

# FESAT

## European Network



### **FIRST CONFERENCE OF ASSOCIATED SERVICES**

*4 - 5 April 2003 • Milan - Italy*



EUROPEAN FOUNDATION  
OF DRUG HELPLINES

# WELCOME



*This is your conference as members of the FESAT network.*

*An expanding European Union has led to increase in the membership of FESAT to over 50 services. This means that there will be greater opportunity for services in existing and applicant EU states to work together in addressing a problem which does not have any geographical boundaries.*

*The conference will treat a variety of 'hot topics' including use of e-mail, evaluation, drugs and the media, training, 'ad hoc' helplines and services for families.*

*We will also consider monitoring. We have already operated a monitoring project for a couple of years. This conference provides an opportunity for you to help develop this monitoring work, in particular regarding the collection of information about new trends in drug use and in changing laws and attitudes.*

*We know that you are all interested in opportunities to network with other drug helplines. There is a huge variety of ideas and experiences from a range of different types of services within FESAT. These do not include standard practices but also single projects to test new ideas and new technologies. I hope this conference gives you an enjoyable opportunity to meet and co-operate with your counterparts in the rest of Europe.*

**Roseleen Hanton,**  
President of FESAT  
Coordinator of "South East Regional Drug Helpline", Waterford, Ireland

## WITH THE FINANCIAL SUPPORT OF

- COMMISSION OF THE EUROPEAN COMMUNITIES



- THE MUNICIPALITY OF MILAN, ITALY



Milano  
Comune di Milano

- CITY OF MILAN HEALTH SERVICES ADMINISTRATION



- FONDS DE LUTTE CONTRE LE TRAFIC DES STUPÉFIANTS, LUXEMBOURG



EUROPEAN FOUNDATION  
OF DRUG HELPLINES



FESAT

# FIRST CONFERENCE OF ASSOCIATED SERVICES

4 - 5 April 2003 • Milan - Italy

## Thursday 3 April

**15.00 – 18.00**

- Registration

## Friday 4 April

**08.00 – 09.00**

- Registration and installation of stands by the services

**09.00 – 10.30**

### Opening session (English – French – Italian)

- R. Hanton - FESAT President
- Italian Officials
  - Municipality of Milan
  - Health Department of the Lombard Region (A.S.L.)
    - City of Milan
- European Commission
- EMCDDA

**10.30 – 11.00**

- Coffee Break

**11.00 – 12.30**

- Rafaella Rossin, Linea Verde Alcohol (L.V.A.) - A.S.L. – City of Milan: "The Milan helpline network for Drugs and Alcohol".  
*Presentation 20 mins – Question time 10 mins*
- Clemente Suardi, C.E.A.S., Comune di Milano: "The collaboration between the Linea Verde and the Territory services – A monitoring experience".  
*Presentation 20 mins – Question time 10 mins*
- Prof. Patrick Kenis – "An external evaluation of FESAT".  
*Presentation 20 mins – Question time 10 mins*

**12.30 – 14.00**

- Lunch

**14.00 – 16.00**

- Workshops 1 – 2 – 3

**16.00 – 16.30**

- Coffee Break

**16.30 – 18.30**

- Workshops 1 – 2 – 4

## Saturday 5 April

**09.00 – 10.30**

### Plenary session (English - French – Italian)

- B. Hibell/M. McLean : "The Monitoring Project of FESAT – Emerging trends 2000 – 2002"  
*Presentation 20 mins – Question time 10 mins*
- M. Cantin : "Drogue: aide et référence - A Quebec service ten years later"  
*Presentation 20 mins – Question time 10 mins*
- H.-V. Happel : "The Grey/Ad hoc Helplines Survey of FESAT"  
*Presentation 10 mins – Question time 5 mins*
- T. Jaakkola : "Guidelines for setting up a helpline"  
*Presentation of this new FESAT tool  
Presentation 10 mins – Question time 5 mins*

