



De Kiem

Therapeutic programme for drug users and their social environment

De Kiem provides differentiated support to people suffering from problems related to the use of illegal drugs as well as to their social environment.

The **residential part** of the programme includes an induction unit, a therapeutic community (T.C.), a mother-and-child unit and several re-entry Houses.

The **ambulatory part** of the programme includes two ambulatory centres, prison work, a regional prevention service and parent groups.

RESIDENTIAL

Who can call on us ?

Adolescents and adults (both men and women) up to approximately 40 years old who are addicted to alcohol, illegal drugs and/or medication can turn to the residential programme of De Kiem. This programme pays particular attention to women and to people from ethnic minorities.

Addicted mothers (and fathers) and their child(ren) (younger than six), as well as pregnant women and women who have recently had a baby, can turn to the Tipi. Only women or men who take part in the programme of the Therapeutic community will be admitted to the Tipi.

Parents and relatives of residential patients can turn to the family counselling service of De Kiem. We consider counselling and supporting family members as an important surplus value for the recovery of the client.

How to get in touch with us?

You can contact one of the ambulatory centres by letter or by phone. An intake procedure for the residential programme will then be started. You can also come and pay us a personal visit to make an appointment. Each application will be discussed upon within a multidisciplinary team after one or several introductory interviews have been conducted. This team will then, in close consultation with the client, decide whether the client will be admitted to the residential programme or will be referred to a more suitable programme if needed.

Addicted mothers (or fathers) and their child can visit the Tipi and talk to its residents.

Programme

De Kiem offers an intense residential programme in which the admitted “resident” will tackle his or her addiction as well as underlying problems. This programme focuses on the concept of self-help and on a pedagogical and therapeutic approach of the client. The continuous efforts to create a climate of safety, mutual respect and responsibility can lead to real change.

Induction Unit

The Induction Unit aims at “welcoming” everyone who wishes to take part in the residential programme in a mature and respectful way. The induction unit admits eight residents at the most at the same time. It is meant to be a safe and quiet environment in which the client can set specific and personal goals, thus preparing himself for his stay in the therapeutic community (T.C.). All residents have the opportunity to work in the T.C. This enables them to enter the programme with realistic and feasible expectations.

The induction programme takes from four up to eight weeks, but will take less time for Tipi-mothers or for patients who have followed a crisis programme in the past. The moment of admission of the child will be determined upon separately for each individual case. The mother will be given sufficient time to get acquainted with the other residents, to fix up the child’s room, to look for a school or for a day care centre...

If a client does not wish to follow a long-term programme after all, or if another centre proves to be better suited, he or she will be re-orientated and referred.

Therapeutic community (T.C.)

The therapeutic community can admit some 20 to 25 residents. There is a continuous interaction between the community living and the therapeutic moments. Each resident is gradually confronted with his or her own behaviour, feelings, and thoughts and with his or her potential and restrictions. They gradually learn new skills, adopt new attitudes and develop a positive self-image with the support of their fellow-residents. Each individual resident sets his or her own points of action, thus developing a unique and individual programme focused on reintegration in society.

Tipi

The Tipi is a separate dwelling near the T.C., meant for pregnant women and addicted mothers and their children up to six years old. Single fathers and their young children can be admitted too. In the Tipi, these women (or men) can combine the care for themselves (their drug-related problems) with the care for their child(ren). During the day they follow the programme in the therapeutic community and in the evening, on Wednesday afternoons, and during the weekend, they take care of their child(ren) themselves. The programme in the Tipi consists of weekly group conversations with fellow-residents (amongst others on education and parenthood), information sessions, an individual follow-up and plan of action and a medical and educational follow-up of the children, and the like.

Re-entry

After completing the programmes of the induction unit and the T.C., the resident moves on to re-entry. This is the third important mainstay of the programme. Several residents share this re-entry house for some six months during which they gradually rebuild their own lives. Ample attention is paid to reintegration in society by means of an individual counselling programme and group conversations.

After their stay in the Tipi, mothers are supported here, or in their own residence, as to the independent care for their children, combined with work and education. They can still turn to the Tipi groups or ask for individual consultation should they need parenting support.

Ambulatory Re-entry support

After his or her stay in re-entry, the resident moves on to live on his own: alone, with his or her partner, or with his or her family. However, the guidance continues for another six months and the resident gets the chance to discuss problems related to independent living with fellow residents and counsellors.

Family guidance

Relatives, partners and other key figures will, in close consultation with the resident, be involved in the programme from the very beginning onwards. This will take place by means of visits, supervised conversations and parent meetings.

Grandparents and partners will have the opportunity to visit their (grand)child on a regular basis in the Tipi. In certain cases, and in consultation with the mother or father, they can temporarily take over the care of the child.

AMBULATORY

De Kiem provides in an ambulatory centre in Gent and in Ronse (with an antenna in Geraardsbergen), a regional drug prevention service and prison work in several Flemish prisons.

Who can call on us ?

People suffering from drug addiction problems (alcohol, prescription drugs and illegal substances) not (yet) requiring residential treatment can turn to the Ambulatory Centres of De Kiem. The Ambulatory Centre in Ghent pays particular attention to people who have had judicial problems in the past and targets people who ask for continued outpatient treatment after the early ending of a treatment.

Parents and family members of clients can call on the ambulatory centres for individual support (with or without their child) en can join if wanted an ambulatory parent support group.

How to get in touch with us?

