

WARDS OF STATE

*Youth care in
the Netherlands
under lock and key*

Hélène van Beek
Foreword Martijn van Rheenen



Nobel Boeken

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Nobel Boeken

ISBN 978908332-1288

Also available as e-book: ISBN 978908332-1295

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First edition of the English translation: 2023

Foreword: Martijn van Rheenen

Translation: *Annemieke Righart, Dunfield Editing*

Nobel Boeken is part of the foundation *Stichting Nobel*

Baarn, The Netherlands

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www.nobelboeken.nl

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Cover:

Painting by Street Artist *Judith de Leeuw*, JDL [original painting on canvas, 5.5 x 10 metres]

Cover photography: *Carla van de Puttelaar/ Leo Veger*

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Creative director: *Gerard Steijn*

Author photograph: *Gerard Verschooten*

Layout: Coco Bookmedia

Printer: *Wilco, Amersfoort*

Publisher/editor: *Rob Bakker, Nobel Boeken*

Publication made possible by: *Stichting Recht Kinderen van de Staat (Foundation Justice Wards of State)*

<https://justicewardsofstate.eu>

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IN HONOUR OF THE AUTHOR HÉLÈNE VAN BEEK

*This is the English translation of the Dutch book on youth care that was published in 2020 under the title 'Kinderen van de Staat.'*¹ The translation is mainly intended for readers in Europe and also a tribute to the journalistic work of the author Héléne van Beek (1964–2022).



Héléne van Beek worked as an investigative journalist, and was a member of the VVOJ (Dutch association of investigative journalists). She worked for Dutch daily newspapers (e.g. Trouw) as well as for the television shows Zembla and 'Wittman Ontdekt' (VARA television). From 2010 onwards, she made reports for Argos (investigative journalism VPRO radio) and before that she reported for daily newspaper 'De Gelderlander' for 18 years. Van Beek studied contemporary history and press history at Radboud University Nijmegen, after which she took a postgraduate course in journalism for academics. She worked on this shocking publication for three years, while consulting the current literature, interviewing many young people and their parents, as well as experts in youth care, juvenile lawyers and judges. Through many requests for information under the Government Information (Public Access) Act (WOB), she uncovered secret information and even more shocking were the parts that had been redacted. After investigating tenders in the youth care market — it is a market — shady practices came to light and, as it turns out, profits take precedence over the welfare of young people. Meanwhile, several scandals as described in this book have also been made public and are being discussed in the political arena.

1 H. van Beek, *Kinderen van de Staat. Jeugdzorg in ademnood* (Baarn, Nobel Boeken 2020)

FROM THE PUBLISHER

.....

In the Netherlands, minors who are under state supervision or have been placed out of home at the order of the courts are what is known as *Wards of State*. The research project and book were the initiative of Martijn van Rheenen, entrepreneur and himself an experience expert on being a youth care child. The research concerns the situation since the system changed in 2015. All the abuses and cases identified over the last eight years are still current. Even more so than ever, because abuses tend to accumulate and government oversight and control from 2015 onwards are completely lacking. Irrespective of their type of problem, adolescents are not safe from the Dutch state.

As a result, this is not a 'nice' book, but rather one filled with injustices ('zwartboek'). The book provides a large amount of clarity on the state of affairs in Dutch youth care. A string of harrowing cases show how major and gross mistakes are being made at every stage of youth care in the Netherlands; from the initial assessment of a certain situation, to the lack of proper psychiatric diagnosis regarding the children involved, to the too-rapid out-of-home placement of children, separating them from their parents and usually also from siblings in cases where these are placed in different facilities. These children end up in market organisations that are focused on making a profit. By the time they are 18, they are no longer wards of state and are released out on to the streets — with nothing: their family ties often destroyed, homeless and without any help.

In the Netherlands, more children end up in foster homes or care institutions than anywhere else in the world. The Netherlands is the 'champion' of out-of-home placements and closed care admissions of children. Every year, around 3,000 children are admitted to a closed youth care facility, under the regime known as *JeugdzorgPlus*. Institutions that could effortlessly double as prisons. The number of out-of-home placements, currently at 46,000, have increased rather than decreased. According to data from only a few years ago, in the Netherlands, around 420 children for every 5 million inhabitants were being admitted to closed care facilities. In Denmark, a comparable country, this was

only 5 children per 5 million inhabitants, while in Belgium this was 15 per 5 million and in Germany 80 per 5 million. Since then, the Dutch numbers have only increased. This score is not slightly worse, it is a great deal worse. The Netherlands tops Europe in terms of numbers of adolescents in closed facilities. The youth care supervisory board has already proclaimed, loud and clear, that it lacks the capacity needed to exercise adequate supervision. As a result, more and more children are finding themselves under lock and key by order of the court and are quite literally the ones paying the price. Children's rights are systematically being violated, in all possible ways: the right to family, the right to mental and physical health care, the right to disability care, the right to carry their family name, the right to equality, the right to a healthy life, the right to physical exercise and recreation, the right to education, the right to an opinion, the right to protection from abuse and violence, and the right to healthy food.

The Dutch version of this book found its way to all the ministries involved, and to all the MPs with youth care in their portfolio. The book featured during hearings in the Dutch House of Representatives. With the cooperation of the foundation 'Het Vergeten Kind' [the forgotten child, ed.], all Dutch municipal council members — close to 8,000 local politicians — received a free e-book copy. A second edition was issued that same year and book sales continued in the years that followed; and the book was also used in youth care teaching courses, amongst other things.

In the NOS news broadcast of 12 June 2019, the Committee investigating violence in youth care [*Commissie Onderzoek naar Geweld in de Jeugdzorg*], led by Micha de Winter, presented its report in 3 volumes and 16 appendices, totalling close to 3000 pages. Its conclusion: 75% of children in youth care have been subjected to physical, mental or sexual violence.¹ Parliament acknowledged the report's findings and, not for the first time, proclaimed to be 'shocked and astounded'. In recognition of the problem, the government came up with the simplest of solutions: all children who were a victim of violence or abuse while they had been a ward of state were to receive EUR 5,000.

Thus, over the past two years (2021–2022), under this two-year government compensation scheme, intended for the thousands of children in youth care who

1 De Winter Committee, '*Onvoldoende beschermd - Geweld in de Nederlandse jeugdzorg van 1945 tot heden*', (The Hague, 2019)

had suffered abuse, while others had been compelled into forced labour, over 20,000 victims of sexual abuse in youth care have applied for financial compensation. Maltreatments took place at both foster homes and care institutions. The amount of five thousand euros was meant as an initial compensation for the victims.² This money, however, will not fix the trauma suffered in youth care. Since the liberal policies of the past decade, the Dutch Government seems to know the price of absolutely everything and the value of next to nothing.

The 2019 report is just one of the reports published over the past decade on the abuses in youth care. In 2012, already, there was the Samson Committee report on sexual violence in youth care institutions, and the Deetman Committee, two years before that, reporting about widespread sexual abuse within the Roman Catholic Church, as well as in Catholic boarding schools. All these reports deal with the same issues — about power, abuse and cover-ups. Whenever such a report is published, stating how much damage children have suffered in the various care homes, the same thing always seems to happen: there are immediate apologies from the organisations responsible — occasionally a shocked minister shows remorse — followed by a media campaign to ensure that the storm blows over as quickly as possible.

Bureaucracy is stifling youth care. ‘Organised Impotence’ is both the title and the conclusion of a report by the Netherlands Court of Audit, the auditor of government spending. No one is taking the lead to get the youth protection system on the right track again, none of those involved are working on a solution, all parties are pointing to each other. Youth protection in the Netherlands is not functioning because of such organised impotence. The Court of Audit has stated it has no confidence in the Dutch Cabinet’s reform plans. In practice, services and government authorities fail in implementation — and, thus, government ministers also fail. After all, they are responsible for the functioning of the ecosystem within which municipalities, youth protectors, children’s judges, care providers, the Child Care and Protection Board and Veilig Thuis [Dutch aid organisation on domestic violence and child abuse, ed.] have to arrange the care for the Netherlands’ most vulnerable children.

Unfortunately, there are also other things going wrong in the Netherlands, things that, once again, result in children being the victims. There was the scandal of the

2 NOS, 1 January 2023.

Dutch Tax and Customs Administration keeping a blacklist — which is against the law. Hundreds of thousands of citizens and companies unknowingly ended up on those lists, including close to 2,000 children! These blacklists from the tax department were related to fraud. This could be actually detected fraud but also merely a suspicion of fraud. A person could become blacklisted by an anonymous tip, after which the tax department would reclaim one or more years of child benefit payments, often unfounded. It is estimated that the government ordered nearly 2,000 children to be removed from their parental homes, as a result of around 60,000 families having been blacklisted due to the impact of stress and the poverty trap. Supposedly ‘for the good of the children’ and because parents were powerless to do anything about it.

Even worse, the government was aware of these abuses and, for years, lied about it to the House of Representatives. This scandal only came to light thanks to the intensive ‘detective work’ by two MPs, Renske Leyten and Pieter Omtzigt. MP Pieter Omtzigt, who is also the recent founder of the new political party ‘*Nieuw Sociaal Contract*’ [new social contract, ed.] characterised the issue as follows, in the House of Representatives: ‘The Netherlands is a banana monarchy’. In a lecture in Nieuwpoort, the Dutch parliamentary news centre, he stated: ‘*The Dutch Tax and Customs Administration has structurally violated 13 laws, and probably many more — you should try that! This may land citizens in a Kafkaesque situation. I cannot stress enough how disastrous it is in a constitutional state if one of the strong arms of government (tax department, police, army) structurally and unabashedly is breaking the law.*’³ Things could be worse, Pieter Omtzigt concluded: ‘*The children who were placed out of home in the context of the ‘social security supplements scandal’ [toeslagenaffaire, ed.] could not be traced or contacted because of the EU General Data Protection Regulation (GDPR). The law was changed only very recently, for this purpose, a process that took place excruciatingly slow. When we look at who the personal data of the people affected by this scandal were shared with, this is truly a scandal in itself: here, the government seems to be mostly protecting itself, hiding behind the GDPR. Because if a child had been placed out of home for a certain period of time — often after only one year — the outlook was that it would not be returned to its parental home. To then wait for yet another 1.5 years to provide help is downright bizarre.*’

3 *Herstel van de machtsbalans*, Lecture ‘Binnenhoflezing 2023’, Pieter Omtzigt, 6 September 2023.

