

## Summaries

*Justitiële verkenningen* (Judicial explorations) is published six times a year by the Research and Documentation Centre of the Dutch Ministry of Justice and Security in cooperation with Boom juridisch. Each issue focuses on a central theme related to judicial policy. The section Summaries contains abstracts of the internationally most relevant articles of each issue. The central theme of this issue (no. 6, 2019) is *Youth care*.

### **From tinkering with the system to building substantive renewal**

*Saskia Wijsbroek, Marije Kesselring and Dorien Graas*

This article analyzes the decentralization and transformation of Dutch youth care since 2015. The authors point out that many problems still exist and in some cases have become worse. To fundamentally reform youth care much more is needed than just money or a system change. It is necessary, also according to international research, to create a strong pedagogical basis or 'pedagogical civil society'. Also prevention on various levels (universal, selective, indicated) should receive a lot of attention, while the same applies to improving primary care support, such as youth health care, GP practice support, youth work and school social work. It would also be wise to invest in intensive youth care with long-lasting effects. Generally there should be a strong focus on tackling local and (supra)regional social issues.

### **Three measures to save Dutch youth care**

*Ido Weijers*

Dutch youth care was decentralized in 2015. Since the transfer to the municipalities, youth care is in a state of deep crisis. There are long waiting lists, even in situations of acute need; there is lack of money, of professional and experienced staff, of adequate care, and of central coordination and guidance. In contrast to Denmark, where youth care was transferred to municipalities in 2007, there was barely time to prepare the transfer in the Netherlands. Moreover, the number of municipalities was not significantly reduced and the funding was extremely cut back. In this article, a number of interventions is being proposed to save what can still be saved. First, funding will have to be substan-

tially increased. Second, the access to youth mental health care should not be a matter of municipal authority.

### **Child protection across the border. Lessons for the Netherlands and learning from Denmark?**

*Caroline Vink*

In view of the recent problems arising from the decentralization of the Dutch youth care system, this article examines whether the Netherlands could learn from decentralization experiences in other countries. The author focuses on Denmark, where such decentralization took place fairly recently. In addition, elements of the organization of youth care in Germany and Norway are also discussed. It becomes clear that the Netherlands has a relatively complex system with many different organizations with overlapping tasks and powers. In the Netherlands, much attention is paid to control and risk management. In Denmark, on the other hand, there is much more confidence in the capacities of parents and children to find solutions. It is noticeable that in the vast majority of cases there is consensus between parents, child/youngster and care providers about how to deal with the problems. The most important lesson that the Netherlands can learn from abroad – and especially the Danes – is: invest in underlying values and principles and give professionals and families time, support and space.

### **Family-oriented working in locked residential youth care**

*Linde Broekhoven, Inge Simons and Floor van Santvoort*

The importance of family-centered care in residential youth care is widely recognized in research, as well as in practice and policies. Involving parents in residential treatment is frequently associated with positive outcomes. However, applying a family-centered vision in the practice of residential youth care remains challenging. A program for family-centered care is developed by the Academic Workplace for Risk Youth (AWRJ). The program emphasizes the importance of involving parents from the start of the placement. Parents should be informed about family activities in the institution. Professionals treat parents as ‘experts’ concerning their child and involve them in decisions. Furthermore, parents are asked about their needs and supported for participation. Another important part of the program is the possibility to start systemic therapy during placement and continuing the therapy

when the youth returns home. This article also discusses how to overcome barriers in involving parents and how this program can be implemented successfully.

### **Taking care of unaccompanied minor immigrants**

*Monika Smit*

Among the asylum seekers arriving in Europe are unaccompanied minors (UMAs). As a result of the often traumatic experiences before and during their flight, many have mental health problems. The question is how they cope in the country of destination. After the flight, the plight is not over: destination countries are often not welcoming in all respects, UMAs may encounter violence in reception facilities, and experience stress related to the asylum procedure and possible family reunification, as well as worries about relatives left behind. Although UMAs are also known to be resilient, and most are supported by family members and/or significant others, there are worries about their transition to adulthood. When they turn 18, they have to deal with the developmental tasks that come with that age, as well as to come to terms with past experiences. At the same time their guardianship ends, and they are supposed to manage on their own in the relatively new country. Many UMAs seem to manage, but it would be helpful if the 18 years age limit could be used flexible when necessary.