



FEANTSA

## The Netherlands

### FEANTSA Country Fiche<sup>1</sup>

<p><b>Key Statistics</b></p>	<p>In 2012 the homeless shelters that are members of <i>Federatie Opvang</i> (The Dutch Federation of Shelters) reported having assisted 57,763 people. This was an increase of 4.5% from 2011. The women's shelters assisted 11,875 women and children in 2012, a slight decrease from 2011 when they received 12,025 women and children. These numbers cover all categories of the ETHOS definition of homelessness.</p> <p>In 2013, the national statistics office (CBS)<sup>2</sup> estimated that there were approximately 27,000 homeless people aged between 18 and 65 in the Netherlands. This estimate was based on three registers of homeless people and covered:</p> <ul style="list-style-type: none"> <li>○ People sleeping rough (ETHOS 1.1)</li> <li>○ People staying in homeless shelters (ETHOS 1.2)</li> <li>○ People staying in short-term accommodation (ETHOS 3)</li> <li>○ People staying with friends, acquaintances or relatives on an irregular basis (ETHOS 8.1)</li> </ul> <p>Almost half of this population was concentrated in the major cities of Amsterdam, Rotterdam, The Hague and Utrecht (known as the G4). However, questions have been raised concerning the source of these numbers from the National Statistics Office. In 2014, <i>Federatie Opvang</i>, municipalities and CBS will discuss how to improve the validity of the numbers.</p>
<p><b>Increase/Decrease in Number of Homeless People</b></p>	<p>There has been a rapid and sustained reduction in rough sleeping since 2006 when the national strategy began. A fall from 290 to 250 people sleeping rough on an average winter night was recorded between 2010 and 2011 in the G4 cities. In Amsterdam, the number of rough sleepers fell from 160 on an average night in 2006 to 80 in 2009.</p> <p>There has also been a shift from the use of night shelters to the use of housing with support. <i>Federatie Opvang</i> reports that the percentage of social relief service users that stayed in night shelters decreased from 24% to 16% between 2008 and 2010. Over the same period, there was an increase in the number of service users of supported housing or residential care arrangements (an increase from 40% to 47% of the total number of service users). Overall, <i>Federatie Opvang</i> reports that over 12,000 people in the G4 have been housed through the homelessness strategy, along with thousands of people in the other 39 cities.</p>
<p><b>Change in Profile of Homeless People</b></p>	<p>Youth homelessness is increasing. There were 9,000 homeless people under the age of 23 in 2010. This represents an increase of 50% compared to 2007 when there were 6,000 young homeless people. The increase may be over-estimated as the most recent count was based on a new definition of youth homelessness. However, the trend is borne out by other sources of information. <i>Federatie Opvang</i> reports an increasing number of people between 18 and 23 years of age staying in shelters for homeless people and victims of domestic violence. The total number of service users in this age bracket was 7,421 in 2010 and increased to 7,846 in</p>

<sup>1</sup> Last updated Spring 2014

<sup>2</sup> <http://www.cbs.nl/nl-NL/menu/themas/bevolking/publicaties/artikelen/archief/2013/2013-4026-wm.htm>