FOUNDATION 'JUSTICE WARDS OF STATE'

For the many current abuses in youth care, justice must be obtained elsewhere. If not via Dutch law, then through the European Union and EU law. The rights violations must be addressed at the highest national political and legal level. If that fails, EU law needs to provide the solution. This English edition is intended as a basic dossier and to communicate the facts to the European Community.

Where to start? Achieving any real impact requires something more drastic than poking a few fingers at a petrified system in which many people are trying their best but are bound hand and foot by impossible rules, flawed functionalities and an overwhelming amount of bureaucracy. Where politics and national government have failed — not for the first time in 21st century Netherlands, there is only one tried and tested way of pursuing justice: the courts. It is that kind of solution towards which the initiator of Wards of State, Martijn van Rheenen, and the Nobel Books publisher intend to work. In line with this, a separate charitable support foundation has been established to fund the necessary legal costs and to ensure that, by law, every child facing youth care is assigned a lawyer: '*Stichting Recht Kinderen van de Staat*' [i.e. the rights of wards of state; www.justicewardsofstate.eu).

THE PROCEDURES

Before going to the European Court of Justice (ECJ), the plan arose to first start national litigation proceedings directly against the Dutch Government for the most distressing issues, such as the heartlessly long waiting lists, the lack of adequate treatment, the arbitrary out-of-home placements and, in particular, the court-ordered supervision (OTS). The OTS is one of the most harrowing measures for any child and parent: family ties are cut, parents are given a few hours of visitation per year, children are alienated from their parents. Children are often traumatised by the time they are released from youth care, which is on the day they turn eighteen.

There is also another legal instrument available, namely that of exercising the right of complaint — for example, to the European Court of Human Rights (ECHR). In such a case, it would be the Dutch Government on the witness stand, rather than some defenceless children.

In order to successfully present such cases, the Netherlands fortunately has a corps of juvenile lawyers. Co-director of the foundation 'Justice Wards of State', Reinier Feiner, is also chairman of the Dutch association of cause lawyers [*Vereniging Sociale Advocatuur Nederland (VSAN)*] and board member of the association of juvenile lawyers in Rotterdam (*Vereniging Jeugdrecht Advocaten Rotterdam (VJAR)*). That is where the relevant lawyers will have to be found who will, for example, be able to hold children's judges accountable.

The book that is now before you is essentially a cry for help, for Europe to break the rigidity of Dutch politics, the clique of civil servants and the bureaucracy of a failing market. The content of this book unfortunately remains current. The stories and analyses are not mere incidents but are routine occurrences in a process that continues to break children and their family ties, and has been doing so for decades.

In the following Foreword, Martijn van Rheenen, initiator of the Wards of State project and the Foundation 'Recht Kinderen van de Staat' writes candidly about his own experiences and his motivation for fighting this injustice.

Rob Bakker, publisher Nobel Boeken/Nobel Books

info:

www.justice-wards-of-state.eu

www.rechtkinderenvandestaat.nl (Dutch)

FOREWORD

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When I was 16, I was not doing so well. I was reminded of that time when, recently, I read an interview in the daily newspaper *Het Parool* of 16 September 1993. My father had abandoned our family years earlier, my brother had gone out into the world and my mother was struggling with addiction. At a certain point, it just became too much for me to bear and I left home. At that age, I was already making headlines in the national press: a boy who had to be cared for but had nowhere to go except to a closed care facility. In the Netherlands, this means losing all your rights and family ties until you turn eighteen. I didn't want to go there, and I was saved by coincidence: on the very day that I needed it, a place had become available at an open institution — this was what rescued me, at 16 years old. But the government was always keeping tabs on me and the threat of incarceration was always looming, for as long as I was a minor.

After an eventful early life of ups and downs, the boy from back then did manage to get his life in order, have a family of his own and a healthy business. However, he has also seen too much to forget where he came from and how children in the Netherlands are still losing their homes and families when they become wards of state.

After a period of drifting around, on the run from child protection services who intended to lock me away, I ended up in juvenile court where the judge referred me to mental health care services. I would have ended up in a closed care facility for adult men, far away and isolated from the people I loved. I escaped that fate because, as luck would have it, someone knew about a place at a shelter in Amsterdam. In part, I also owe my rescue to myself, as I refused to bow to the pressure put on me by the Child Care and Protection Board. Thus, I stayed in my own neighbourhood (the Jordaan in Amsterdam), where I had my friends. I was able to go to my own school in the Bijlmer. This is what eventually saved me. Unfortunately, it was also the time when things did not end well for my mother: on 26 September 1993, 10 days after the article appeared in *Het Parool*, she ended her life. What has stayed with me most from that time is the guilt I felt over my

Maij: nieuw vliegveld óf Zestienhoven

PvdA: minister dwarsboomt Alders

Maaij was minister-president. Het kabinet heeft niet de gewenste meerderheid in de Tweede Kamer. Het kabinet heeft niet de gewenste meerderheid in de Tweede Kamer. Het kabinet heeft niet de gewenste meerderheid in de Tweede Kamer.

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Bambes worden geboren aan het kindertehuis in Utrecht, de Dinsdag... (Caption text is partially obscured and blurry)

Toch weer nieuw gebouw en begin bij Stichting 40-45

Stichting 40-45... (Text continues with details about the foundation and its plans for a new building)

Werken aan boek breekt wethouder op

Wethouder... (Text discusses the impact of working on a book on the mayor's duties)

Explosie en brand in polyesterbedrijf

Explosie en brand... (Text reports on an explosion and fire at a polyester factory)

Haarlemmermeer: dan maar minder groei banen Schiphol

Haarlemmermeer... (Text discusses the impact of Schiphol airport on local employment)

Haarlemmermeer: dan maar minder groei banen Schiphol

Haarlemmermeer... (Continuation of the article about Schiphol's impact on local jobs)

Proef met nieuw systeem zandsuppletie langs kust

Proef met nieuw systeem... (Text describes a new sand replenishment system along the coast)

Vaten Volgenreier

Vaten Volgenreier... (Text mentions a collection of vases or similar objects)

Stroom stortplaats in Klein Vrijsoep

Stroom stortplaats... (Text reports on a power station or similar facility in Klein Vrijsoep)

U wilde wijndagen?

U krijgt Wilde Wijndagen.

17 en 18 september elke bende fles wijn van dezelfde soort voor de halve prijs.

Alrijd zijn bijdragen

Elke dag leren met kinderen

Elke dag leren met kinderen... (Text discusses the importance of daily learning for children)

Zaaiers PvdA wil van erfpacht af

Zaaiers PvdA... (Text mentions the PvdA party's stance on land ownership)

Daily newspaper Het Parool, 16 September 1993. Headline: 'Peddling children every day' and: 'Appalling shortage of temporary shelters and foster families'. Quote from Martijn when he was 16: 'Without Simon [who saved him by giving him a place to stay (ed.)], I would have been locked away in an institution.'

mother's death, and, after rereading the article, I also realise that I was lucky to escape. Even back then, the thought of children living in institutions where they don't belong made me angry. This feeling has never left me.

The loneliness was terrible, at times, but came with the fantastic pay-off of being free. When there is no one telling you what you cannot do, you dare to do so much more —and apparently you can, too. Thus, I ran towards life, knives out — and I still do. Sometimes exhausted after having overestimated myself, at other times flabbergasted at my own moments of success.

ENTREPRENEUR OR SHOW-OFF?

'I am a bit of both. I like to do things myself, with people I trust around me. Since my childhood, I am distrusting of too much government interference and I don't want to be labelled. If I find something unacceptable, I am sometimes said to be a tad reluctant [laughs, ed.]. Let's just say that, on my path to recognition — and, occasionally, retribution — I have become a bit of a show-off. But this also leads to beautiful things. With Momentum Capital¹, my company, my co-workers and I have built a series of sustainable businesses, such as a leisure venture, in which we are creating beautiful experiences for families.'

WARDS OF STATE INITIATIVE

'In 2008, I started to support a number of foundations for children and parents in trouble with the youth care system, and I found that, 15 years after my own experience, things have gotten worse rather than better. Nevertheless, I felt I was not doing enough, my contribution remained limited and the related impact proved even smaller. In 2015 when, due to policy changes, the authorities lost all track of the abuses in youth care, I began to investigate them myself. I named the project *Wards of State*. Most shocking were the reports of the Children's Ombudsman that pointed to an extreme increase in out-of-home placements, increases in closed youth care admissions and in child abuse within the institutions.

1 <https://momentumcapital.nl>

I came into contact with investigative journalist H       van Beek as I was looking for someone to take a really thorough look at youth care in the Netherlands to reveal the nature of the abuses and give the first impetus to change. H       started her research in 2017, which resulted in her writing the book *Kinderen van de Staat*, funded by me and my company. The English version of which is now before you.'

WHY AN ENGLISH VERSION OF *KINDEREN VAN DE STAAT*?

'Sadly, H       passed away in late 2022. We are grateful to her for the book and we will continue her fight. Publication of the book, in 2020, contributed to greater recognition of this problem in the Netherlands. The abuses in youth care are so horrific that I found it difficult to read the book. Children are still being locked away and placed in solitary confinement. I feel sorry not only for the parents and the children who have to endure this, but also for the staff in those institutions who deserve more of a chance to help these people. However, the recognition that followed after the book was published, in itself, does not solve things for all of these people. If we are to force positive change, we believe that we will need to take it all the way to the European Court of Human Rights, hence the English translation.'

THREATENING LETTERS

'Efforts to put a quick end to the abuses are meeting with a lot of resistance. This also has to do with the revenue model of Dutch youth care. Of course I knew that I had touched on a sensitive subject, but I did not expect to receive threatening letters from the largest commercial youth care organisation in the country. That's how far this goes.'

'In the Netherlands, many things are really wrong, with the low threshold for removing children from their parental homes, the ways in which these removals are carried out, the abuses that take place in most of the institutions and the lack of a strategy for returning these children to their own environment. This calls for new legislation and proper enforcement of both new laws and existing rights. Unfortunately, the public outrage has made very little difference. We will have to take this fight to the courtroom.'

Finally, it is most important to do something in one's own community for the parents and children who are struggling. Because it is true: *'It takes a village to raise a child'*.