**10.30 – 11.00**

- Coffee Break

**11.00 – 12.30**

- Associated Services Official Meeting  
*(plenary room - F)*

**12.30 – 14.00**

- Lunch

**14.00 – 15.30**

- Workshops 5 – 6 – 7

**15.30 – 16.00**

- Coffee Break

**16.00 – 17.30**

- Workshops 8 – 9

**17.30 – 18.00**

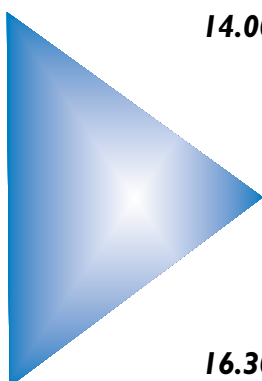
### Closing session (English - French – Italian)

*Conference venue :*

**Palazzo delle Stelline  
Corso Magenta, 61  
20123 Milan, Italie**

## FRIDAY 4 April

WORKSHOPS  
ARE ONLY IN  
FRENCH AND  
ENGLISH



14.00 – 16.00

16.30 – 18.30

### PLENARY ROOM - F

#### **WORKSHOP 1 : E-mail counselling**

**Chair/facilitator : P. Pissara (P)**

- G. Gottwald-Nathaniel, Treffpunkt Drogenberatung API (AUS) : "*Standards in e-mail counselling*"
- A. Lodzina, Confidence Line (Latvia) : "*Delivery of Services by e-mail/Internet*"

#### **WORKSHOP 1 (continuation) :**

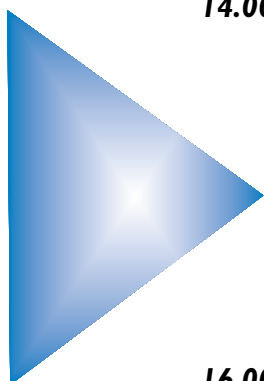
#### **E-mail counselling**

**Chair/facilitator : P. Pissara (P)**

- T. Peltoniemi, A-Clinic (FI) : "*AVEC Internet portal – 15 Finnish organizations helping people on drugs, alcohol, mental health, family and violence problems*"

## SATURDAY 5 April

WORKSHOPS  
ARE ONLY IN  
FRENCH AND  
ENGLISH



14.00 – 15.30

16.00 – 17.30

### PLENARY ROOM - F

#### **WORKSHOP 5 : Monitoring**

**Chair/facilitator : Ph. Bastin (B)**

- B. Hibell, CAN (SE) : "*FESAT Monitoring Project – Two years experience*"
- T. Evenepoel, Druglijn (B) : "*What role can a helpline play in drug news information exchange?*"

#### **WORKSHOP 8 : Function & limits of helpline services**

**Chair/facilitator : G. Gottwald – Nathaniel (A)**

- V. Baptista, Linha Vida Lisboa (P) : "*Function and limits of Helpline Services*"

## ROOM - M

### **WORKSHOP 2 : Media**

#### **Chair/facilitator : C. Roig (E)**

- H. D. Wychgel, Drugs Infolijn, (NL) :  
"Promotion and its impact on the number of callers"
- M. J. Roque, Linha Vida Porto (P) :  
"The training of journalists in drugs"

### **WORKSHOP 2 (continuation) : Media**

#### **Chair/facilitator : C. Roig (E)**

- A. Boucher, Infor-Drogues (B) :  
"Unexpected results from a press release"

## ROOM - L

### **WORKSHOP 3 : Evaluation**

#### **Chair/facilitator : B. Hibell (SE)**

- V. Kalabalikis, Ithaki Drug Helpline (GR) :  
"Data collection in collaboration with EMCDDA"
- V. Silva, Linha Vida Porto (P) :  
"The evaluation of drug helplines"

### **WORKSHOP 4 : Different topics for the same helpline**

#### **Chair/facilitator : C. Manduzio (I)**

- M. Cantin, Jeu : aide et référence (CA) :  
"Jeu : aide et référence - an essential Québec service"
- B. Cohen, Drogues, Alcool, Tabac Info Service (F) : "From illicit to licit drugs: evolution of a specialized service on drug use towards a public service open for all. The experience of D.a.t.i.s."

