The decentralisation and transformation of the Dutch youth care system

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Introduction
In the years to come the Dutch youth care system will be decentralised and transformed. From 2015 on the municipalities will be responsible for all youth care services. The new youth care system should be more efficient, coherent and cost-effective. A focus on prevention, youth’s and parents’ own capacities, support at an earlier stage, care made to measure and a better cooperation between professionals must decrease the use of the specialised services. This factsheet describes the Dutch government’s plans up to June 2012.

Current situation
In The Netherlands the Ministry of Health, Welfare and Sport is responsible for overall youth policy and most specialised services for families and children. The Ministry of Security and Justice is responsible for juvenile justice policy and related institutions. The 15 provincial authorities/large urban areas and 415 local authorities also have responsibilities regarding youth policy and related services. They carry out their tasks with a great degree of autonomy.

The Dutch youth care system consists of:
- Universal services;
- Preventive services;
- Specialised services.
Different layers of the Dutch government are responsible for coordinating these services.

Universal services
The 415 Dutch municipalities are responsible for universal and preventive youth policy. Universal services are for example youth work, child care and regular schools. These services aim to facilitate the normal development of children and to prevent small problems of children and families turning into severe problems. These universal services are funded by a variety of agencies. Municipalities aim to strengthen these universal services in order to enable professionals to adequately solve small problems in children’s upbringing and to detect more severe problems. Municipalities in The Netherlands also aim to stimulate the cooperation between the different universal services.

Preventive services
The municipalities are also responsible for preventive youth policy. Preventive services (or primary youth care services) are for example child health care, general social work, parenting support and the Youth and Family Centres. These preventive services aim to detect problems at an early stage, to
intervene at an early stage, to coordinate support and to refer children and families to the provincial youth care services.

The preventive services also take care of staff training of professionals in the general services and they implement preventive programmes in these services. The preventive services are funded by a variety of agencies, but the municipalities are responsible for facilitating a suitable offer of preventive services and coordinating the cooperation between these services in the Youth and Family Centres.

**Specialised services**

Both the regional and national government are responsible for the specialised services for youth and families. Specialised services are for example the provincial youth care services, youth mental health care services and child protection services.

In The Netherlands, 12 provinces and 3 large urban areas are responsible for the so-called Youth Care Agencies and the youth care services. The provincial Youth Care Agencies are access points for the provincial youth care services. These independent agencies assess the needs and the situation of children and families with serious development and/or parenting problems and refer them to these services. The provincial Youth Care Agencies are also responsible for the coordination of care, youth protection and youth probation. In contrast, the provincial youth care services provide specialised care, coordination of care and aftercare. Their services include intensive ambulatory support and specialised pedagogical support at home for multi-problem families, semi-residential care, residential care, foster care and secure care.

The so-called Care and Advice Teams build a bridge between the preventive youth care, the youth care and primary, secondary or tertiary education. These teams consist of professionals from the Youth and Family Centres (mainly the child health care) and Youth Care Agencies, education professionals, social workers, police and truancy officers. These teams aim to support schools in detecting and dealing with problems of pupils at risk at an early stage. So-called Care and Advice Teams also support schools in referring pupils at risk and providing coordinated, more specialised care.

In The Netherlands the national government is responsible for the specialised education services, care for youth with mental disabilities and juvenile justice institutions. Health insurance companies are responsible for youth mental health care. Children and families can be admitted to these services in different ways, depending on the type of care. The main route of entry is via the Youth Care Agencies, but for instance general practitioners also play an important role.

**Child protection**

The Advice and Reporting Centre on Child Abuse is also part of the Youth Care Agency. Professionals and citizens can ask the agency for advice when they suspect a child to be abused or neglected. They can also report suspicions of child abuse to this agency. However, there is no legal obligation for professionals to report child abuse. The Advice and Reporting Centre on Child Abuse investigates the reported suspicions and in case of child abuse or neglect it tries to find appropriate solutions in cooperation with the children and parents. The agency hands over serious cases and cases in which parents do not want to cooperate to the Child Care and Protection Board.
The Ministry for Security and Justice is responsible for the Child Care and Protection Board. The board’s main tasks are to provide protection, to advise the court about child custody and other matters following parental divorce and to oversee the course of criminal proceedings involving minors. Upon receiving a referral, the board will determine whether the child’s development is indeed at risk, and if so, to what extent. The board will then advise the juvenile courts that can impose a child protection order on the parents, impose a supervision order or overrule the standard parental authority. A supervision order means that parents’ authority is restricted and partly taken over by an official guardian. When parental authority is removed outright, a guardian is appointed.