Martijn van Rheenen

info:

<https://martijnvanrheenen.nl>

www.justicewardsofstate.eu



Street artist Judith de Leeuw working on her artwork of a pained girl on canvas, 8.5 X 5.5 metres. In New York, this piece was awarded and declared one of the ten most artistic street art works in the world.

PREFACE

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'What I am reading so far, as terrible and shocking as it is, it is just the tip of the iceberg. I dare to say that most of the adolescents will be able to recount harsh experiences, from every year, every month, week, day and probably sometimes even every hour, and so could I. When people in the Netherlands hear about everything that is going on in youth care institutions, they would regard this as serious human rights violations. Fortunately, this is being brought to light, little by little, more often and better. Thank you for that.'

This is a WhatsApp message from a young man traumatised by his past in youth care. In *Wards of State*, he tells how the interference of youth care workers and his stay at a youth care facility broke him. Talking about his experiences opens up traumatic wounds for him. But he desperately wants the outside world to know about the abuses taking place at youth care facilities.

His story illustrates what has been and is still being done to many tens of thousands of children, every year. Children taken from their parental home — from the belief that they are being 'saved' — and left in the care of others, the guardians, youth protection workers, therapists and personal supervisors in the care homes. This, however, does not protect these children, who, as a result, become alienated from their parents and/or siblings and even more traumatised than they already are. Thus, their lives become permanently destroyed.

This book is about youth care as it is at this moment in time, in the Netherlands. But the stories told by these young people and parents about their experiences with youth care today do match those of the past. And most not positive. Children and adolescents placed out of home go from crisis shelter to family care home, and from institution to institution — sometimes staying in more than 40 different places in a single year. It is happening in this country. All are waiting for treatment and many face aggression and violence in the care homes. *Wards of State* is also about a controversy. The Netherlands is a 'champion incarcerator' of children. Every year, around three thousand children, none of them criminals, end up in the toughest care, in a closed youth care facility that is not very different from any other prison — under a regime known as *JeugdzorgPlus*. Even very young children end up in such places.

This book is also about the youth care giants, the juggernaut organisations that aim to become bigger and bigger. It describes market forces, cutthroat competition, money and power, as well as the chaos that ensued from the transfer of youth care from provinces to municipalities in 2015. It was all supposed to get better, but the harsh reality is that the decentralisation of youth care has been a deterioration. This reality is becoming more obvious by the day. There are waiting lists of many months for all forms of youth care. Municipal district teams tasked with organising the care are drowning in bureaucracy. The provision of youth care is not getting off the ground but rather is causing situations to escalate. The problems of children are piling up so high that, in the end, they are often beyond all help. In the institutions there are adolescents with such complex and often psychiatric problems, who are doing so badly that they no longer see a way out. In 2019, 15 children committed suicide while in a youth care facility, and 4 in a closed care facility [update from the editor: Of all adolescents who died in 2022, 1 in 5 died as a result of suicide (a total of 67)]. This is more than from road accidents or cancer. Suicide was also the leading cause of death amongst those in their twenties, with 1 in 3 deaths. [Source: Statistics Netherlands] These figures are shocking.

The financial situation in youth care is also disastrous. Municipalities are in danger of going bankrupt due to the enormous deficits regarding youth care. Organisations fail because, as they say, they are being squeezed out in the tenders by the municipalities, who are choosing the providers with the lowest rates. Youth care is very tough business. The care for children is tendered out in plots and lots by the contracting municipalities. It is about 'performance agreements' and about 'inflow and outflow profiles'. In this world, EUR 3.75 billion is spent, annually. More than one billion of that money does not go to care, but simply disappears. These are the 'administrative costs', the costs of bureaucracy, money that is therefore not spent on caring for children. Directors and managers receive generous salaries.

Experts say that, ultimately, a parliamentary inquiry into the failing youth care system and how government authorities on all levels are ignoring this fact, will be inevitable. Such disregard also happens with respect to the violence and sexual abuse in the institutions, which is widespread. Over the past decade, three committees have been investigating this violence and abuse that is being swept under the carpet by institutions. Each of the three resulting reports led to shock

when they came out. And three times, apologies followed from those responsible, including from the Minister of Health Welfare and Sport (VWS). But without this leading to any improvement; the situation in institutions is even worsening due to the current chaos in youth care. Violence and sexual abuse are on the rise again. Two recent abuses, a supervisor almost strangling a child and a gang rape amongst adolescents in a closed care facility, as described in this book, are sad illustrations of this fact.

The madness of tendering in youth care is also revealed with a painful example in *Wards of State*. Eighteen municipalities in North Holland wanted different, but mainly cheaper, closed youth care. Horizon, the expanding Rotterdam organisation, won this controversial tender with a slick story about an innovative alternative. The sad result is *Antonius*, in the village of Bakkum, a closed care institution for young people with complex problems, housed in a building that was ready for demolition. There are even suspicions about the tender possibly having been fraudulent. Nobody is putting an end to the fiercely criticised situation in Bakkum; neither the municipalities involved nor the Inspectorate. As they also refuse to do in other places where things go wrong.

In the youth care sector, many people work extremely hard, using their heart and soul. But they often do not receive the support and financial appreciation they deserve from the organisations they work for. This is one of the reasons why there is such a dire shortage of qualified staff. A remarkable number of people wanted to contribute in *Wards of State*, but only dared to speak off the record or under a pseudonym. Former youth care staff members were in fear of adverse reactions, even when their current job was elsewhere. Children and their parents are afraid that they will be stigmatised for the rest of their lives if they would be mentioned under their real name.

Wards of State, which gives a penetrating insight into the world of youth care, could only be published thanks to concerned individuals and various foundations recognised the level of urgency of investigating the abuses that exist. Thank you all for that. Many thanks also go to street artist Judith de Leeuw, one of the *Wards of State*. She became internationally known with her artwork. Judith created the impressive artwork for the cover of the book, which shows a young woman tormented by abuse at a closed care facility.

PREFACE TO THE SECOND EDITION

Both the publisher and the author received many reactions when *Wards of State* was first published. The wards of state themselves called the book 'very impressive and moving' and were 'super happy and enthusiastic' about it. One interviewee reported having to cry while reading the book. 'What a beautiful and amazing book,' wrote another. 'I was late for an appointment as I was completely lost in it.' One reader wrote: 'The personal stories are already touching me. I think a healthy suspicion about our youth care system is always in order.' Volkskrant newspaper columnist Harriet Duurvoort reported on Twitter about *Wards of State*: 'Since I started reading this afternoon, I have been holding my breath'. And in her column she wrote 'Dismantle youth care and protection'.

Meanwhile, new reports on youth care continue to come out daily. About large, continued municipal deficits, as youth care costs continue to skyrocket. About parents desperately looking for the right kind of help for their child. The Health and Youth Care Inspectorate (IGJ) published an alarming 'progress report' on faltering youth protection and youth probation shortly after *Wards of State* was published. The report concluded that nothing had been done with its earlier critical reports on the failure of youth care. The Inspectorate demanded an 'unorthodox action-oriented approach'. The problems in youth care that arose since the decentralisation in 2015 have still not been resolved. And it is questionable whether this will ever happen, unless the system is turned upside down again.

The Netherlands is a 'champion' of child incarceration and removing children from their parental home. The number of out-of-home placements has increased rather than decreased. In our country, some 46,000 children are no longer living with their parents. Half of them are in youth care institutions. Every year, around 3,000 children are staying at a closed care facility, under the JeugdzorgPlus regime. Facilities that are not unlike prisons. Over 180,000 children in the Netherlands suffer from serious psychiatric problems, but, for them, getting the care they need is no longer self-evident. The provision of this care was taken away from psychiatrists after the decentralisation. Since that time, municipalities are determining what happens to a 'mentally ill' child. After all, the municipalities are paying for the provided care. The new Child and Youth Act envisaged more effective youth care, preferably within the family itself, or as close to home as possible. None of this has eventuated. The municipalities have had to cut

spending on youth care by 15%, and also had to set up completely new units — the district teams — to organise that care. This has required a huge amount of money. National and local politicians are calling for intervention, even a complete systems change. Experts call the current Child and Youth Act an outright disaster.

There is more criticism. Market forces, the single pursuit of profit and the tenders bring nothing but misery. Youth care institutions may benefit, but the children do not — after all, the focus is on finances not on quality of care. The municipal council members in the Netherlands, who have to monitor the work done by their Mayor and the Executive, have no grip on how youth care is being executed — nor on the related tenders, as they also acknowledge themselves. They lack the time needed to master this very intractable dossier, nor do they have the expertise to do so. The tender in northern North Holland that led to the establishment of the new closed care institution *Antonius* in Bakkum is a poignant example of how things can go wrong with incompetent officials in charge of tendering highly specialised help.

Critics are increasingly calling for a parliamentary inquiry into the failure of youth care decentralisation, this will not solve any immediate problems. It would be a good thing if municipalities would no longer need to procure youth care themselves, each having to deal separately with time-consuming and costly tenders. Perhaps this authorisation should be returned to the provinces or to the national government. Council members should also be able to effectively monitor youth care in their municipality. This requires real transparency. Under the guise of ‘competition’, EU tenders are currently taking place in the greatest secrecy. This means that there is no way for council members, citizens and youth care organisations to find out how a certain tender was handled.

Parliament is also being sidelined. Parliamentarians do know that things are going wrong in the youth care sector. They see and hear from experts, citizens and distraught parents that children do not get the necessary specialised care, that there are long waiting lists, that too many children continue to be locked up in solitary confinement, and that many children fall victim to suicide. But they have few or no tools to intervene, precisely because youth care was transferred to the municipalities. Nor are they able to force the Minister or State Secretary of Health, who are responsible for youth care, to act. The supervising organisations, such as the Health and Youth Care Inspectorate (IGJ), need to do a much better and more active job of checking whether good youth care is being provided.

There is currently a lot of criticism of their ‘remote inspection’. The supervising organisations do not really intervene — they never, for instance, decide to close a youth care institution, permanently or otherwise.