## ROOM - M

### **WORKSHOP 6 : Grey/Ad hoc helplines**

#### **Chair/facilitator : A. M. C. Kok (NL)**

- H.-V. Happel (D) : "Grey and Ad hoc Lines – Specialities, recent status, experiences"
- M. Ferrara, Infor-Drogues (B) : "Impact of the media's response to the Belgium government's new policy on cannabis on the public's demands"

### **WORKSHOP 9: Helplines in Eastern Europe**

#### **Chair/facilitator : H.V. Happel (G)**

- D. Rechnow (R), T. Jaakkola (FI) :  
"Russian speaking ethnic minorities in Baltic region – Helpline services and equal opportunity policy"
- S. Sekutkovska & Y. Tulevski (M) :  
"First steps in setting up drug helplines in Macedonia"

## ROOM - L

### **WORKSHOP 7 : Team training**

#### **Chair/facilitator : T. Jaakkola (FI)**

- V. Silva, Linha Vida Porto (P) :  
"The training of new drug helplines workers"



**A.Raffaella Rossin** - *Linea Verde Alcohol - ASL - Comune di Milano, Italy*

## The project «city network of helpline services in drug addiction» in the city of milan.

The project carried out between April 1999 to March 2002 in the city of Milan called "City network of helpline services in drug addiction" involved the three main help-lines of Milan: Linea Verde Droga, Linea verde Alcol and Sportello Alcol.

Those services have been working for several years in the Milan community to provide listening, information and support services on drug addiction problems to its citizens.

In these three years, they were able to have an important exchange about what network exists for helpline services, what does it mean, how it could be useful, and the different methodologies used in diffe-

rent services with different ways to work and different organizations.

In particular, we would like to pay attention to the following :

- The development of any help-lines of the project
- What the helpline network means in the City of Milan
- The role of the helplines with respect to drug addiction services in the city of Milan
- To offer some elements of evaluation.

**Clemente Suardi** - *Linea Verde Droga - Ceas Milano, Italy*

## Collaboration between the Green Line and the local services - experience of monitoring.

There is an experimental 'network' project for dependency helplines aimed at the city of Milan, with regional funds, starting in the year 2000.

The structure of the project anticipates an integration between the different regional services and a stable comparison with other services in the area.

Within this project, monitoring is a strategic instrument which is not limited to a straightforward collection of data in order to confirm good results from despatches sent out from the telephone calls, but rather an opportunity to think with the local services about the consequences that can be achieved.

From this point of view, it is important not simply to research the statistical counts, but it is necessary to seek to produce common evaluations which allow effectiveness indicators to be found for telephone services.

For example, it's about understanding how the work of telephone advice services facilitates access to (other) services. This is not only a supplement to the information available to callers, but above all allows the services to assume a real role. In this case, the role of the telephone service becomes essential in overcoming the resistance and the prejudices of the drug user or their parents, when it comes to working on the reasons for lack of success in the past and looking at feasible steps forward.

The responses which were gathered by the operators of the local services allow a comparison to be made which may prompt a reorganisation of how telephone services operate. To this end, the seminar is an opportunity to present and comment on the data, both from the practice of monitoring of despatches sent out from care and advice facilities, and the interviews which took place with operators of the local services.

**Björn Hibell** - *CAN, Sweden*

## FESAT Monitoring Project - Two years experience.

The presentation will give an overview of the results of the two years of the monitoring project as well as some comments about the work with the

project. It is also planned to present some results from the data collection at the beginning of 2003.

## A Quebec service 10 years later.

Since 1992, Drugs: help and referral has offered an information and referral service, free, bilingual, confidential and anonymous, providing information and referral to people of the Province of Québec (Canada) who have problems with substance abuse, their relatives and peers, and also to community workers. Open 24 hours a day and seven days a week, the service has completed its eleventh year of operation.

Nearly 300,000 people have made use of Drugs: help and referral - a service of the Information and Referral Centre of Greater Montreal - which offers, among other things, an attentive listening ear to people whose lives collide with substance abuse. Simply to allow them to express their problems and worries is in itself very supportive, because for them a door has finally opened. Whether people are direct or indirect victims, to benefit from a neutral and positive listening breaks the solitude, informs, reassures, and encourages one to take one more steps on the road to problem solving and to start finding solutions.