	<p>2012. Young people are ineligible for a number of social benefits, making them more vulnerable to homelessness. Furthermore, State care systems discharge young people at 18 with inadequate aftercare in terms of securing housing, income and health insurance.</p> <p>Homelessness amongst women has been stabilising between 2010 and 2012 from 16,482 to in 2010 to 16,275 in 2012. In its 2010 report on the implementation of the national strategy, the Trimbos Institute identified a growing number of women and young people in homeless services. For young people this is still true in 2014. Especially young people with learning disabilities are more often becoming homeless.</p> <p>Homeless immigrants are gradually becoming a more significant part of the homeless population. In its 2010 report on the implementation of the national strategy, the Trimbos institute reported an increase in the number of European citizens from Central and Eastern Member States using social relief services. Although the proportion of service users from Central and Eastern Europe remains quite small, it has risen slightly in recent years. In 2009, it rose from 0.5 to 1.7% of clients in social care. There are no signs that this number has risen further. A number of municipalities have introduced specific policies for housing migrant workers and for sheltering homeless migrant workers.</p>
<p><b>National Strategy</b></p>	<p><b>National Strategy</b>  <i>Strategic Plan for Social Relief: 2006-2010 and 2011- 2014</i></p> <p><b>Scope</b>  Initial focus on 4 major cities (G4) then expanded to 43 municipalities and their regions. The first phase lasted from 2006-2010 and the second phase covers 2011-2014. In 2014, a new phase will be prepared due to the decentralisation of the long-term mental health care facilities to the 43 municipalities responsible for prevention of homelessness. This means that the 43 municipalities will become responsible for around 40,000 psychiatric patients living in supported housing facilities. There will be a new focus for the regional strategies to promote stable living and support conditions for this group and to prevent homelessness.</p> <p><b>Objectives</b></p> <ol style="list-style-type: none"> <li>1. To ensure that all homeless persons have incomes, accommodation suited to their needs, a non-optional care programme and feasible forms of work;</li> <li>2. To end homelessness following release from prison;</li> <li>3. To end homelessness as a result of leaving care institutions;</li> <li>4. To reduce anti-social behavior associated with homelessness;</li> <li>5. To reduce evictions (to less than 30% of the 2005 figure in the G4 cities in the first phase of the strategy).</li> </ol> <p>Phased, quantifiable targets relating to each of these were established by the strategy. Targets are also set at local level.</p> <p><b>Resources</b>  The budget for local strategies consists of a special allowance for the 43 cities. In 2014, this annual budget was €297,528,000. The budget is divided among the 43 municipalities according to an allocation formula. In 2011, 35 municipalities received an additional €107,959,001 for the implementation of policies and services relating to domestic violence. In addition to central government funding, there is €350,000,000 available through the health insurance system for homeless people with psychiatric or somatic illnesses or learning disabilities. Another €135,000,000 is available from the justice system, from donations and from contributions from service users (service users pay a certain contribution from their social security allowance towards room and board). The total annual budget amounts to more than €700,000,000. Due to the decentralisation of the long-term mental health care budget, not only will the target group increase, the budget will also increase by around €1 billion.</p>

	<p><b>Governance</b></p> <p>The strategy is coordinated by the Ministry of Health, Welfare and Sports (VWS) and the National Association of Local Authorities (VNG). VWS has overall responsibility for the development and monitoring of the policy. The municipalities are responsible for developing and implementing local policies in line with the national framework. Each municipality has to produce a strategy known as a “City Compass” or “Strategic Relief Plan”. All municipalities fix measurable aims in their plans in line with the local context.</p> <p>The ministry of VWS is responsible of monitoring the progress. A monitoring report is carried out by the Trimbos Research Institute. In 2014, this institute will conduct an overall evaluation of the strategy since 2006. The minister of VWS reports on the strategy to the parliament at least once a year. Regular consultation takes place between <i>Federatie Opvang</i>, local authorities, health insurance companies and others. The ministry of VWS gives a subsidy to the VNG so that they can support the municipalities in developing policies on homelessness. The VNG facilitates a platform of civil servants which meets and discusses five times a year about the progress and the obstacles which they experience in developing and implementing homeless policies.</p>
<p><b>Targeted Prevention</b></p>	<p>Eviction prevention is one of the elements that local strategies have to address. In most cities, agreements have been made by city administration, housing corporations, service providers and debt assistance agencies to prevent evictions. For example, in Amsterdam, ‘Early Reach Out’ services have been introduced. Eleven housing corporations agreed to inform service providers about possible evictions. Landlords report households with two months’ rent arrears to the service providers. In response, a home visit is conducted by a social worker, in cooperation with a financial worker, to explore the social and financial situation and offer assistance, including debt regulation and support with money management. The city has thus been able to achieve the objective of reducing evictions to 70% of their 2005 level in the period 2005-06. Nationally, there has been a significant reduction in the number of evictions by housing corporations resulting from rent arrears. Evictions fell from 8,500 in 2007 to 5,022 in 2009, to 4,616 in 2010. Due to the economic crisis, the number of evictions has been increasing since 2011: from 6,000 in 2011 and 6,480 in 2012 to 6,980 in 2013. These are the eviction numbers from the housing corporations so they do not include evictions from private rental accommodation.</p> <p>Reducing the number of people who become homeless after detention or upon release from a care institution are key objectives of the strategy. There is a protocol for people in detention which has been introduced into local strategies. Social workers are active in every prison to make sure that persons leaving detention have ID, health insurance, housing, income from social benefits or work. Data regarding progress in relation to the number of people becoming homeless after leaving prison or care institutions is not yet available due to inadequate data collection.</p>
<p><b>Housing-Led Approaches</b></p>	<p>Housing First approaches have been increasingly adopted by several regions and cities in the Netherlands over the past five years. One example is the DISCUS Housing First project in Amsterdam. A full-scale evaluation of the Dutch HF project was published in April 2014.<sup>3</sup> There are 17 HF projects running at this time.</p> <p>Overall, the strategy has engendered a shift in focus from temporary shelter and temporary care to permanent housing and care solutions in line with an individual’s needs. A core part of the strategy is the provision of long-term accommodation for people suffering from long-term drug addiction and serious psychiatric illness. The aim is to provide care and treatment within</p>

