



## Shelters in the Netherlands: How to get in and how to get out.

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### On paper

Since 1994, successive laws have stipulated that all municipalities in the Netherlands must offer initial shelter to homeless people. Shelter is for people who have been forced to leave their home and who cannot survive on their own in society. The current law that regulates this, the Social Support Law 2015, states that a person who needs care can turn to any municipality. As a result, this law gives the right to national access. Municipalities can organize this on their own or in collaboration with the so-called *center municipality* in their region. In the Dutch administrative system, a center municipality is a municipality that performs a certain function for surrounding or neighboring municipalities in an inter-municipal partnership under the Common Regulations Act. Since 1994, center municipalities have been receiving extra money from the government for this relief, giving the regional and local municipalities an incentive to collaborate. There are 43 center municipalities in the Netherlands and a total of 355 municipalities.

### Help in the best place?

It is reassuring that you can always go to any municipality in case of need, isn't it? Unfortunately, there are several major bottlenecks. The first is the application of the concept of *local connection*. If someone requests a municipality for shelter, that municipality — the so-called applicant municipality — will ask where the person comes from or has stayed over the last period. This is how the municipality determines local connection. The applicant municipality wants to know this because that municipality has the duty to investigate where an individual counselling process has the best chance for success. This may well be the region where that person originally came from. For instance, this person might already be in a debt restructuring process or be receiving other assistance in that region, or it might be the place with the most family support. In such a case, the applicant municipality must ensure a smooth transfer to the municipality with the local connection. But, if it turns out that the region with the local connection is not supportive of the client due to a criminal network, for example, then the applicant municipality has to look for a better location. This investigation may take some time, during which the applicant municipality is obliged to offer initial care for the night.

### Or exclusion?

In practice, local connection is far too often being used as an exclusion criterion. This happened over time. We can explain this by unwanted side effects of positive investments of center municipalities. This is how it works: The national funding for shelter that the center municipality receives is explicitly meant to not cover all the costs. As a result, the individual center municipalities also invest in shelter and aid themselves. Because each center municipality invests differently, the quality of shelter and aid differs per center municipality. For homeless people, this creates a preference to center municipalities where support

is relatively well-organized. And those municipalities have to care for more and more people from other regions. In response, these municipalities have started to exclude homeless people from other regions, arguing that these people had no regional connection with the center municipality. Consequently, some people in need continue to drift around and experience increasing issues.

### In figures

Over the past few years, the Trimbos Institute, which is a national knowledge institute for mental health care, addiction care, and social care, has completed 4 studies on how national access worked out in practice. The latest study was carried out in 2018. The 43 center municipalities were visited by experienced *Mystery Guests* who had been homeless themselves. In registrations where the municipality was unable to provide a place to sleep, 58% said a lack of local connection was one of the reasons. In 35% cases this was the main reason (Trimbos Institute, 2018).

### Who can save themselves?

Another bottleneck in the accessibility of initial care is the assessment that determines if someone is self-sufficient. An increasing number of municipalities assess whether people are able to cope independently when they ask for shelter. If there is no clear case of mental illness, addiction, or mental disability, people often do not get access to the shelter. Some municipalities do have short-stay facilities, corporation hotels for example, where homeless people can live temporarily to continue their work and to solve their problems. In many other cases, so-called self-reliant people are referred to campsites or holiday parks. However, they cannot formally register at a campsite or holiday park as their living address. This often worsens their situation. After all, without such a registration and postal address, they have no access to other facilities, health insurance, etc. In our practice in Utrecht, we also see this happen, for example to people who become homeless after a divorce and lose their home address. People may be self-sufficient at first registration, but two years later (after being rejected) they may no longer be self-sufficient at all. In the Netherlands, the National Ombudsman defends people who get stuck in institutions. In its latest annual report, the National Ombudsman states that it is no longer only about the most vulnerable people who cannot keep up. It is unacceptable that their situation has to get worse before they qualify for government support (Annual report, 2018).

### How to proceed?

The research report of the Trimbos Institute shows that connection with another region is too often used as a reason for exclusion from initial aid. In response, the Ministry of Health, Welfare and Sports (VWS) and the National Association of Local Authorities (VNG), have indicated that covenants, manuals and policies based on the Social Support Law 2015 contain inac-



curacies. Therefore, municipalities can still put too much emphasis on the 'local connection' criterion. Consequently, the VNG issued a new customized model of policies last February and the Ministry has asked all municipalities to implement this model. The new model is an important step towards a better implementation of national accessibility. The VNG has also published a list of contact persons for the national accessibility of social care and protected housing on their website. It is expected that this will benefit the contact between municipalities about first shelter for homeless people and the individual counselling process afterwards. Everyone involved has given permission to publish their data for this purpose and the State Secretary Paul Blokhuis has already announced a new study on the functioning of shelter access for the second half of this year!