Hans-Volker Happel - Germany

## «Grey-», «Alternative-» and «Ad hoc»-Helplines ; - Specialities, recent status, experiences.

In 2002, FESAT organized an European-wide investigation of "ad hoc-", "alternative-" and "grey-" helplines by means of a questionnaire.

The aim of this pilot study was to identify measures, caller differences, "best practice" models, FAQs, organisational options and quality standards of such services. Twelve helplines from eight European countries participated.

The number is too small for an exhaustive quantitative analysis, so the report is more a description of the state of the art.

The effectiveness of such "ad hoc"- helplines depend on :

- promoting "culture" and strategies
- the reputation of the service
- the intended target group
- the event or situation
- the availability of the service
- the legal impact
- the messages to come across.

The presentation will outline the impacts of successful and failed examples and will discuss implications for future projects.

Tapio Jaakkola - Irti Huumeista ry., Finland

## «Guidelines for setting up a drug helpline».

The goal of the Guidelines project is to help professionals or volunteers in setting up a new drug helpline. We'll go through the main issues which should be under consideration when setting up a new helpline service. These guidelines will cover all main problem points and questions asked by someone establishing a helpline. The guidelines provide general recommendations based on practical experience of associated services all over Europe and may be used as a tool to check capacity and readiness of a new service for its daily operation.

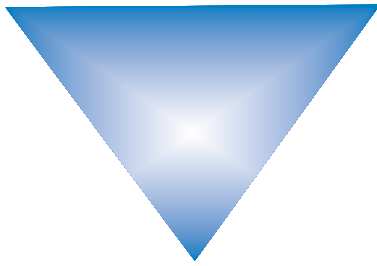
The following topics will be discussed within the Guidelines :

1. Purpose and abilities of helpline
2. Managing a helpline
3. Policy for data management
4. Training
5. Publicity

6. Funding
7. Information and communication technology
8. FAQ (Frequently asked questions)

For each of these themes, a set of general statements has been formulated. These statements are based on the FESAT charter and its principles and come from the daily practice of FESAT associated services. The statements allow us to identify the minimum standards which should be followed by any professional group that is going to start a helpline operation. In addition, for each topic, there are several key questions with answers or which provide the opportunity for further discussions.

"Guidelines for setting up a drug helpline" is a part of the FESAT project 2002 – 2004, is funded by the European Commission and will be published as a book during spring 2003 in English and French.



## WORKSHOP 1 – E-MAIL COUNSELLING

**Gabriele Gottwald-Nathaniel** - *Treffpunkt Drogenberatung API, Austria*

### Standards in e-mail counselling.

In recent years, the internet, because of its anonymous, easy and relatively low threshold approach, has turned out to be an attractive counselling tool in social work. Online offerings attract young people due to their speed, low cost and low- effort accessibility. Moreover, the internet is positively rated as a forward-looking medium which captures the spirit of the age.

ChEck iT! – a secondary prevention project in the field of recreational drugs – has offered e-mail counselling since 2000. In the course of establishing and specialising the occupational field of e-mail counselling, it has become increasingly necessary to set up protocols of professional action and to develop unified standards. Therefore the “Verein Wiener Sozialprojekte” (parent organization of ChEck iT!) prepared, in co-operation with the drug counselling

facility “Dialog”, a set of e-mail-counselling-guidelines. At a national meeting (supported by FESAT) with youth work and drug counselling professionals from Germany (Drogenhilfe Köln, a hotline for young people), it was decided to define unified standards and quality characteristics since the approaches of the single organisations complemented each other. The jointly developed e-mail-counselling handbook is considered a guideline for daily practice.

Within the scope of this workshop, DSA Gabriele Gottwald-Nathaniel, Mag.a Irene Ivan and DSA Susanne Weissenböck of ChEck iT! will introduce the crucial points of the handbook, in particular the classification of e-mail enquiries, the guidelines for online counselling and the issue of applicability of face to face practices for e-mail counselling.

**Arija Lodzina** - *Confidential Line of Riga Drug Prevention Centre, Latvia*

### Delivering services by e-mail on the Internet.

An analysis of work by a telephone helpline on drugs (confidential line) revealed that teenagers and young people are not reached effectively in this way. They prefer information on the internet. On this basis, a new approach was developed – delivery of services by e-mail.