Within youth care organisations themselves, monitoring and participation must also be better regulated and guaranteed. Although there are supervisory boards, client councils or other participatory bodies, practice shows that children — and their parents in particular — have very little say in the matter. Nor are the care institutions’ supervisory boards critical of the way the institutions are governed. They are part of the system. The financial ins and outs of youth care organisations, which often fall under large holding companies, are mostly not transparent. Thus, it cannot be checked, for instance, whether the money is actually spent on youth care or goes to overhead, marketing or (too) high directors’ salaries. The Minister of Health is responsible for the system. He is ultimately responsible for good quality youth care in the Netherlands. But, to date, this minister has rarely interfered in the content, pointing to the municipalities for problems to do with youth care. What he does do is to present countless action plans and reports. When it comes to queries, the spokespersons of youth care organisations, municipalities and the Ministry of Health, Welfare and Sport hardly want to cooperate. Rarely, in a journalistic investigation, has it taken so much effort and perseverance to obtain any answers. On tricky issues, it was almost never possible to speak to those responsible themselves, such as the minister, council executives or directors of youth care institutions. Time and again, spokespersons have argued that all these questions or negative publicity would be at the expense of the ‘vulnerable children’.

The book *Wards of State* is about those ‘vulnerable children’. The story is largely told by them and written mainly for them. Awareness will hopefully be achieved by exposing what is going wrong in the youth care sector and by breaking down the walls of this almost impregnable stronghold. Hopefully, this will lead to improvements. And perhaps, in the future, things will get better for the wards of state, as well.

Hélène van Beek, Nijmegen, 2020/2021

1 BECOMING ACQUAINTED

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Tim

Tim was lying on the sofa, motionless. Our marathon interview about abuse and neglect, his life in foster care and a youth care institution in Deelen came to an abrupt end when Tim passed out. Talking about his traumatic experiences just became too much for him. Before he lost consciousness, Tim had been talking gibberish, making no sense and speaking in English for many minutes — all due to stress. Tim, not even 30 years old at the time of the interview, was already walking with a cane because of the pain in his body, which was partly caused by the traumas he suffered as a result of child abuse. Tim, small in stature with medium-long hair was wearing a cardigan, jeans and sneakers. During the interview in his flat, he regularly made his way to the extraction fan, to smoke a cigarette while leaning against the countertop. Tim is one of the people I interviewed for this book — ‘Wards of State’ — in which young adults talk about how their lives have been devastated after having being torn away from their families and forced to live in care homes and institutions. Too much had happened. Tim was in an extremely bad state and ‘weary of life’.

Currently, there are 46,000 children in the Netherlands not living with their parents. They are staying in foster homes or children’s youth care homes. For their own good, or so it is said. Where out-of-home placements are concerned, the Netherlands is unquestionably in the lead within Europe. There is no other European country where this many children are living in foster care or children’s homes. This unfortunate front-runner position is the result of the way the Netherlands has organised its national youth care system. Children are taken away from their parents, either due to a saviour’s mentality amongst the authorities involved, or because they are simply accustomed to doing so, or because of the position of power of youth care professionals. For reasons of suspected child abuse, or because parents are considered unable to take care of their children, or because of the children’s own behavioural problems that make them a danger to themselves and/or their environment. Each year, up to 3000 children end up in the most severe form of youth care: in closed care facilities under what is known as the *JeugdzorgPlus* regime [intensive youth care method, ed.]. The stories of kids who this applies to are staggeringly similar. They are lifted from their beds in the

middle of the night or plucked from schoolyards by the police and dragged off in police vans. Their stories all refer to loneliness, lack of trust, aggression and violence, and to the horrors of closed care facilities, where children are physically restrained and frisked. They are also all about prison regimes, anti-tear clothing and solitary confinement; about drugs being abundantly available in these places, about kids running away, and about attempted and actual suicide. The stories are also about the lack of proper treatment or good quality education. About the kids not being heard by their guardians, therapists, counsellors or mentors, nor by the Child Care and Protection Board or the juvenile courts — the ones responsible for out-of-home placement of these children and for locking some of them up in closed care facilities. Equally disturbing and worryingly similar are the stories about what happens to them after they leave these institutions. Most of them never graduate from school; their lives are marked by alcohol or drug addiction or they become addicted to gambling. Rarely ever do they have stable relationships or jobs. Large numbers of them have children themselves when they are still very young. They trust no one, are depressed or even suicidal. All are traumatised. Although the experiences described in this book are those of the main characters Tim, Babs, Jason, Nola, Patricia, Vanessa and Judith, these are also the experiences of many other young people and their parents. All of them have been scarred or traumatised by youth care. They are the wards of state.

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*'The
Netherlands
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with regard to
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Babs

Babs was 17, the first time I spoke with her. She had tried to hang herself in a closed care facility in the Dutch village of Zetten, using a rope she crocheted herself. When I talked to her, she had just moved into a flat at an RIBW [regional institute for sheltered housing, ed.] in Arnhem, an organisation that guides young people to live independently. The flat was rather run-down, with wrecked doors, a leaking kitchen tap and the previous occupant's dirty dishes still in the sink.

Babs had been taken to a closed care facility after her father died, leaving her with a mother who abused her, which had subsequently led to Babs becoming both aggressive and suicidal. She used to cut herself, was dealing drugs and became addicted to both alcohol and drugs. In the past, Babs had already been staying in various family care homes as well as a crisis shelter. In the end, she was admitted

to a closed youth care facility — what is euphemistically called *JeugdzorgPlus* (a more intensive form of youth care, ed.). The fact that Babs was still alive to tell me about her experience in youth care was only thanks to a security guard who had gotten to her just in time to prevent her from hanging herself, thus saving her life. Two years after our interview, Babs (19) was no longer staying in that tattered flat; last I heard, she was living with her boyfriend with whom she had just had a baby daughter.

Jason

Over the course of thirteen months, Jason had stayed in five different places, including a psychiatric hospital and closed care facilities for youth care in the villages of Harreveld and Hoenderloo. He has had to deal with more than 50 social workers. I spoke to him for the first time in Diemen, when he was 20 years old and staying at a sheltered housing complex consisting of shipping containers stacked on top of each other. His rectangular flat on the ground floor was dark but clean. On the table a box of tissues with the song lyrics: 'It's my party and I cry if I want to' printed on it. Jason had been abused for many years by his alcoholic father and his mentally challenged brother. Despite the warm weather, he was wearing a cap, a long-sleeved t-shirt and trousers, as he preferred not to show his arms and legs which were full of scars from cutting himself. He was also a figurehead, fighting against abuses in youth care, and an eloquent speaker who comes across well in the media. But appearances are deceptive. Often, that same Jason would be in very bad shape.

NOLA

I spoke with Nola when she was 14 years old and still living at the Transferium, a closed care facility in the municipality of Heerhugowaard. When we met, she was on leave for the second time. I met her and her mother at a grand café. Nola looked like a typical adolescent girl, with her hair pulled back tightly in a bun. She had beautiful eyes, a somewhat timid demeanour and spoke in a soft voice. Nola was scheduled to leave the care facility permanently, in about a month's time. Originally, Nola had left home because she had been fed up with the situation there. While her parents were fighting a bitter divorce, all the attention had been focused on her brother, who had already been removed from the parental home, as he was exhibiting intolerable behaviour, according to their mother. Nola had roamed the streets at night, popping ecstasy pills, smoking

weed and drinking alcohol. She talked rather matter-of-factly about ‘chilling’ on the streets and hanging out at shopping centres with her friends. She became emotional when talking about the violence in the institution — committed not only by the young residents themselves, but also and in particular by the staff, who would intimidate the children under their care and team up to grab them and drag them off to solitary confinement.

Patricia

Patricia cannot share her experiences of confinement because she is no longer alive. She committed suicide at the age of 15, while staying in the closed youth care facility in Hoenderloo. I spoke with Lucia and Gerard, her sympathetic parents. Patricia’s Facebook page was still available, with photographs showing what she had looked like in life. Full lips, dark hair and expressive eyes. Cheerful photographs of her and her friends, with flowers in their hair. But also one of Patricia with a bandaged hand. Her parents talked about the walls they used to run into when looking for the right kind of help for their daughter who was suffering from psychiatric problems. For four years, the traumatised and suicidal Patricia did not receive the right kind of help in her home province of Zeeland. Then, at long last, her parents thought they had found a suitable place of treatment: *De Smaragd*, a closed youth care facility in the Province of Gelderland, where children were being treated in a small group environment that had only recently opened for those suffering from very complex issues. It was there, six weeks after she arrived, that Patricia committed suicide by hanging herself using shoelaces.

VANESSA

From the time she was six years old, Vanessa’s world involved child welfare services. I met her when she was 31, addicted to gambling and suffering from depression, living in a small dwelling in a working-class neighbourhood. The living room was jam-packed and heavy curtains were framing the windows. During our interview, Vanessa received a number of phone calls. She was running a ‘private sauna’ that could be booked day and night, which is why she needed to be ‘on call’. From time to time, she stood in the doorway to smoke a cigarette. A can of *Red Bull* energy drink sat on the table. Her mother had been an alcoholic, her father a violent man, addicted to cocaine, who had been murdered. Vanessa eventually ended up in the closed youth care facilities in Zetten and Harreveld.

She became pregnant at 17, was a prostitute for a while and suffered abuse from various partners. Vanessa became aggressive herself and stabbed a friend with a paring knife. At the time of our interview, she had two children, also with the necessary problems. However, not long ago, her life took a turn for the better; she married and moved into a nicer house. Nevertheless, she also continued to be traumatised.

JUDITH

Judith was 22 at the time of our first interview. After a chaotic period, she had ended up in a closed youth care facility in Zeist. Although she was not a criminal, she had felt as if she was in prison there, all the same. I spoke with her in her spacious flat in the Bijlmer [a suburb in Amsterdam, ed.]. She felt happy there. The table covered in all sorts of stuff and ashtrays filled to the brim. Although Judith had spent 'only' a few months in the closed care facility, this nevertheless left its traumatic mark. Of all the people I interviewed, Judith was the only one who succeeded in achieving her goal for the future: she became a street artist, with commissions to apply her wall paintings to buildings all over the world. On the facade of a building in Amsterdam, she portrayed legendary Jewish singer Amy Winehouse, who died of alcohol poisoning at a young age. Judith created the artwork for the original Dutch version of *Wards of State* (*Kinderen van de Staat*), depicting a visibly tormented girl, on a 5.5m x 8.5m canvas. The art work won awards in New York and was declared one of the 10 most artistic works of street art in the world. By making this work of art and by telling her personal story, Judith continues to contribute to the battle against the injustice of locking up innocent young people.