The Support Centre for Domestic Violence is a centre where professionals, victims, perpetrators or other people involved in domestic violence can seek advice about how to stop domestic violence. This centre is a kind of front office for the local and/or regional authorities that work together. 35 large municipalities are responsible for these Support Centres for Domestic Violence.

**Relevant legislation**
In the Netherlands there is no encompassing law for issues on children and young people. However, two laws are very important.

The Youth Care Act (2005) is the legal framework of youth care services for youth at risk and their families. It aims:
- to ensure that high-quality care is available to young people and their parents;
- to strengthen the position of young people and their parents.

According to this law, children that received an admission to care from a Youth Care Agency can claim their right to actually receive youth care.

The Social Support Act (2007) holds municipalities responsible for setting up social support. The aim is participation of all citizens in all facets of society, if necessary with help from friends, family or acquaintances. The local authorities have a high degree of freedom regarding the implementation of the law’s nine so-called ‘performance areas’. Regarding preventive development for children and parenting support for parents all municipalities must:
- offer information and advice;
- identify possible problems;
- give guidance to help;
- offer pedagogical help;
- coordinate care.

**Problems regarding the current youth care system**
The current youth care system in The Netherlands faces many problems:

1. *Imbalance in focus.*

There is an imbalance between attention to normal development and development at risk. The specialised services receive more funding in proportion to the universal and preventive services.

2. *Fragmentation.*

The youth care system lacks transparency because of the many different services, statutory bases, responsible and funding authorities, professional associations and sector organisations. Implementing innovations is often difficult.
3. The prevailing practice of referring clients.
As there are many different specialised services, often one organisation can not meet all needs of children and adolescents and their families cannot be helped by one organisation. Therefore they are referred to different organisations. The admission procedures of these organisations are also complicated and take much time which prevents children and families from quickly receiving the care they need.

4. Increased use of care.
The demand of specialised care augments by approximately 10% every year. According to epidemiologists this rise cannot be explained by an increase in problems. It seems to be caused both by an improvement in detecting problems and the earlier mentioned imbalance between services, the fragmentation of the youth care system and the domination of referrals.

5. Unmanageability.
When one type of services receives funding the demand of other types of services increases. For example, restricting the use of youth mental health care by its financier may lead to a larger demand on provincial youth care.

Desired situation
According to the Dutch government the Dutch youth care system should be more coherent, more transparent, more efficiently and less expensive. The pressure on the specialised services should be reduced. Therefore the Dutch government will revise the system. This factsheet describes the government’s plans so far. It is important to realise that these plans are not yet final and thus possibly subject to change.

Decentralisation
The Dutch government plans a decentralisation of all administrative and financial responsibilities related to youth policy from the national and regional government to the local government. This means that municipalities will become responsible for a wide range of services for children and families, ranging from universal and preventive services to the earlier mentioned specialised (both voluntary and compulsory) care. This is expected to enable municipalities to develop integrated policies and to offer care made to measure and support, geared to local and individual situations and needs. This decentralisation should also lead to a cost reduction.

Within the new youth care system it is the local government’s duty to help a child, within the range of its possibilities, in such a way that it can grow up safely and healthy. The municipal Youth and Family Centres will act as front offices for the municipal youth care services. Municipalities should provide a place (also out of office hours) where youth, parents and professionals can ask their questions and share their concerns about the upbringing, development and safety of a child.

At least one year prior to the actual transfer of all youth care services to the municipalities the municipalities must have agreed about how to cooperate at the regional level, for instance when it comes to so-called Advice and Reporting Centre on Child Abuse and the Support Centre for Domestic Violence. These separate agencies will be merged into one agency with regional annexes. Professionals will be enabled to report directly to the Child Care and Protection Board when very urgent action is needed.
To guarantee the quality of the youth care additional quality measures will be taken. For example:

- Municipalities will have the duty to describe the youth care’s quality criteria.
- Monitoring services will be both the national and local government’s responsibility.
- Professionals in the youth care sector must hold a professional certification.

