising in drug dependency joins us for the afternoon session, during which he or she explains exactly what substance dependency is. Participants are given a lot of information during the course of the day, but I make it manageable by dovetailing it all into practical working methods.”

Tailored to requirements in depth and subject matter
Mainline also offers two-day training programmes for those that require greater immersion. An example of this is our “Substance use and psychiatry” programme. In addition to bringing participants up to speed on the effects of a variety of drugs, it also provides information on how to reach users who might be suffering mental health problems.

Mainline also provides customised programmes, such as we did for the RINO training centre in Utrecht, where the staff uses intervention methods.

Ferry: “The first part of the day consisted of a presentation by a psychiatrist that explored the subject in great depth. Later in the day, the discussion turned to the subject of substances as a form of self-medication. In short, there’s something for everyone, and often tailored to requirements!”
25 YEARS AND COUNTING, AT HOME AND ABROAD

Over the past 25 years, Mainline has studied the effectiveness of policies introduced in the Netherlands and, in so doing, acquired a deep understanding of the complexities inherent in the phenomenon of substance use, as well as a clear appreciation of the related social problems. Mainline is keen to share its experience with likeminded organisations in other countries, and currently does so in Nepal, Pakistan, Georgia, Indonesia, Kenya, Tanzania and South Africa. This allows us to reach more and more users with reliable information and effective healthcare.

Baseline studies
Mainline conducted five baseline studies in 2016, one each in Nepal, South Africa, Kenya, Indonesia and Tanzania. “Baseline studies give us an overview of the situation in a country,” says international researcher Joost Breeksema. “What are the laws of the land, what’s the political situation, what’s the policy regarding users and how is this implemented? We also examine the drug use statistics, such as the prevalence rates of HIV and hepatitis C, as well as existing projects relating to drug use, harm reduction and HIV intervention. We always take great care to avoid writing reports that will end up gathering dust in some official’s desk drawer. We are very pragmatic and geared towards improving our services and sharpening our focus.”

The studies begin with a survey of the available literature, policy documents and official reports on health issues and drug use. These are supplemented by in-depth, on-the-ground interviews with all the key stakeholders, which may include local organisations, relevant governmental bodies, hospital staff and international donors.

Breeksema: “The survey tells us whether more information, interventions or training is needed in the field of harm reduction, and where Mainline should focus its attention. If we find a lack of reliable information on drug use in a particular city or region, we may proceed to “map” the area, which means identifying where users hang out, what the issues are, and what users need.”
With respect to Bridging the Gaps 2, Mainline is focusing on people who use drugs in Indonesia, Kenya, Nepal, Pakistan, South Africa, and Tanzania (new!).

The Bridging the Gaps programme that ran from 2012 to 2016 was a huge success. As a result, the Ministry of Foreign Affairs awarded it a second round of funding. The project allows a variety of organisations in the above-mentioned countries to commit to improving the health and legal status of drug users, sex workers and lesbian, gay, bisexual and transgender (LGBT) people right up to the year 2020.

The three goals of Bridging the Gaps 2
1. A strong civil society that holds its government to account.
2. An improved human rights situation among key populations.
3. Improved sexual and reproductive health and rights (SRHR), improved services, and fewer HIV infections.

Improving the quality of life of people who use drugs
Mainlines primary goal is to make effective harm reduction services available to people who use drugs. These services may comprise a wide range of interventions, including those supported by the World Health Organization.

However, Mainline takes a broader perspective on harm reduction, and it’s one defined by the aim of ensuring continuous healthcare for people who use drugs. Consequently, it encompasses strategies devised to improve the human rights situation wherever we work.

Mainline assists our partners in building their capacity in four key areas:
* Harm reduction and programming
* Networking and advocacy
* Organisational structure
* Funding

In addition, we intend to pay a significant amount of attention to innovation over the next few years. In this regard, Mainline is already working on an innovation-oriented project with Nai Zindagi in Pakistan. The result of this collaboration will be a key driver for programmes in other countries.
In 2016, Mainline launched a unique harm reduction pilot programme for crystal meth smokers in Jakarta. “Little was known about smokers and their risky habits, and there were no harm reduction services available to this group,” says country manager Hatun Eksen.