2 ROTTEN SYSTEM

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‘Thank you for your message, good to see that attention is still being paid to our “concerns about youth care”. The problems are persistent and long-lasting, which saddens us here at our offices every day. Yet, as befits good citizens of Rotterdam, we will keep rolling up our sleeves, again and again, and persevere. Part of our society seems to be looking away, while the future of children, and therefore also of our society, is at stake. I have been working in this industry for 36 years, but have never found the situation more worrying than it is today.’ Signed: juvenile lawyer Marjolein Rietbergen of Meesters aan de Maas, a socially engaged law firm in Rotterdam. In her open letter and the article she wrote about cases from her everyday practice (titled ‘Kinderen, hun verhalen uit mijn dagelijkse praktijk’), both published on the firm’s website, Rietbergen expresses her concerns about youth care. Which is why she promptly consented when asked for her permission to include a description of some of the harrowing cases from her article in this book. She welcomes the attention to the failing youth care system.

These are some of the examples from her practice:

‘She is seven, seven years young, yet already old... Seven years of living in various places, without ever having had a home. An addicted mother, a violent stepfather. A little girl with adult eyes that have seen too much violence. A scared little girl, too — who drowns out her fear by lashing out in a way that, in turn, also generates fear. What to do with her? She was breaking windows, threateningly waving a piece of glass around, throwing her baby sister off the dresser... This last matter resulted in her being sent to an institution... and then to another. But without the desired result. An application for a closed youth care facility had been approved, but none had a place available. Her name was added to the waiting list. Only seven years old.’

‘Thirteen years old, a good brain, her CITO scores [exam for secondary school placement, ed.] revealed a pre-university (VWO) educational level. “She’ll get there”, one would think, but where...? For no obvious reason, she suddenly decided she did not want to go on living, flipping out completely. The question was why — she needed a professional assessment... there was a waiting list. She needed to be admitted... another waiting list. Jeugd zorgPlus — a fancy name for prison gates and frisking.’

'Fifteen-year-old twins with problems. Getting their social care off the ground proved a difficult process. The undoubtedly well-meaning judge granted a supervision order. "Oh well, such a supportive measure is only for your own good, anyway." The family was informed that the twins had been placed on the waiting list, which is nice, but being on a waiting list does not take into account the children who then think that, meanwhile, they can just carry on as they always have. One of the twins was doing fine, the other was not. Then the first real family guardian was appointed, who unfortunately fell ill and was replaced after some weeks by the second family guardian, a nice pregnant lady who went on maternity leave fairly soon after her appointment and was replaced by a substitute family guardian. However, the day of the hearing was this substitute guardian's day off, which was why she needed to be replaced by yet another substitute guardian.'

Lawyer Marjolein Rietbergen concluded her open letter as follows: *'Children don't care about waiting lists, care assessment decisions, paperwork or procedures. They are our future and deserve the right treatment at the right location, if possible while staying within their own family environment. A self-respecting society should care about the interests of its young citizens and not resign itself to a situation of waiting lists, failing care, excessive bureaucratisation and family guardians who are barely getting round to doing any real work. The child in us, the child we all were once or could have been, OUR children deserve our care: hold on to them and don't let go. Would that take the urgency out of the open letter? Well no, as far as I am concerned, we should stay vigilant, a fire should burn in all of us to keep going for the sake of all those children; a fire that should NEVER be extinguished.'*

The urgency will not be abated. The Inspectorates of the Dutch Ministry of Health, Welfare and Sport (VWS) and Justice and Security (JenV), for example, published a report in November 2019, about vulnerable children being insufficiently protected, titled *'Kwetsbare kinderen onvoldoende beschermd'*. The report confirms all the concerns, as also expressed by this juvenile lawyer from Rotterdam. It is mainly about children whose development is being threatened. They are abused or neglected or are a danger to themselves or their environment. These children and young people are placed under supervision, an 'OTS', as it is called in juvenile court, or end up being removed from their home (out-of-home placement). Following such a court order, child care and protection services become tasked with organising a more involved type of care. In many cases, however, such care arrives too late or does not get off the ground at all, due to the long waiting lists for almost every situation in nearly every location.

The Inspectorates are running out of patience and will no longer tolerate this state of affairs. This is what they wrote: *‘The Inspectorates see that the most vulnerable children and their families end up on a string of successive waiting lists for district teams, Veilig Thuis (a Dutch aid organisation regarding domestic violence and child abuse, ed.), Child Care and Protection services, institutions for youth protection and youth probation and other specialised care organisations. Child judges, clients, youth protection workers and the institutions involved are sounding the alarm about these waiting lists. The entire youth care and protection chain is under maximum pressure.’*

Interestingly, precisely at that moment, in a concerted action, Hugo de Jonge, the then Minister of Health, Welfare and Sport (VWS) and Sander Dekker of the Ministry of Justice and Security (JenV) published their own report. According to these ministers, besides the additional EUR 1 billion needed up to 2021 to reduce a variety of waiting lists, what was also needed was *‘a better organisation of the youth care system [...] to fulfil the promises of the Child and Youth Act’*. Their report calling for a change in system. In it, the ministers focus on the type of assistance that is currently not set in motion for children with severe psychiatric problems, those who are suicidal or have life-threatening eating disorders. There are also alarming reports about this in the media. To solve this problem, the two ministers wanted to turn part of the youth care system on its head by obliging municipalities to apply mandatory ‘supra-regional and regional cooperation’. With this measure, they would partly be reversing the decentralisation of youth care, which was implemented in 2015 and is discussed at length in this book.

DIAGNOSIS

When the new Child and Youth Act came into force, in 2015, municipalities became responsible for all forms of youth care, both substantively and financially, including youth mental health and addiction care (GGZ), child psychology and specialist child and adolescent psychiatry. In the run-up to the new Child and Youth Act, very many experts, particularly child psychiatrists, already warned about the great risks of transferring the responsibility for child mental health care to municipalities — as this is a medical specialism and, therefore, should not and cannot be a task for municipalities.

Outsourcing the responsibility for child psychiatry to the municipalities was a cardinal error, a ‘flaw in the law that is now leading to a great deal of misery’, agreed Douwe Jan Elzinga, Professor of Constitutional Law at the University of

Groningen. *‘Since 2015, it has been my position that this is an extremely fragile and complicated matter that does not belong in the hands of municipalities, at all. Specialist youth care, in particular, should not be subject to politics. It simply and solely must be the responsibility of medical experts.’*

However, youth care has indeed become political, both at Dutch municipalities and youth care organisations. As a result, children are receiving the right type of care either too late or not at all. Parents who are desperately seeking help are being sent from pillar to post while discussions are ongoing about the type of help their child should be getting: ‘regular’ youth care (i.e. supported ‘parenting’) or mental health care.

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***‘Decentralisation
is a solution of
convenience to
cut costs and
nothing more
than that.’***
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According to child psychiatrist Peter Dijkshoorn, director at Accare (a large children’s mental health institution), children are fruitlessly sent from one place to the next, because each subsequent institution (i.e. for youth care, disabilities or psychiatry) is of the opinion that their type of care would not be the right care for the child involved. *‘There are children who are being passed on from psychiatry to the LVB group (i.e. the group of mildly mentally retarded children — “Oh horrors, can’t we say something like ‘of low intelligence?’ instead?” —after which they are bounced right back again to psychiatry. Because, “as luck would have it”, their level of intelligence was assessed found to be just high enough for them to qualify for psychiatry. And things are no different between youth care and psychiatry.’*

Dijkshoorn is stepping down as director at Accare and is going to apply himself to improving youth assistance in his role of ‘National ambassador for a learning youth care system’. He will do so on behalf of the Association of Netherlands Municipalities (VNG), the umbrella organisation of all Dutch municipalities responsible for youth assistance since 2015. Dijkshoorn is an inspired man. One of the issues he wants to tackle is that of prejudice in youth care. Currently, for financial or other reasons, children must be divided into certain categories, such as having behavioural or parenting problems or a psychiatric disorder. If a child does not fit into one of the categories, its problems are said to be ‘too complex’ to be treated in one place.

Psychiatrist Dijkshoorn is of the opinion that this method is wrong. The main reason why children and young people today are often not receiving the

right type of help, especially in youth care institutions, he argues, is because of misdiagnosis or the lack of one all together. The underlying factor is often a financial one, as proper mental health assessments are expensive, or due to organisational problems, such as a shortage of qualified staff. Such lack of correct diagnoses leads to poor youth care, Dijkshoorn says. *'If someone is placed in an institution without this being based on a proper underlying problem analysis, then everything just stops.'*

TECHNICALLY BANKRUPT

There are so many stories about faltering youth care. It is noteworthy that those working in the youth care sector and the organisations themselves as well as the responsible municipalities are not sounding the alarm about the fact that they do not or cannot provide adequate care. All they tend to do is continually point to the huge financial problems they are facing, with up to millions of euros in deficits, as a result of their legal obligation to provide youth care.

According to Douwe Jan Elzinga, Professor of Constitutional Law, transferring youth care responsibilities to the municipalities was purely an austerity measure. It represented a 15% spending cut in the total youth care budget of over EUR 3 billion. Elzinga explains why this was done, at the time. 'Brussels' ordered the Netherlands to cut overall spending by EUR 30 billion in 2012, as a way of reducing the national budget deficit. At the time, the municipalities (VNG), were only too happy to take on youth care as they believed they could do a better job than the provinces, who had been in charge of it up to that point. *'The VNG was keen to take on a large number of tasks, all the while claiming: "The municipality is the first public authority. In close contact with society. Able to solve many more social problems." At a certain point, the government departments that had to realise these spending cuts (in this case, the Ministries of VWS and JenV) thought: If this is what they want, we will give it to them — together with an austerity target — and be done with it. But, as I said right from the beginning, this was a practical solution to cut spending, no more than that. Just roll back the transfer of youth care to the municipalities of 2015, because it is not working.'*

Elzinga believes the decentralisation of youth care was a mistake for more than one reason. According to him, too many of the adverse effects from all the youth assistance tasks that have landed on the plate of the municipalities are now

also being felt by citizens who are not involved in youth care. *‘Municipalities are going bankrupt because of youth care. Deficits are now so large that all kinds of other tasks simply can no longer be performed properly. Many of the municipalities are in fact technically bankrupt. If this continues in the coming years, these deficits will only grow, at which point this will become a huge problem for all of society.’* Elzinga thinks intervention is needed: *‘Youth care has not improved. Quite the contrary. It has created such a large problem that something needs to be done about it. In any case, the responsibility for specialist youth care should be taken away from the municipalities.’* And, most importantly, it should not be organised on a regional level, as the ministers want, according to Elzinga. Specialist youth care in the case of serious problems, should be returned to health insurers and medical practitioners, as it was before 2015. If new regional organisations for complex youth care would be set up, this would only add yet another equally elusive layer to the mix. *‘This is about very vulnerable children. Regional organisation is completely irresponsible; we have no control over any of it, it will only get worse rather than better, and there will be no one checking or monitoring what happens.’*

ALARMING

The discussions about and changes in the youth care sector are repeating themselves. Changes to the care system have been made before, over the past decades, all to no avail. Each time, the goal was to organise things differently, better and in a less complicated manner. More efficient, too. However, none of those changes ever led to the desired result.