Responses are prepared by drug helpline professionals. If necessary, other specialists are involved).

Such an approach ensures the quality of answers.

The Riga Drug Prevention Centre Home page [www.narcomania.lv](http://www.narcomania.lv) is visited an average of 79 times per day and receives 2 questions on e-mail.

An analysis of e-mail discussions will be presented



## @VEC Portail Internet ? 15 Finish organisations helping people on drugs, alcohol, mental health, family and violence problems.

Telematic methods provide new opportunities and more freedom, increase the use of one's own resources and are interactive. These characteristics are a great benefit when sensitive issues, such as mental health, addiction or relationship problems, are dealt with. These ideas are put to use in Finland in @vec, in the early-stage counselling and crisis portal [www.apua.info](http://www.apua.info), organised by 15 mental health, addiction work, children's welfare and public health organisations and projects. In @vec people are not obligated to diagnose themselves before they can seek help. It combines many services that are related to each other, so that clients can seek help even when they just have a vague, bad feeling.

For its members, @vec offers the opportunity to co-ordinate, co-operate and share tasks, speed up the development of their own web services, become

more known and find new clients. Together the organisations reach sufficient critical mass. Also the cost-benefit ratio is good.

The telematic resources of the members were very different and it took time to outline the project. Unrealistic expectations, internal competition or ideological conflicts could also have posed problems. The portal becoming too popular too soon could also be considered a risk.

@vec has the potential to become a hyper-portal for social and health care in Finland, if it can offer to the public a sufficiently easy way to access a sufficiently wide range of services. In addition to financial problems, the key question is whether it succeeds to broaden its themes and whether public social services will also be included in the project.

## WORKSHOP 2 - MEDIA

H.D. Wychgel - Drugs Infolijn, Netherlands

### Promotion and its impact on calls and callers.

The Trimbos Institute, the Netherlands Institute of Mental Health and Addiction combines research with implementation and prevention. One of the Institute's interesting projects is the national Dutch drug helpline "Drugs Infoline".

The Drugs Infoline gets between 30,000 and 35,000 phone calls each year. It's very important for a telephone helpline to be well known by the public.

We would like to show what the effects are on the calls and callers for :

- expensive campaigns
- free publicity
- targeting a special group.

The necessity for the Drugs Infoline to function in a broader network will be a key factor in this presentation.

Maria João Roque - Linha Vida SOS DROGAS Porto, Portugal

### The training of journalists on Drugs.

The drug theme and related issues are almost always addressed in the media without sufficient perspective, at least from the drug specialist's point of view. With its enormous importance and power in constructing of social representations, the media usually promotes stereotypes, presenting a reductionist view of different realities, not contextualizing properly the drug issues.

Therefore, we intend to think about the causes of this phenomenon and also about the ways we can try to fight it. What can we, drug field workers, offer as working proposals to journalists, in a way that brings our different positions closer together, respecting their objectives (information that will attract attention) and our own (drug use prevention).

**Antoine Boucher** - *Infor-Drogues, Belgium*

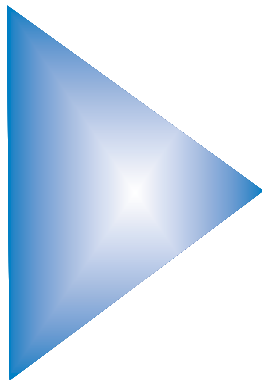
## Unexpected outcome of a press release.

In January 2001, the political context was that a new coalition government from which the French- and Dutch-speaking catholic groups were excluded for the first time since 1951. Also, the government were looking at a new 'drugs policy',

This new situation was especially commended by the ecology parties of the two communities who wanted to progress towards a decriminalisation of cannabis. Nevertheless, a split remained in government and the plan that was finally submitted increased the freedom of judgement accorded to the police considerably. For Infor-Drogues, this additional discretion was dangerous. The service decided to respond firmly by issuing a strongly-worded press release.