Clarity about shelter accessibility and good cooperation between municipalities will become even more important in the coming years. From 2021 onwards, national funding for shelter and protective housing will no longer go to the 43 center municipalities, but to all 355 municipalities. This gives all of them a responsibility concerning the issue. The Federatie Opgang, which is the trade association for institutions for social relief, women's relief, protected and assisted living, is concerned about this development. It notes that there are not only problems with access, but also that the preconditions for proper shelter and support as the next step are still lacking in many municipalities. These include preconditions such as suitable and affordable housing, sufficient resources for municipalities to provide appropriate support, independent client support, appropriate debt restructuring assistance, and basic requirements such as postal addresses for homeless people. As long as these preconditions are still lacking, the Federatie Opgang considers it irresponsible to continue with decentralization at the pace previously envisioned. This pace is now also being discussed politically and governmentally.

## Progress in Utrecht

There is still a lot of room for improvement nationwide. In Utrecht, we put a lot of energy into developing innovative ways of providing better care and assistance. For example, the first point of contact for homeless people has recently been improved with 'Herstart' a welcoming walk-in and a small shelter. Herstart is also the operating base of a team of specialized professionals and volunteers, the City Recovery Team. They try to arrange suitable shelter and counselling in the city, in the Utrecht region or in another region if this increases the chance for success. The doctors and nurses of Public Health offer medical care at Herstart if necessary.

A second great development in Utrecht is the transformation from night care to 24-hour care. In the recent past, homeless people in Utrecht could sleep in a night shelter, but were sent back to the streets after breakfast. Some of them then went to the day-care facility to return in the evening. Others just hung out on the street, or tried to find a quiet place in a library or café, places where they were often looked away. This is tiring and inhumane. As a result, we saw homeless people develop even more mental and physical problems. With the conversion from night shelter to 24-hour shelter, people no longer have to go out on the streets during the day. In the 24-hour shelter, they are offered a private room so that they have privacy and tranquility. Moreover, we organize separate shelters for very vulnerable people, families, and people

with a hard drug addiction. All locations are working together intensively with the City Recovery Team to arrange the best follow-up care.

## Give and take, working together

One of the night shelter locations that we converted into a 24-hour shelter approaches the concept of self-management in a rather special way. This shelter, 'NoiZ', which means Self-managed night shelter in Dutch, was set up 25 years ago by people who were homeless themselves. Homeless people still bear the daily responsibility of the shelter's organization. People who need shelter connect with the caregivers because they know that the caregivers have lived on the street too. In a sense, the caregivers are a kind of a role model — they show that there is always a prospect and they motivate their guests by giving them a role in the housekeeping of the shelter. Over the past few years, we have experienced what form of support for volunteers and professionals fit best within this concept. Soon, we will introduce the NoiZ academy to offer homeless guests a specific training trajectory to grow into a paid position within the social care sector.

Recently, we started another innovative project, the pilot 'Springboard 030'. In this project, we use a working situation as a 'catalyst' for recovery in other areas of life. We ensure that homeless clients who are able to work immediately start working for an employer. We also provide a room. By focusing on work, clients recover faster and have the prospect of a permanent contract. At Springboard in Eindhoven, another Dutch City, 70% of the clients no longer need a social financial allowance after a year and live independently.

## Preventing relapse

These developments focus on better first access to shelters, better living conditions in the shelters, the organization of follow-up care, and the principle that work is a catalyst for recovery. With this we try to support as many people as possible in recovering and living their lives more meaningfully with a sense of self-determination. This approach is successful, but research has also shown that a large group of former homeless people lose their homes sooner or later again. We asked this group why this issue occurs. Four reasons were the most common responses:

1. A lack of transfer of care during the transition to an independent residence.
2. Financial problems and limited skills to deal with money and money problems.
3. A lack of daytime activity and meaningfulness.
4. Lack of daytime activity was accompanied by limited social contact and the lack of a supportive network.

Becoming homeless is very traumatic, and becoming homeless again should be unthinkable. That's why we work on more appropriate support, with more attention for transfer moments, and debt support combined with help to increase financial skills. We have to focus more on day-activities and employment, and we must have the courage to discuss sensitive issues such as meaningful relationships and loneliness. After all, the organization's goal to provide access to shelter and follow-up care is first and foremost to enable our clients to build up a life that is as independent as possible, personally meaningful, and dignified.