Up to 2015, the 12 provinces in the Netherlands were responsible for nearly all aspects of youth care, at which point this responsibility was transferred to the municipalities with the idea that it would be simpler for them to provide youth care, with shorter, more direct lines of communication, which would therefore also be cheaper. This under the assumption that municipalities have closer ties to the community and would therefore have a clearer picture of the needs of the individual households. This would also allow municipalities to simultaneously tackle multiple family problems, such as debts, addictions, parenting problems and child neglect or abuse. The objectives of the latest change — the decentralisation organised under the Child and Youth Act of 2015 — have been far from achieved. And this is becoming more and more evident by the day. The

many long waiting lists and the failure to provide the right kind of help, with sometimes dramatic consequences, are living proof of this fact.

Municipalities are facing millions of euros in deficits caused by youth care. And the organisations providing this care are often in financial trouble themselves — because, as they say, municipalities are paying them too little for their services. In fact, around a quarter of youth care institutions are indeed suffering losses. Dozens of organisations are in danger of going bankrupt in the near future. Particularly at risk are the organisations that are treating children with severe psychiatric problems, such as various types of traumas, eating disorders, autism spectrum disorder (ASD) and severe behavioural disorders — all problems that require long-term and expensive care.

OPERATIONAL COSTS

Since 2015, contrary to intentions, more youth care is being provided than ever before. According to the figures provided by the municipalities themselves: 20 years ago, 1 in 27 children were receiving youth care; currently, this is 1 in 8, causing costs to soar. Municipalities are facing millions of euros in deficits; for example, in The Hague the deficit has grown to as much as EUR 35 million. However, it is difficult to determine exactly what is understood to fall under youth care, as this seems to include everything, these days. It includes helping children with their homework, those with dyslexia or with anger-management issues, or providing equine-assisted therapy and the like. But also the treatment of severe psychiatric problems, such as personality disorders, eating disorders or suicidal tendencies, as well as admissions to psychiatric hospitals and closed care facilities.

Then there is also another alarming development. About a third of the money spent on youth care (more than EUR 1 billion of the total of EUR 3.75 billion), goes to so-called administrative costs. In the autumn of 2019, it was Berenschot, an independent Dutch management consulting firm, who revealed a staggering 30% of youth care money was being wasted. The available budget for vulnerable children is largely spent on rules, regulators, bureaucracy and civil servants. Jeugdzorg Nederland claims to have been shocked to discover that over EUR 1 billion are going towards such an administrative ‘jumble’ of costs. But, as Berenschot researcher Wouter Poels says, this can hardly be a surprise to anyone:

'For many people, this confirms what they were already thinking.' Youth care has indeed become a world filled with administration. For large institutions, this is an annoying yet necessary evil. For small organisations and independent social workers — mostly psychologists and child psychiatrists or other therapists — it can often be an insurmountable problem. For them, the time-consuming bureaucracy regularly ends up crippling them. They quit their practice, or only treat clients who are able to pay the bill themselves, which saves them from having to deal with the enormous amount of red tape that is involved in getting reimbursed for the care provided. A psychologist specialising in trauma was quoted in Dutch magazine 'De Correspondent': *'All I seemed to be doing was dealing with bureaucratic hassle. Once, I spent eight weekends working on a single invoice.'*

Peer van der Helm, lecturer in Residential Youth Care at the University of Applied Sciences in Leiden and an expert on the quality of Dutch youth care institutions, points to the adverse effects of the gigantic amount of administration to which all those institutions are condemned. *'There are literally droves of employees filling out municipal bullshit forms, something that must be done year after year. And the money intended to be spent on those children, instead, goes to bureaucracy at the institutions.'*

'BUREAUCRATIC NIGHTMARE'

The fact that such astronomical sums go to bureaucracy is, again, a direct consequence of the new Dutch Child and Youth Act. From the moment that the municipalities (355, at the time) became responsible for youth care, they set to work, energetically, each in their own way. Many municipalities installed so-called social district teams, which are known under a variety of names. Clearly, very large amounts of money are going into these teams, as they are basically organising everything related to youth care. They decide whether a particular child, adolescent or family is in need of care and, if so, what this should consist of. They check whether the care can be provided, determine who will provide it and whether it will be reimbursed by the municipality. Although all the work done by these district teams does not necessarily lead to good youth care, it always leads to gigantic bureaucracy.

Daily newspaper *De Gelderlander*, in November 2019, wrote about the poor performance of the district teams of an organisation called 'Sterker' [stronger, ed.] based in Nijmegen. The article was headlined 'District teams prove a

bureaucratic nightmare, assistance needs to be reorganised'. In certain cases, residents have to wait for up to 10 months before they can even have a so-called 'kitchen table talk', a discussion during which the district team investigates the type of care that is needed and that subsequently will be reimbursed by the municipality. The Municipal Executive of Nijmegen concluded that the organisation was a resounding failure.

In order to be able to offer youth care, municipalities first have to procure it. This procurement leads to complicated, time-consuming and, therefore, costly processes. The providers, in turn, are faced with different procedures and forms for each municipality. The Minister of Health expressed his concerns about this in the Dutch medical journal *Medisch Contact*, in June 2019. *'We have healthcare facilities that, due to their scale, have to work with 20 to 40 municipalities. Some municipalities have contracted as many as 300 to 400 care organisations. This is an insanely and unnecessarily large number that cannot be managed.'*

But things can be even worse; in the central region of the Province of Gelderland, to which the city of Arnhem belongs, 11 municipalities are jointly procuring healthcare. Until recently, Arnhem has had to deal with 700 providers within the central procurement system in the 'social domain' — 330 of which providing youth care. Each municipality needs to enter into a separate contract with each of the providers. That proved to be an unworkable situation; therefore, the region is going to do things differently from now on. *'We are going to set quality requirements in the new procurement system, which will significantly reduce the number of contracted care providers,'* according to the spokesperson for the Municipality of Arnhem.

For the care organisations themselves, the tendering processes and securing the many contracts with all the different municipalities also represents a huge amount of bureaucracy. Vrank Post, Director of the Transferium, a closed youth care facility in the town of Heerhugowaard, has seen the bureaucracy in his own institution increase since the decentralisation. In the past, they mainly had to deal with the Ministry of VWS for specialist closed youth care, whereas now they need to work with many municipalities. About this big difference, Post said: *'We used to have two people working on client registration. Today, this is a department of as many as 22 people. And all these municipalities are allowed to settle accounts in their own way.'*

Youth care is a business that involves large amounts of money. It is not the children and young people who are at the centre of procurement, but first and foremost, the focus is on the products and procedures. It is all a rather cold and business-like world. The various ‘products’ — related to the care — are tendered in lots and parcels. The municipal lists of product codes are often endless. Such as in the Haaglanden region, with The Hague as the largest municipality. Their list of product codes, titled ‘Parcel 1, Youth and educational assistance’ covers no fewer than 19 pages. The logic behind the tariffs can be difficult to see, at times. An example from The Hague: the product JH2-A / 45A73, titled *‘Ambulatory specialist youth care’* carries a tariff of EUR 159.60. The description of the care to which it applies reads: *‘request for assistance that takes place in the family environment’*. In cases where certain specialised treatment is not provided within the family environment but at the care provider’s location, with children and parents both coming to its offices, this particular care organisation in the Haaglanden region receives more money. Haaglanden pays an amount of EUR 200.40 under code JH2-B / 45A74 for offering this assistance at the provider’s offices. This difference is remarkable. And in Amsterdam region, since 2018, youth care SPICs (i.e. segment profile intensity combinations) are being used. These SPICs are intended *‘to categorise the family/young person’s request for help and indicate the duration and intensity of the required youth care’*.

According to Vrank Post of the Transferium, institutions that do business with many municipalities automatically face an absurdly heavy administrative burden, as municipalities are all allowed to settle accounts in their own way. Post makes the following observation: *‘They all like to do that. Amsterdam has their own thing going with the SPICs. But in Alkmaar, for instance, we have to deal with the individual budget ceiling (IBP). Hoorn has yet a different system, which looks somewhat more like SPICs. The Kop van Noord-Holland does it differently again, Zuid-Kennemerland also deviates. And, thus, each municipality has its own accountability requirements. It is an absolute jungle of rules and procedures. It would have been better if there had been one national format for declaring youth care treatment. Just as is the case for medical care.’* But there is not, which is why, according to Vrank Post, youth care is now very much about administrative processes. Both the organisations and the municipalities were ill prepared for this situation: *‘It is really a huge hassle. Every organisation is struggling to find a decent way of dealing with it all. When looking back on the period from 2015 until now, municipalities were left to work it all out for themselves, while they were hardly prepared to do so. To top it all off, there was a 15% spending cut.’* In addition, there is no reimbursement for all that ‘nonsense’ that is

required in order to enter into contracts and declare treatments, says expert Peer van der Helm: *'The institutions have to participate at their own expense in all those meetings with the civil servants involved. I see incredibly good therapists being pulled away from the primary process, which is caring for children, to negotiate with those municipal managers. This process just can't get any crazier.'*

Some voices are even more critical, such as from those who oppose the procurement of youth care for reasons of principle. For example, councillor Lara de Brito (Dutch green party, *GroenLinks*) of the municipality of Wageningen stated in the newspaper *De Gelderlander* that she would like to abolish procurement altogether. De Brito: *'Healthcare is not like a packet of biscuits that you may or may not buy.'* The current system has another negative effect, according to this councillor. These days, care providers are each other's competitors. And that, she argues, is totally undesirable, especially in the very serious cases — for instance, when juvenile court has to intervene in a family for reasons of safety. *'These situations concern children for whom the court imposes a measure, such as an out-of-home placement, to protect them. We are talking about the intensive care of society.'* And this is no place for market competition, according to De Brito.