Research
Mainline researched three large cities in collaboration with Atma Jaya University: Jakarta, Medan and Makassar. Eksen: “The objective was to gain more insight into the use of crystal meth in these cities. What were the associated risks with respect to the way people smoked crystal meth? Was there a link between these risks and HIV infection? And were people in this group using the existing healthcare facilities? The investigation revealed a close-knit social and sexual network of meth users. The drug is often used in a sexual context, the effect of which renders users more likely to engage in risky behaviour, such as having unprotected or inadvisably prolonged sex. We also found that meth users tended to avoid the existing healthcare facilities as they did not consider themselves similar in any significant way to injecting heroin users.”

The Pilot
Based on the results of the study, Mainline launched a pilot programme in Jakarta in collaboration with its local partner Karisma. “A fieldwork team of peers experimented with different strategies for establishing contact with members of this often concealed group of crystal meth users, which includes MSM, sex workers and their clients,” says Hatun Eksen. “We developed educational material and harm reduction packs specifically for these groups. By handing out these materials, we were able to gain the confidence of these initially suspicious groups of individuals, and engage them in dialogue.”

Mainline worked with Atma Jaya University to evaluate the effectiveness of the intervention methods used in the harm reduction pilot. The results of this evaluation (and those of the study) fed into our development of a best practice model for daily activity.
South-South Exchange: Indonesia-South Africa

Violence against users is a daily occurrence in South Africa, as is the violation of their human rights. “At the same time, access to a fair hearing and legal assistance for drug users is almost unheard of here,” says country manager Hatun Eksen.

Mainline put its South African partner in touch with PKNI, the Indonesian network of People who Use Drugs. PKNI had previously established a network of paralegals in Indonesia to support people who use drugs. “If someone gets arrested for the use or possession of drugs, PKNI steps in to ensure they get all the necessary information pertaining to their case as well as legal support,” says Eksen. “And it works. They’re usually able to keep their clients from serving any prison time.”

Mainline asked PKNI to train the user-support organisation in South Africa so they could replicate the methods in their own country.

Paralegal training
The three-day training sessions took place in Cape Town and Pretoria in December 2016, during which PKNI explained the workings and structure of their paralegal operation. A South African lawyer explained the local situation with respect to rights and obligations. Participants learned how to draw up actionable plans for a paralegal network and how to defend their clients’ human rights.

The training sessions were evaluated and deemed a success. It had engaged the participants and left them with a clearer understanding of how to proceed. The members of the local network organisations Drug Users of Cape Town (DUCT) and Drug Users of Gauteng (DUG) that took part in the sessions are now exploring the structural options for providing local paralegal support. “It’s a difficult task, because few local lawyers want to support people who use drugs. It’s going to take lots of work and lobbying, but we’ll make headway by continuing to report human rights violations by the police and by publicising the court cases of people who use drugs.”

“We would really like to increase our legal knowledge and come across like proper paralegals. We want to be able to say to the police: ‘According to Article 51 of the statute book concerning drugs, you do not have the right to arrest someone for this!’”
Nick Veldwijk has reinforced the international team’s capacity in significant ways since taking over as country manager in Nepal last year. “The smell of exhaust fumes and Nepalese spices, the sense that someone is following you around with a hair dryer on full blast pointed at your head, the sound of honking taxis and annoying street hawkers trying to sell you Purple Haze ... It’s great to be back in Indonesia,” says Veldwijk.

A key priority in Kathmandu is the establishment of effective needle and syringe exchange programmes, says Veldwijk. “Imagine being taken on the back of a small motorbike to the slums of Kathmandu and brought before a user, who’s completely high and engaged in the preparation of a shot under the watchful eye of his neighbour, who’s busy preparing a pot of Dal Bhat [traditional meal consisting of steamed rice and a cooked lentil soup]. Our goal is to provide clean needles and health education in areas with high concentrations of users. We’re training local fieldworks to work more effectively with users. And we’re making progress; the fieldworkers are engaging more pro-actively with their clients. However, we have some important challenges to address. There are significant gains to be made in providing better education about safe injecting, recognizing abscesses and sexual health, for instance.”

To measure is to know
Youth Vision (Mainline’s partner in Nepal) will report its findings. Veldwijk: “Some of the parameters are quite easy to measure: how many people are they reaching with the programme; how many syringes have they handed out per person? But others are trickier: are users enjoying better health on account of the programme; has their legal status improved? Mainline’s support is crucial in allowing the organisation to run this programme.”

Heavy competition for funds
There are countless user-oriented organisations in Nepal, each with its own agenda and funding needs. Veldwijk: “Whenever I land in Nepal, everyone assumes I’ve returned with bags full of money. Thus, part of my job involves managing expectations.”