You can contact the ambulatory centres by letter or by phone or pay us a personal visit to make an appointment. Each application will be discussed upon within a multidisciplinary team after one or several introductory interviews have been conducted. This team will then, in close consultation with the client, decide whether the client will be admitted to start the ambulatory counselling or will be referred to a more suitable programme.

Programme

Ambulatory counselling

Abstinence is no condition for a client to be allowed to take part in a counselling programme in the ambulatory centres of De Kiem. The main goal of this programme is to help the clients stop taking drugs or control their drug use and to avoid relapse, thereby paying sufficient attention to the request for help of the client and his social environment. The drug user is supported and guided as to the psychosocial, administrative and judicial aspects of his life. Ample attention is also paid to the social situation (employment, accommodation, time management...) and to the relational context (parents, partner...). Clear arrangements are made with each client as to the goals, the period, and the frequency of counselling.

One can turn to the ambulatory centre of Ronse (and Geraardsbergen) for substitution treatment under medical supervision. In the ambulatory centre of Ghent we cooperate with specialised programmes in this matter. Family therapy and psychotherapy are also dealt with in close cooperation with specialised centres. De Kiem is part of the *Zorgcircuit Middelenmisbruik van Oost-Vlaanderen* (Umbrella Organisation for Substance Abuse Treatment of East-Flanders) and closely cooperates with other institutions.

Prison work

De Kiem is involved in the organisation of orientation interviews, individual counselling and group conversations for drug users in Flemish prisons. Prison work aims at raising the prisoner's awareness of the problems linked with drug addiction and at introducing them to drug relief work in a positive way.

Prevention

Within the police district "Rhode en Schelde", De Kiem cooperates with the C.A.T. (*Centre for Study, Treatment and Prevention of Alcoholism and other Toxicomanias*) to supervise the daily functioning of a service for drug use prevention and early intervention for the inhabitants of Oosterzele, Melle, Merelbeke and Destelbergen. (Spiegel 13, 9860 B-Oosterzele, 0473/65.65.94)

As to prevention, the residential programme of De Kiem mainly focuses on theatre to address adolescents and their social environment.

Professionals who work with drug users can also appeal to De Kiem to organise training sessions.

MISCELLANEOUS

Cost price

De Kiem has entered into a convention with the R.I.Z.I.V. (*Federal Institute for Health and Disability Insurance*). This means that the main costs of the participation in the residential programme and in the ambulatory centre of Ronse (and Geraardsbergen) are met by the health insurance. The resident only pays the non-refundable part of medical expenses. The accommodation expenses of the child in the Tipi are entirely borne by the mother's health insurance.

Information

De Kiem has its own website and publishes a quarterly magazine for people who wish to be kept up-to-date on the functioning and the evolution of the therapeutic programme.

www.dekiem.be



Ghent



Ronse



Gavere

HOW TO REACH US

Intake team & Ambulatory Centres

(every working day, from 8h30 till 17h00)

Ambulatory Centre Ghent

Kortrijksesteenweg 185, 9000 Ghent
tel. 09/245.38.98 – fax 09/245.41.71
e-mail: ambulant.gent@dekiem.be

The Kortrijksesteenweg is located near the railway station of Ghent, at a five minutes' walk. Trams 1, 10, 11 and 12 will take you there too. Get off at the second stop, direction Korenmarkt.

Ambulatory Centre Ronse

Oswald Ponettestraat 31
9600 Ronse
Tel. 055/21.87.00
ambulant.ronse@dekiem.be

Antenna Geraardsbergen

Abdijstraat 2
9500 Geraardsbergen
Tel. 055/21.87.00
ambulant.geraardsbergen@dekiem.be

The ambulatory centres of Ronse and Geraardsbergen are both within walking distance (10 minutes) of the railway station.

Administration & Management De Kiem Induction Unit, Therapeutic community, Tipi & Re-entry

Vluchtenboerstraat 7A, 9890 Gavere
tel. 09/389.66.66 – fax 09/384.83.07
e-mail: admin@dekiem.be

Gavere can be reached

By car:

- Coming from Antwerp, Ghent, Brussels, Ostend: follow the E17 in the direction of Kortrijk near Ghent. Leave the E17 at exit 8, De Pinte, and take the N60, in the direction of Oudenaarde. Take a left turn in the direction of Gavere at the second traffic lights. This is the N439. Drive through the Stationsstraat, pass the railway crossing and the Schelde bridge and enter the town centre. At your left you will see the church (Molenstraat). Take the fourth street on your left (Delhaize). Take the first street on your right in the Vluchtenboerstraat. You have now reached your destination.

- Coming from Kortrijk: follow the E17 in the direction of Ghent and leave the motorway at exit 7, Deinze / Gavere, direction Gavere. This is the N35. Keep on following this road. You will cross the N60. Continue on the N439. Drive through the Stationsstraat, pass the railway crossing and the Schelde bridge and enter the town centre. At your left you will see the church (Molenstraat). Take the fourth street on your left (Delhaize). Take the first street on your right in the Vluchtenboerstraat. You have now reached your destination.

By train:

The train leaves Oudenaarde (in the direction of Ghent) at 31 minutes past the hour and arrives in Gavere-Asper at 43 minutes past the hour.

The train leaves Ghent (in the direction of Oudenaarde) at 00 minutes past the hour and arrives in Gavere-Asper at 17 minutes past the hour.

Give us a call upon arrival and we will come and pick you up at the railway station.

You can support our programme financially. Donations of € 30.00 and more are tax-deductible.