'A TOXIC MIX'

Such market forces do exist, nevertheless. TenderNed, the platform for all types of tenders in the Netherlands, is full of those in the field of youth care. Meanwhile, there is growing criticism of the system, which is bogged down by bureaucracy, chaos, financial shortages and waiting lists. Criticism that is growing in intensity. Over five hundred members of the association of Dutch juvenile lawyers (VNJA) sounded the alarm to the Minister of Health, back in March 2018, about children whose development is being threatened by a failing youth care system. They wrote: *'There is, and has been for quite some time, a shortage of appropriate youth care for our young clients. This means that children do not always get the care and help they need and deserve, no matter how hard we try, either prior to, during or after court hearings. This violates the youth care obligation and the International Convention on the Rights of the Child. We believe that this situation is unacceptable.'* Rotterdam juvenile lawyer Marjolein Rietbergen was also intensely involved in this national open letter from juvenile lawyers, which continued: *'It cannot be that inadequate procurement policies and a lack of expertise, decisiveness and especially money are causing children and their foster or step-parents to be left out in the cold. If we do not invest now and*

organise youth assistance in a better way, we predict a rise in juvenile delinquency or an increase in the number of underage victims, because certain personality problems are being treated insufficiently or too late. Either way, these children are footing the bill. The juvenile lawyers call on the Minister of Health, Welfare and Sport to take urgent measures now — i.e. not after more consultations, assessment reports, investigations, debates and evaluations — to give these children the assistance and care they deserve and are entitled to.'

Of course, the Dutch House of Representatives also spoke about this. In the debate that followed this urgent letter, MP Fleur Agema (PVV) reminded the House that there were truly very many such outcries about youth care. As she told the Minister of Health: *'It may already be the 10th time since 2015 that we are here debating because of an urgent letter!'* Agema wondered if there would finally be a solution to the problems raised by the juvenile lawyers, so that these would not need to be debated yet again in another six months' time. The minister replied that he was 'serious' about fixing the waiting lists in youth care. And that there had already been 'extensive' discussions with a delegation of the VNJA. He added that the lawyers would receive additional information at their members' meeting. However, this promise was never kept, says lawyer Rietbergen, and the talks that WERE held, in small circles at the ministry, were 'disappointing'. After all, she had attended them in person. Rietbergen continued: *'You feel not taken seriously. And this while you are there not for yourself.'*

Now, years after their urgent letter to the minister, nothing has actually changed for the better, Marjolein Rietbergen concludes rather disillusioned. There are still waiting lists for everything. She explains how serious she considers this to be: *'We are extremely worried. The waiting list for an investigation by the Child Care and Protection Board in the Rotterdam region is currently six months. And the board's matter-of-fact response is simply: "Yes, well, that's just the way it is, isn't it?" and: "As you will understand, we do have waiting lists." or: "You must understand that I am here merely as a substitute". Well, we neither do nor wish to understand.'* In the meantime, juvenile lawyers have become numb, says Rietbergen: *'Sometimes, I think: guys, what do we have to do now to make it clear to the world that this really can't go on any longer?'* The improvement measures announced by the Minister of Health and the Minister for Legal Protection in the autumn of 2019, such as the proposed transfer of specialist care to the regions, are not the solution to the major problems, as expert Peer van der Helm also argues. According to him, it will actually make things worse: *'An immediate rollback poses a number of risks, including an increase in the already*

disastrous situation and even more bureaucracy. Which would cost more money... which, in turn, would again come at the expense of care.'

All things considered, lecturer Van der Helm is convinced that there will be a parliamentary inquiry into the 'disasters' in the youth care sector. He has frequently alluded to this in a variety of interviews, as have other experts. In May 2019, at a congress on closed youth care in Leiden, Van der Helm put it this way: *'Lofty ideals combined with a systems change, more tasks and less money, in my view, constitutes a toxic cocktail. From my ringside seat I only see the problems increasing. Let me tell you: In a few years, there will be a parliamentary inquiry into how things could have gone so wrong in youth care.'*

CRUSHED BY THE SYSTEM

The media, meanwhile, are well aware of the problems in the youth care sector and have been paying a fair amount of attention to them. Their reporting mainly concerns the gigantic financial deficits at the municipalities, but also have a sharp focus on the failure of youth care itself. Despite this endless stream of alarming articles and youth care coverage on radio and television, it has taken a long time for politicians to really become aware of the crisis in this sector, according to Lisa Westerveld, a critical member of the House of Representatives. She is focusing a lot of her attention on youth care. According to her, the subject has been treated as an inferior or subordinate issue for too long. Politicians pay plenty of attention to elderly and adult care. But when it comes to youth care, Westerveld believes this to have been a blind spot, in the first few years. She offers a simple explanation: usually, politicians themselves do not have children with serious problems. *'We all have parents who need to be looked after at some point, and most of us have been to a hospital, a one time or another. But not everyone is familiar with children who have certain problems, from educational and/or parental problems to those that are very complicated.'* Westerveld is in her mid-30s, a relatively young MP. Her motivation for working so much on the subject of youth care: *'I talk with young people quite a bit and they all tell me: "No one has ever listened to me." I take a deeper interest in them and their problems.'*

When I met Lisa Westerveld for the first time in April 2019, she was very worried about the girl Noa, who is one of the sad examples of the youth care system failing miserably. At the time, Westerveld was in close contact with her and her parents

who were living in Arnhem. Things were going very badly for the 17-year-old girl. She had been raped but never dared to talk about it. Noa ended up with post-traumatic stress disorder (PTSD), which was left untreated. At the time, Westerveld told me about Noa: *'She has developed an eating disorder, a compulsive disorder, a psychosis, and she is on a lot of medication. She is also cutting herself. Every time I visit, she has fresh scars. After we had talked only twice, she already trusted me more than the social workers.'* In the book *Winning or Learning*, which started as a diary, Noa writes about her extraordinarily bad experiences with youth care workers. Noa stayed in closed care facilities, including ZIKOS, part of Horizon, in the village of Harreveld, where she regularly ended up in solitary confinement. None of those admissions, however, did Noa any good. Westerveld recounts: *'Sometimes things go completely wrong again, at which point she is temporarily placed out of home, and after a few days has to return home again. Meanwhile, she has been hospitalised 25 times. In effect, she has seen the inside of all institutions.'* In a video on De Gelderlander's website, Noa can be seen explaining her condition: *'I have anorexia, depression, a compulsive disorder, a personality disorder, I have started to self-mutilate, which got greatly out of control. Maybe it would be better if I were no longer around. Then I won't bother anyone else nor myself.'* At the time, Noa was still able to walk outside and give an interview. She died in June 2019 at the age of 17. It was a so-called 'self-selected death' — Noa voluntarily stopped eating and drinking.

FAULT

Peer van der Helm provided support for Noa and her parents. After her death, he wrote how Noa had been crushed by the system. He unhesitatingly attributed her death to the introduction of the new Child and Youth Act in 2015. *'If it was not her fault, then what were the factors in this case? The answer, I think, lies in the new system of youth care and the Dutch Association of Mental Health and Addiction Care (GGZ), which is now under municipal responsibility. We believed that would be better. But not every municipality has sufficient funds available, nor the highly specialised knowledge and experience required to address multi-problem issues such as Noa's. In her case, it resulted in her going from institution to institution, not all of which with the knowledge and experience to provide her with the right kind of help. She was put through a wide variety of therapies, from which she sometimes emerged worse off than how she started. What's more: some of the admissions left her with new traumas.'* Van der Helm continues: *'We could have known this when the new system was set up, but we overlooked the estimated 250 cases similar to Noa's. These are the children with*

very complex multiple problems, such as sexual abuse, eating disorders, cutting, suicidal tendencies, autism, mild intellectual disability and severe aggression, the treatment costs of which may exceed EUR 1 million per year, in certain cases. What municipality is able to pay that sort of money? Moreover, this requires highly experienced educational staff, therapists and psychiatrists who are often not involved. And this is why these children end up in closed youth care facilities — where they do not belong. Treatment inertia then leads to them being put in solitary confinement or one-on-one supervision, something that only increases their desperation and pain and may have disastrous consequences, as was the case for Noa.'

In *De Gelderlander* newspaper, Noa's mother referred to the bureaucracy they were faced with in regard to youth care as 'maddening'. MP Lisa Westerveld heard about the bureaucratic jungle in which Noa and her parents had found themselves. At some point, Noa was rushed from her home town of Arnhem to the Accare child psychiatric clinic in the village of Smilde, because facilities closer by had no room to take her. Westerveld recounted: *'As this facility in Smilde was located outside her own region, Accare had no funding available for treating Noa — which is why, on day three, she was told she had to leave again.'* They provided Noa with some medication and discharged her within a week. Of course, it did not take long for things to go wrong again, Westerveld stated. *'When this sort of stuff happens, you really wonder: How rotten is this system?'*

CHILDREN BEING CRUSHED

It is a rotten system — one that has been fermenting for quite some time. It looks as if the bomb is about to go off. Criticism of the dysfunctional youth care system is fundamental and widespread. One of its critics, for example, is Jos de Blok, director of *BuurtZorg*, a small-scale home care organisation. He also heads the alternative youth care organisation *BuurtZorg Jong*. De Blok voiced unabashed criticism of the youth care system, in late 2018, when he attended a day-long gathering on the subject, organised by the foundation 'Stichting Beroepseer'. He said: *'We have become entangled in a web of self-interests; those of care providers, municipalities, procurement teams and sales teams. These are all people who have no clue about what is going on and who are negotiating each other on the subject of money. This occurs on a daily basis, at municipalities, insurance companies, and everywhere else. And we all have grown quite accustomed to the fact that people who are truly unfamiliar with what youth care is all about are deciding where the money should be spent.'*

There is a lot of complaining going on about how the costs of youth care are skyrocketing. But this cannot be resolved by more spending cuts, De Blok believes. Turning the system on its head is what is needed. According to De Blok, we simply and rapidly have to put a stop to those very expensive district teams and other forms of bureaucracy. *‘The solution lies in doing things completely differently. I think that many aspects could simply be eliminated. As there are many people working on the periphery of youth care who — admittedly, while all earning a living with what they are doing — are not really needed at all. Indeed, one could say, they even frustrate the process. I am in favour of radical change. If we don’t start today, we will keep muddling along and muddling through, with as a result, many more children suffering greatly in the years to come.’*