The health minister responsible for these proposals, rather than turning against Infor-Drogues, invited them to explain in detail what the public were asking about. The Government became involved with an attempt to answer these questions in a leaflet. Even better, the minister suggested that we post his proposals on our web site together with our own comments, even if they were in disagreement.

Since then, Infor-Drogue has continued apace in raising the problematical parts of the Government plan. Of course, that includes on the telephone in response to the population, but also in the press and at different political levels (which are numerous in Belgium!). In the end, more than two years hence, the plans for the law which are due to be voted on contain some steps forward compared with the previous version.



## WORKSHOP 3 - EVALUATION

**Victor Silva** - *Linha Vida SOS DROGAS Porto, Portugal*

### The evaluation of Drug Helplines.

In this workshop we will address the common difficulties that drug helplines encounter when trying to implement an evaluation program.

We will discuss the importance of having a well-defined aim for what the helpline service is providing so that the evaluation is properly and adequately performed.

Furthermore, we'll address the usual methodologies used in the evaluation of drug services, providing suggestions to overcome common difficulties, namely the difficulty of conducting follow-up studies after the service has been provided to callers.

We feel strongly that, in face of difficulties associated with the type of service we provide, both a qualitative and a quantitative methodology must be implemented. The overlaps of the information provided by these two methodologies will also be addressed.

We intend also to address issues regarding the evaluation of services provided, team quality, usefulness of information provided and listening abilities for different aims of a particular service. Questions regarding the target group of a drug helpline service (e.g. youth, users, etc), and the satisfaction of the callers about the service provided, will also be addressed.

# WORKSHOP 4 - DIFFERENT TOPICS FOR THE SAME HELPLINE

**Monique Cantin** - *Jeu : aide et référence, Québec*

## **Jeu : aide et référence - - an essential service in Quebec.**

«Jeu : aide et référence» is an telephone listening, information and referral service on gambling, open 24-7 for the whole of Quebec. Its staff help people to reflect on their gaming habits and refer compulsive gamblers and people close to them to sources of help.

In 1993, the referral centre of Greater Montreal agreed to take up a major challenge. First, to set up a 24-7 service on gambling which responds to

people who have a gambling problem and people close to them. Second, to ensure that such a service operates within strict financial limits. Third, to construct a database of the widest and most reliable range of data on helping services for people with gambling problems and those close to them. Fourth, to ensure that the service becomes known by gradual promotion as the resources are put in place. This was a real challenge, as this service was the first line of its type in Canada.

**Baptiste Cohen** - *Drogues Alcool Tabac Info Service, France*

## **From illicit to licit drugs - a broadening of objectives, audience and thinking.**

In June 2001, the French helpline DROGUES INFO SERVICE expanded its competencies to include alcohol and tobacco. It has been called from that point DROGUES ALCOOL TABAC INFO SERVICE.

This development corresponds with things that the service had always noticed : among the recurrent call themes and the substances mentioned in calls, licit drugs had always played an important part.

During the first 10 years of the service, although its objectives were centred around illicit drugs, alcohol and psychotropic medicines have always featured in the top four most-called-about substances (graphic).

The gulf between licit and illicit drugs is not only bridged for pleasure or because of dependence. Users of both types of drugs request help and information of the same type.

Statistics show a direct link between age and the licit or illicit nature of substances mentioned (graphic).

A second observation stresses that calls on tobacco have posed other types of problems.

People in the toxicology field, who are often users themselves, are not usually interested in tobacco use

Tobacco does not pose the same social and behavioural problems because it does not change behaviour

But smoking poses another question very strongly : does dependence have a stake in risk prevention linked to other drugs ?

A national service set up to facilitate dialogue with a 'rejected' section of the public (drug users) has therefore become a generalist service open to the whole of the population (graphic).

Enlarging the audience concerned also enlarges the way society sees drugs : drug use is not primarily caused by the physical effects of substances but the capacity of humans to become dependent on things that bring them pleasure and which relieve the tensions in their lives.

But if drugs, alcohol and tobacco call for this same need for information, at times, support and advice, it should be stressed that the help provided for users does not come from the same mechanisms or require the same competencies. Thus, if we look at tobacco, the experience of telephone services shows that specific helpline protocols can bring a real, measurable help to smokers who want to stop. Such 'compartmentalised' protocols have never been demonstrated for cessation of use of other drugs.