The national government will introduce a single funding system for all youth care. The municipalities will receive means for providing youth care services according to a cost-allocation key. The Dutch parliament has approved of these outlines of the decentralisation plans.

**Stakeholders’ advice**

In the last few years, many stakeholders in The Netherlands expressed their views on the ideal youth care system. Several stakeholders plead for a transformation of the youth care system, not just a decentralisation. In 2010 the Netherlands Youth Institute published a report in which it pleaded for more attention to the quality of children’s and adolescent’s daily environments. Among other things youth policy should focus on civil society building, strengthening universal services and providing parents with information so that they are able to support their children in their normal development.

The Council for Social Development (in Dutch: Raad voor de Maatschappelijke Ontwikkeling) seems to agree with this vision. It published a report in April 2012 in which it advocated normalising parenting problems, empowering families, activating families’ social network, continuously investing in a strong social pedagogical environment and increasingly relying on professionals in the universal and preventive services. The council also pleaded for strengthening frontline services for children and families that support families in organising their daily lives.

In addition the Netherlands Youth Institute stated in its report that the youth care system should be interconnected and aim to strengthen parents by providing parenting support and other preventive services instead of taking over parenting responsibilities. The Netherlands Youth Institute believes in a so-called stepped care model: ‘mild care whenever possible, severe care when necessary’. Intensive types of interventions should only be used if necessary. But if used they should be mainly outreaching and strengthening families’ problem solving capabilities. The original social context should remain intact as much as possible.

**Transformation**

In April 2012 the State Secretary of Health, Welfare and Sport and the State Secretary of Security and Justice sent a letter to the Dutch parliament about the decentralisation’s state of affairs. They stated that the vision on youth care should be changed. In the youth care system there should be more attention for the normal development instead of the problematic development of children. The government intends to adopt the recommendations of the Dutch Council for Social Development whilst supporting municipalities in making the necessary changes during the decentralisation process.

The state secretaries put forward that youth policy should pay more attention to prevention, early support, youth’s and parents’ own capacities, a better cooperation between professionals that work with the same families and care made to measure. Professionals should get the leeway they need in order to adequately support children and their families.
They should work according to the ‘one family, one plan and one director’ principle, which means that every family should only have one assistance plan for all kinds of support related to the upbringing of children. One professional should coordinate the care provided. The system should stimulate prescribing less medication to children with (signs of) development disorders. Therefore the national government intends to examine, together with stakeholders, how the increasing use of medication by youth may be decreased.

Municipalities should strengthen the pedagogical climate in families, areas, neighbourhoods and child care. The Youth and Family Centres should stimulate the health and welfare of children in general and optimise the upbringing of children within the family. The professionals in these centres should be able to quickly call in specialised care. Youth care services should closely work together with services in education.

**Legislation**

The current Youth Care Act (2005) will be revised to provide one legal framework for all child and youth related issues. Parliament prepares this new Act on Care for Children and Young People and it should come into effect in 2015. It should contain all tasks and means of the municipalities regarding the youth care system. It also should provide clarity about the national and local government’s responsibilities regarding the quality of youth care.

**Related changes**

The transition in the youth care system does not stand alone, but is connected to policy, budget cuts and decentralisation measures in the fields of long term care, employment and education.

**Timeline**

The whole decentralisation and transformation process should be finished by 1st January 2015. A national Transition Agency supports municipalities, care providers and client organisations during the transition process. This agency consists of representatives of both ministries involved and the Society of Dutch Municipalities. A Transition Committee monitors the transition process.

The table below shows the time schedule of the development of the new Act on Care for Children and Young People.

<table>
<thead>
<tr>
<th>Time</th>
<th>Stage</th>
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<tbody>
<tr>
<td>Till summer 2012</td>
<td>• The government designs the new Act on Care for Children and Young People.</td>
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<tr>
<td></td>
<td>• The government consults stakeholders.</td>
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<tr>
<td>Autumn 2012</td>
<td>• The Council of State advises the government about the new act.</td>
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<tr>
<td>2013</td>
<td>• Parliament and the Senate discuss the bill.</td>
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<tr>
<td>2014</td>
<td>• The government publishes the new act in the Government Gazette.</td>
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<tr>
<td>2015</td>
<td>• The new Act on Care for Children and Young People comes into effect.</td>
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The ministries involved report to the Dutch parliament about the decentralisation’s state of affairs twice a year.
Bibliography