Future plans
Veldwijk wants to conduct an investigation of the rehabilitation centres in Kathmandu next year. Veldwijk: “We’ve heard stories of users being forced into treatment, that the treatment itself is inhumane and that users’ human rights are being violated. I really want to look into this.”
**THeses**

**Fleur Godrie studied the effectiveness of “mobile health” within harm reduction programmes.**

She concluded that the service makes information more readily accessible to users, improves the relevance of the programme, and raises the frequency with which people use the service.

Download her report M-health in harm reduction strategies for people who use drugs at www.mainline.nl/page/rapporten-onderzoek

**Maarten Beijer studied the guidelines employed in methadone substitution treatment for opioids users in the Netherlands**

He concluded that there was a variance in the application of the guidelines according to user group because health inspectors across the country weren’t using the same parameters to monitor the effects of treatment.

Download his report Methadone treatment in the Netherlands at english.mainline.nl (via “Reports: Sober facts on” – click on the red tile at the bottom-right of the page)

**INTRODUCING NICK VELDWIJK**

Nick joined Mainline in May 2016, assuming the role of country manager for Nepal & Pakistan and serving on the organizational management team of the alliance of partners involved in Bridging the Gaps 2. Prior to joining Mainline, Nick earned a Master in Health Sciences (with a specialization in international public health). He also worked with a number of NGOs and social entrepreneurs in roles that had one thing in common: the promotion of health worldwide. His interest in social entrepreneurship has also been a natural fit for Mainline.

It was while studying that Nick first came into contact with the concept of harm reduction, and he recognised its significance as a cornerstone of health promotion. He is thrilled to be in a role that takes full advantage of his interests, skills and experience:

“I find Mainline a great place to work; it’s open-minded and has a really good team with whom you immediately feel right at home. These, in my opinion, are the most important basic elements of a sound organization.”
Training in Indonesia, South Africa and Kenya

Our international trainer Jos Luteijn did a fair bit of travelling in 2016, criss-crossing the globe to train our international partners’ fieldworkers.

Nepal
In Nepal, Jos teamed up with our partner from Pakistan to instruct local fieldworkers in “mapping”, and to explain the underlying principles of harm reduction.

Indonesia
In Indonesia – where an increasing number of people are using crystal meth (known locally as “shabu”) – Jos offered instruction to fieldworkers from our local partner Karisma on the subject of smoking crystal meth. Jos also coached fieldworkers on the job to ensure the practical applicability of theory in the local context, which he’d done previously in Kenya and Indonesia.

Zuid-Afrika
In South Africa, Jos teamed up with local partners TB/HIV Care and OUT to offer instruction to fieldworkers in Durban, Cape Town and Pretoria on the practice of opioid substitution therapy (OST). The focus here was on the medical aspects of OST and forms of psychosocial support available to OST clients.

Kenya
In Kenya, Mainline launched a “Train the Trainer” programme designed to help local organisations enrich their knowledge and develop their management capacity. The programme began in 2015 and continued through 2016. Jos also ran a team-building exercise for MEWA, our Kenyan partner.

New: Country Dossiers
In 2016, we created and published individual country dossiers for every country in which Mainline is engaged (visit english.mainline.nl – see under “Projects”). These online dossiers include summaries of all our projects, profiles of our local partners and of the countries themselves, and local news reports.
Mainline magazine got a make-over in 2016, which included a modification in size for greater convenience. We also began releasing five issues a year, instead of three. This allows Mainline to respond faster to current events, and makes it easier to theme the issues.

The first edition in the new format was devoted to NPS: New Psychoactive Substances. In consequence, we conducted a survey of smart shops in the Netherlands to find out which substances were the most popular. This resulted in two special editions: one on chemsex and the other on GHB.

Mainline magazine is distributed across the Netherlands via drop-in centres, prisons, red light districts, bed and breakfasts, and user rooms. Users receive it free, but professionals pay €20 a year for a home-delivered subscription (which, from 2016, includes all five issues).

The first edition alternated user experience stories with factual information about hepatitis C to raise awareness of the subject. The second focused primarily on the subject of reinfection and treatment, and the taboo around hepatitis C.

In addition to publishing multiple issues of Mainline magazine, along with status and research reports and numerous surveys, not to mention developing quick scans and drugs scans, we also released a number of other publications in 2016. These included a triple-length HIV- and drug-themed anniversary issue of our newsletter Take it, as well as the newsletter C-zicht (C in the picture), which was devoted entirely to the subject of the liver and explored questions such as: what can you do to ensure yours stays healthy, and what should you do if you suffer liver damage?