If we're looking for more evidence that smoking doesn't pose the same problems as other drugs, this shows that we haven't yet exploited the opportunities of social telephony. At the end of each line, there are people ready to discuss things in confidence and with respect and to give some attention to the other person for a while. That's not the least of the qualities of our telephone services.

## WORKSHOP 5 - MONITORING

**Björn Hibell** - CAN, Sweden

### FESAT Monitoring Project - Two years experience.

This is a complement to the plenary presentation. More comments will be given about the data collection as a base for a dialogue with helpline workers that

have answered the questionnaire. Comments are welcomed about how to improve the monitoring project in the future.

**Tom Evenepoel** - Druglijn, Belgium

### What role can a helpline play in drug news information exchange.

In 1997, the EMCDDA decided to create an Early Warning System (EWS), a mechanism aimed at rapid exchange of information on new synthetic drugs.

The Flemish EWS (Early Warning System) was set up in 1998. The Flemish sub-focal point decided to enlarge its system to include information on all new products (not only synthetic drugs) as well as new trends in drugs use.

De Druglijn functions more or less as the mailbox of the EWS and plays a crucial role in the communi-

cation and exchange of information throughout the network.

I will discuss the advantages the system has for us as a drug helpline and will address some essential requirements for making the system work and guaranteeing an optimal exchange.

Maybe our experience can be inspiring in setting up a FESAT news exchange system.

## WORKSHOP 6 - GREY/AD-HOC HELPLINES

**Maurizio Ferrara** - Infor-Drogues, Belgium

### Impact of the media's response to the Belgium government's new policy on cannabis on the public's demands.

The popularity of cannabis amongst young (and not so young) people remains an issue in Belgium and is subject to the constant interest of the general public, the media and the politicians in the drug.

Recently (May 2001), the federal government have distributed a booklet explaining the new government's new political project on drugs and principally around cannabis use which is non-problematic and which does not constitute a social nuisance. This leaflet referred callers to the permanent helpline of Infor-Drogues.

At the same time, the media have multiplied the number of articles, debates and reports that are produced on cannabis use. The media have given out the number of the permanent helpline of Infor-Drogues on several occasions. Some of the callers have perceived from these messages that they were calling an

alternative helpline where it wasn't about our usual number.

Since May 2001, we have observed a measurable increase in calls on cannabis and, above all, a diversification in those which can only be attributed to the impact of this (over)exposure.

On the question of the decriminalisation 'en passant' by therapeutic use of cannabis and of the success of urine tests among parents, we will try to analyse how a specialised telephone helpline can take advantage of opportunity to offer help in the context which is characterised by much confusion and misunderstanding. «Is cannabis legal?». «Does cannabis induce cancer?». «Is cannabis a pain-killer?». «I would like to stop smoking, can you help me?». «Where can I purchase urine tests?». «What represents problematic use?» etc.

# WORKSHOP 7 - TEAM TRAINING

**Victor Silva** - *Linha Vida SOS DROGAS Porto, Portugal*

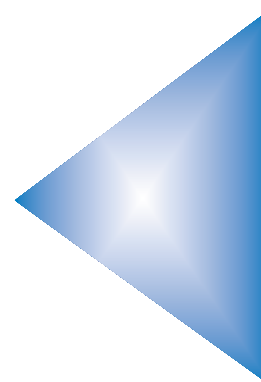
## The training of new drug helpline workers.

The field in which we work is a complex one. Telephone work is also complex. It addresses issues like communication without being face to face and the importance of hearing etc.

When introducing a new worker or establishing a new helpline, training is a fundamental issue.

In this workshop we will propose, in broad terms, ways to implement a training program for new drug helpline workers.

Issues to be addressed include, among others, communication, open and closed questions, active listening, information about drugs and how to inform without encouraging use, communicating with young people, legal issues, basic listening skills, telephone communication, burnout prevention, the way society views drugs, the constraints of fear of drug users, dealing with the media, crisis intervention by phone and so on.