<sup>3</sup> <http://www.impuls-onderzoekscentrum.nl/Rapport+Housing+first%3A+principes+en+praktijken>

	a facility for long-term accommodation, where the emphasis is on improving quality of life. The focus on prevention is another facet of the housing-led approach.	
<b>Quality of Homeless Services</b>	All accommodation provided (except for night shelters) is in single bedrooms. Almost 90% of the member organisations of <i>Federatie Opvang</i> have a quality certification, which is required by the health authorities.	
<b>Remarks on Research</b>	The strategy is evidence-based. An interdepartmental study, conducted in 2003 by representatives of five ministries in cooperation with NGOs, civil servant and legal experts, analysed the structural causes of the lack of progress on tackling homelessness. This is what led to the development of the national strategy. Moreover, a budget of €1.9 million has been allocated to a national research program on shelters for the period 2009-13. A series of studies has been produced, including the annual monitoring framework and a cost-benefit analysis of local strategies. More and more, regional reports are being commissioned by the municipalities. This is also done to be able to report to the city council on the results of the strategy.	
<b>Remarks on Budget Evolution</b>	<p>Budgets allocated to homelessness have increased steadily over the last five to ten years. This is partly due to the availability of finance coming from the health care system. Before 2003, it was very difficult for homeless people to receive care financed by the Exceptional Medical Expenses Act (AWBZ). This system changed in 2003 when an independent health screening institution was introduced. Homeless service providers were then able, under certain conditions, to qualify as long term care providers. This change of the law meant that long term care became for the first time accessible for homeless people.</p> <p>Between 2000 and 2008, the annual allowance given by the government to the 43 municipalities in order for them to fund homelessness strategies increased from €140 million to €257 million. Since then, there has been a further increase to €307 million euro in 2011. In 2014 there has been a slight decrease to €297,528,000. The budget from the Exceptional Medical Expenses Act increased from €26 million in 2003 to €350 million in 2013.</p> <p>The overall budget for homelessness in 2014 can be broken down as follows:</p> <ul style="list-style-type: none"> <li>○ Annual funding from central government to municipalities to implement the strategy: €297,228,000 (divided between the 43 municipalities according to an objective allocation formula)</li> <li>○ Annual funding for the implementation of policies against domestic violence and the running of women's shelters in 35 municipalities: €107,959,001</li> <li>○ Funding through the health insurance system for homeless people with psychiatric or somatic illnesses or learning disabilities: €350 million</li> <li>○ Additional funding through justice system, private donations and charges to service users: €135 million</li> </ul>	
<b>Remarks on Key Policy Developments</b>	<b>Positive</b>	<b>Negative</b>
	<p>Reductions in homelessness due to ambitious strategy.</p> <p>Shift towards long term solutions to situations of homelessness with emphasis on</p>	<p>Young people under 27 are obliged to wait for 4 weeks before they can apply for subsistence benefit in order to show they have looked for work. This contributes to increased vulnerability to homelessness.</p>

	<p>prevention and long term housing solutions.</p> <p>Increase in possibilities for supported housing.</p> <p>Increase in homeless-led initiatives and participation.</p> <p>A project for the abolishing of the use of local connection (see right) will start in 2014. This will be a joint effort of the Ministry of VWS, the National Association of Local Authorities and the <i>Federatie Opvang</i>.</p>	<p>Homelessness is often framed as a public order and safety issue. Practices taking place in the public space (such as sleeping, drinking or possessing alcohol and/or begging) are made illegal by certain local authorities.</p> <p>Local connection is used as a form of gate-keeping and limits access to services. Several aspects of Dutch legislation, policy and practice deny vulnerable groups their right to emergency shelter if they have not lived in the community for two to three years. By excluding homeless people and recovering addicts and migrants who for a multitude of reasons cannot either prove or sustain residence over the required period, the Netherlands fails to comply with provisions of the Revised Social Charter of the Council of Europe, including the right to housing.</p> <p>The housing market is extremely difficult to access, both qualifying for a mortgage or a commercially rented house requires a high income. Waiting lists for socially rented housing are up to twelve years.</p> <p>Over-indebtedness is an increasingly important barrier to housing. Due to the economic crisis one out of every 6 households is severely indebted. The number of evictions is increasing as well as the number of forced sales of owner occupied housing.</p>
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