We also published two editions of the mini magazine Chemsex NL for men who have sex with men (MSM) and use drugs while doing so.

Each issue is also available to order via our web shop at www.mainline.nl
### BALANCE AS AT 31 DECEMBER 2016

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tangible fixed assets</td>
<td>19,384</td>
<td>19,301</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>-24</td>
<td>24,114</td>
</tr>
<tr>
<td>Receivables from donors</td>
<td>0</td>
<td>63,012</td>
</tr>
<tr>
<td>Other receivables</td>
<td>14,944</td>
<td>29,400</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td><strong>34,304</strong></td>
<td><strong>135,827</strong></td>
</tr>
<tr>
<td>Cash, bank and equivalents</td>
<td>267,306</td>
<td>238,904</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td><strong>301,610</strong></td>
<td><strong>374,731</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continuity reserves</td>
<td>63,757</td>
<td>54,434</td>
</tr>
<tr>
<td>Reserves for special purposes</td>
<td>55,000</td>
<td>55,000</td>
</tr>
<tr>
<td><strong>Total reserves</strong></td>
<td><strong>118,757</strong></td>
<td><strong>109,434</strong></td>
</tr>
<tr>
<td>Long-term subsidy liabilities</td>
<td>8,009</td>
<td>28,116</td>
</tr>
<tr>
<td>Other payables</td>
<td>174,844</td>
<td>237,181</td>
</tr>
<tr>
<td><strong>Total debt</strong></td>
<td><strong>182,853</strong></td>
<td><strong>265,297</strong></td>
</tr>
<tr>
<td><strong>Total liabilities</strong></td>
<td><strong>301,610</strong></td>
<td><strong>374,731</strong></td>
</tr>
</tbody>
</table>

### NET TURNOVER BY ACTIVITY IN THE NETHERLANDS (in €1,000)

- **Fieldwork**: 209 (45%)
- **Training/Research**: 54 (12%)
- **Educational material**: 197 (43%)
## Profit and Loss Account As at 31 Dec. 2016

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue from subsidies</td>
<td>1,857,668</td>
<td>1,475,591</td>
</tr>
<tr>
<td>Other revenue</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total revenues</strong></td>
<td>1,857,668</td>
<td>1,475,591</td>
</tr>
<tr>
<td>Direct project costs</td>
<td>968,297</td>
<td>558,639</td>
</tr>
<tr>
<td>Allocated project costs</td>
<td>908,516</td>
<td>904,173</td>
</tr>
<tr>
<td><strong>Subtotal of expenditure attributed to objectives</strong></td>
<td>1,876,813</td>
<td>1,462,812</td>
</tr>
<tr>
<td>Management and administration costs</td>
<td>885,109</td>
<td>919,453</td>
</tr>
<tr>
<td>Allocated project costs</td>
<td>-908,516</td>
<td>-904,173</td>
</tr>
<tr>
<td><strong>Subtotal of expenditure on mgmt and administration</strong></td>
<td>-23,407</td>
<td>15,280</td>
</tr>
<tr>
<td><strong>Total expenditure</strong></td>
<td>1,853,406</td>
<td>1,503,650</td>
</tr>
<tr>
<td>Balance of income and expenses</td>
<td>4,262</td>
<td>-28,059</td>
</tr>
</tbody>
</table>

## Allocation of Income in 2016 and 2015

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continuity reserves</td>
<td>4,262</td>
<td>-28,059</td>
</tr>
<tr>
<td><strong>Total allocation of income in 2016 and 2015</strong></td>
<td>4,262</td>
<td>-28,059</td>
</tr>
</tbody>
</table>

### Net Turnover Per Country (in €1,000)

- **The Netherlands**: 460 (25%)
- **South Africa**: 290 (15%)
- **Pakistan**: 353 (19%)
- **Indonesia**: 257 (14%)
- **Nepal**: 279 (15%)
- **Kenya**: 216 (12%)
- **Georgia**: 3 (0%)
A WARM WELCOME IN PAKISTAN

In late November 2016, we visited Nai Zindagi, our main partner in Pakistan. Over the course of our ten-year partnership, Nai Zindagi has evolved into a professional organisation with a keen understanding of how to establish groundbreaking harm reduction programmes, and an open-minded approach to doing so.

You can read all about the innovative projects taking place in Pakistan by visiting english.mainline.nl/page/projects (click on “Innovations in Pakistan”).