# WORKSHOP 8 - FUNCTIONS & LIMITS OF HELPLINE SERVICES

**V. Batista** - *Linha Vida - Lisboa, Portugal*

## Functions and boundaries of helpline services.

Telephone helplines are an easy and affordable way for the ordinary citizen to get access to specific mental health care and information in different areas, such as suicide and drug addiction. Given the characteristics of this type of services, most of them assume a kind of intervention similar to the one proposed by Carl Rogers and his followers (counselling), complemented with information transmission and referral to other institutions. Helpline services can, this way, work as a means of providing support for people who would not otherwise have access to it. They can also be a way to mobilise the motivation of a user to look for psychotherapeutic support. However, recent helplines have gone further in this provision of support, and include the possibility of doing psychotherapy with their users.

This workshop has as its main goals the discussion of the telephone setting and its possibilities and limits concerning therapeutic (and not necessarily psychotherapeutic) intervention. A distinction is made between psychotherapy and therapeutic functions,

the latter of which can certainly be provided by a telephone service. Special cases, such as regular callers and abuse of the helpline are also discussed.

Objectives of the workshop :

- To discuss the main functions of a helpline service
- To characterise the telephone setting
- To evaluate the possibilities and limits of this kind of service
- To clarify the support that can be given by a helpline
- To verify the differences and similarities between a counselling service and psychotherapy
- To define strategies for dealing with special cases of telephone helplines;
- To reach a common ground, shared by the participants of the workshop, that can be used as a guideline for the limits and functions of helplines

**Dmitry Rechnov** - Drug Abuse Prevention Centre, Russia

**Tapio Jaakkola** - Irti Huumeista ry., Finland

## Russian speaking ethnic minorities in the Baltic region - Helpline services and equal opportunity policies.

The presentation describes the experience obtained through 3 years long practical work with Russian-speaking populations in the Baltic region. It became clear that there are some problems for Russian-speaking people to get help in their native language if they face drug-related problems. It is possible to identify three groups of countries.

1. The Baltic states. Formal Russian is not the official language of these countries, but people still speak Russian well. That is why people who speak Russian there can turn to any public service or NGO for counselling and help. It is important to realize that the Baltic states have unique experience in setting up and operating helplines in two languages.
2. Finland and Germany. For these countries, the drug-related problems of the Russian-speaking minority look quite serious. Despite a number of

positive changes that have been noticed there, NGOs and the public sector are still unable to eliminate the gap between the needs and the abilities of this group.

3. Sweden and Norway – officially there is no this kind of problems in these countries as the Russian-speaking population is small. But NGO professionals reported that they have started to come across situations where their clients are unable to get help because of language problems. The minority population is now increasing and there are some indications that there may be an explosion of the problem in the future.

At the same time, unique experience has been gained through cooperation and regional partnership. This experience may be a very productive basis for developing equal opportunity policies.

**Ivan Tulevski & Sekutkovska Slavica** - Drug Helpline, Macedonia

## First steps in setting up drug helplines in Macedonia.

Macedonian society, like other neighboring societies, has been confronted with adverse consequences of drug trafficking and drug use and abuse for over a decade. Drug-related medical and social phenomena need new commitments and new responses. Engagement of well trained and committed social workers in providing clear, understandable and direct drug-related information to the citizens of Macedonia in Macedonian and Albanian language is one among many new responses to the drug phenomenon in this country.

In line with national drug strategy and with targets established by the EU Action Plan to Combat Drugs

2000 – 2004, the Association of Social Workers of Skopje created a Project to establish a Drug Helpline in Macedonia. And the end of 2002, it applied for grant to the EU Phare Programme for Development of Social Care and Protection. The funder's response was positive and the project was granted with 44042 Euros for the first year of its operation.

It has been expected that FESAT will help development, activities and sustainability of the drug Helpline in Macedonia.

**For all questions and Conference registration contact**

**FESAT Permanent Office**  
**19 Rue du Marteau, 1000 Brussels, Belgium**  
**Tel: +32 2 219 28 87 - Fax: +32 2 219 14 98**  
**www.fesat.org**  
**E-mail : fesat@skynet.be**