Around that time, I bumped into Remko Iedema, who until recently had been the manager of ‘youth, care and welfare’ at the Municipality of Apeldoorn, and who is currently organising procurement for care providers on behalf of eight municipalities. Thus, one could say he is part of the system. Iedema is the father of Roos, a dropout, i.e. a child that no longer attends school. His book titled *‘Baat het niet dan schaad het wel’* [No harm, yet plenty of foul, ed.] was published in June of 2019. It provides staggering insight into how even a youth manager at a large municipality failed to get the right help for his own daughter, over the course of a year and a half. To organise care for his daughter, this civil servant had to go to another municipality (Deventer) rather than the one of his workplace, due to his place of residence. Remko Iedema writes about what he and Roos’ mother went through, as parents: *‘Our journey through the system was a frustrating one. We embarked on a quest, which began with a paediatrician and eventually led us through the world of paediatrics, youth assistance and special education. Over the course of these 18 months, our funny, intelligent Roos lost her motivation to go to school. Nothing mattered to her anymore.’* Roos became a victim of the decentralisation of youth care and those arrogantly responsible, argues Iedema. *‘Meanwhile, Roos was being crushed by a system of compartmentalisation, disinterest and inhumanity — one that is filled with conceited people convinced of their own approach and their own professionalism. And they are still like that, today, I presume — and will be again, after the system crushing yet another child. They are convinced that they are not part of the problem, and so nothing changes.’* Remko Iedema confronted his civil servant colleagues in Apeldoorn with the problems he encountered at the municipality of Deventer, asking them: *‘Could this also happen at our municipality?’* The answer was ‘yes’. Something else happened as well, Iedema said: *‘The municipal council where I work began collecting stories of children and parents who had become stuck in the system.’*

Roos' story fitted in, seamlessly. A sympathetic Iedema was keen to talk to me about this system 'crushing children' and the stubbornness of those working in the youth care sector. *'Municipalities, especially the councils, are very convinced of the justification of their own approach. And when one is very convinced, there is less room for self-reflection',* he says diplomatically. Iedema is pessimistic, thinking things will not get any better, in the near future: *'I am sceptical about that. I worry that things will actually get worse. Many municipalities have large deficits. I am afraid there will be a growing urge to control the process and, thus, to increase bureaucracy rather than achieve any real improvement. I can see it happening everywhere.'* Where his daughter is concerned, things are thankfully going into the right direction, he says. *'We have finally found a solution. Roos is going to an activity day centre in Arnhem with the aim of finding her way back to school. We are optimistic about that.'* Unfortunately, there is still another hurdle to overcome, Iedema explains: *'For example, authorities will provide a solution for the duration of two months, but we are looking for one that will last a whole school year. At the municipalities, it is 'in fashion' to issue only short-term decisions. So I am going to lodge an objection to that.'*

Another example of criticism of the maddening bureaucracy and stifling rules in youth care comes from a youth care professional. A man who had worked at youth care institution De Hoenderloo Groep (DHG) for 43 years. In an email to the municipality of Apeldoorn, he wrote about the institution, where it was located, and about the disasters this bureaucracy was causing. DHG needed to close down, in his opinion, and this was his reason for sending the email. The municipality subsequently published his email on their website, omitting the man's name: *'A 17-year-old boy had made good progress with his treatment at The Hoenderloo Groep. He was able to move on to another place of residence and education. As his 'indication had expired', he needed to financially bridge three months (...). I phoned the department involved at the municipality myself to see to this, but I got nowhere. They did offer some advice...: the best thing would be for the youngster to go and see the Salvation Army. A whole year of creating structure, gradually overcoming drug addiction, and motivating him to go back to school — all of that gone with a single phone call: rules are rules. Civil servants apparently do not want to be bothered with the raw reality of everyday life and prefer to hide behind rules and protocols. So, as a social worker, what should one say to this adolescent? Something like: "How nice that you have finally managed to regain confidence in yourself and the people around you and that you have pulled yourself together again, after three years of dropping out of school... Here's the address of the nearest Salvation Army?" In my opinion, there appears to be a rather fundamental flaw in the system.'*

REPAIR THE CARE

Meanwhile, things have become so dreadful and messy on so many levels that the youth care and mental health sectors have drafted a manifesto, titled: *Lijm de Zorg* [Repair the care, ed.]. Presented in the summer of 2019, its motto reads: *'What is broken can be repaired again'*. *Lijm de Zorg* is an initiative by current and former clients in youth care and mental health care, including Louis de Mast. He is an experience expert working as a residential care counsellor of young adults with autism. *'I have been a client of both youth care and mental health care, and was hospitalised on one occasion when I needed emergency psychiatric help.'* De Mast is a marked yet combative individual, who is painting a sweeping mental picture of a better future for youth care. *Lijm de Zorg's* manifesto contains 10 areas of improvement. Along the lines of an earlier manifesto for better care for the elderly, published in 2016 by Hugo Borst, well-known columnist, and Carin Gaemers, who observed how things were going at their parents' nursing home.

Another standard-bearer for *Lijm de Zorg* is Amsterdam journalist Charlotte Bouwman, who campaigned for weeks at the Ministry of Health, Welfare and Sport in January 2020. She had taken up position in the entrance hall of the Ministry, where she sat for days on end with her dog Bobby, to draw attention to the problems in the youth and mental health care sector. Bouwman, in her mid-twenties, tried to end her life 21 times over the past eight years. She desperately wants help, but has been on a waiting list for two years because her problems are supposedly 'too complex'. She became so ill that she had to quit her job at the NRC newspaper. Charlotte Bouwman talked about that in another daily newspaper, *Het Parool*: *'There [at NRC, eds.] they said: you need to be treated first. And I do understand that.'* However, no such treatment followed. On her website, www.charlottebouwman.nl, which is full of NRC articles by her hand, Bouwman recounts her first-hand experience of how the mental health system is in crisis — with 90,000 people on the waiting list for psychiatric help. Although, meanwhile, Bouwman has become well-known and State Secretary of Health, Paul Blokhuis, spoke to her on several occasions, she is still not receiving the help she needs. Since 2020, she has attempted suicide several times and was admitted to a clinic on a number of occasions.

Some politicians have also joined the *Lijm de Zorg* movement, including MPs Lisa Westerveld and Martin Wörsdörfer (of coalition party VVD). In February 2020, in 'De Nieuws BV', a Dutch current affairs programme on the radio, Westerveld

said that partly because of her involvement with *Lijm de Zorg*, she was being approached directly by people seeking her help: *'Some young people are finding their way to Lijm de Zorg. And what we are now doing is forwarding their emails to the ministry, from where they are sent to people manning the helpdesk, who then get to work on them. These days, I feel like a cog in the referral wheel.'*

Westerveld receives countless cries for help from young people in immediate need of care. *'There are incredibly many messages from young people who have had countless rejections. Their problems are so enormous that they really need help immediately. Sometimes, when I read or hear what is going on, I wonder whether this person will still be alive the following week. These people need help now. I regularly feel guilty for having to refer them again, because their need is so great, it really cannot wait.'* They tell her about the long waiting lists for young people with complex psychiatric problems. *'I got a text message a few weeks ago from a girl I have known for some time. She was supposed to be admitted, urgently, in August. Finally, she had had her intake appointment, but a few weeks ago [five months since the intake! ed.] they called her saying, "Well, we are sorry, but your issues are too complex for us, after all." While needing immediate care, she instead had to wait another five months, only to get this rejecting phone call. Which meant she had to start from scratch again. She doesn't know which facility she should try to go to now.'* In the radio interview, Lisa Westerveld touches on yet another problem: invariably, there is a lack of accurate figures and facts about youth care. As a result, there is no general overview to determine the extent of the problems in this part of the care sector. *'At the House of Representatives, we have no idea if this concerns a few dozen, a few hundred or a few thousand young people with serious problems. We need to obtain more insight into these problems, if we are to provide any solutions.'*

3 IN PRACTICE

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'In our case, two institutions made a real mess of things. The claims lawyer told us, "You can claim funeral expenses and things like that, but that's all." But I don't need to file a claim, I don't want money. I would have wanted better care.' Lucia lost her 15-year-old daughter Patricia who was staying in a closed youth care facility in Deelen, a village in the Veluwe region. She says her daughter committed suicide at De Smaragd, a specialised group of this JeugdzorgPlus facility that is part of De Hoenderloo Groep (DHG).

Patricia hanged herself, in February 2017, using shoelaces. A horrible end to a dramatic period of years in which her parents, Gerard and Lucia, desperately and in vain had sought the right kind of care for their daughter in the province of Zeeland. It is yet another harrowing example of the current state of affair for the 180,000 children in the Netherlands who are suffering serious psychiatric problems. Instead of getting adequate and timely help, they and their parents get lost in the jungle of the youth care system.

Patricia and her parents had come up against brick walls for four years, trying to get help in the Province of Zeeland, before she was admitted to De Smaragd. In all that time, Ithaka, an institution for child and adolescent psychiatry, failed to offer adequate help. Father Gerard recounts: *'Patricia's file is this thick.* [He holds out his hands over the table to indicate a tall stack of papers, ed.]. *And when you read it, it's just one crisis after another. There is far too much waiting going on. In all those four years, there was only crisis care, without any form of treatment. It is just not available there. Thus, these children are developing more and more problems. In Zeeland, there is only one facility; there is nowhere else to go.'* Patricia's problems were too complicated for the only organisation in Zeeland to handle. She had an autistic disorder and was following special education (pre-university level, VWO, eds.). She was raped in a nearby park. Like Noa, this caused her to suffer post-traumatic stress disorder. Her mother, Lucia, says: *'The PTSD was particularly complex to treat, in combination with her autism. She had many flashbacks, and subsequently began hearing voices in her head.'* At home, things went haywire, quite often, according to Lucia. *'There was the time when she had such a bad flashback of her rape that she*

completely demolished the whole interior of the house. This is when we called Ithaka, but could not find any psychologist prepared to come. Then we called the police and they, in turn, called a psychiatrist.’ Gerard says dejectedly: ‘Who didn’t have time, didn’t come.’ Lucia: ‘Then the police stood outside the front door for another 20 minutes. As this was still a young girl, they did not want to go in, full force, to remove her from the house in such a psychotic state.’ Gerard adds: ‘They were like, “Let her rage for a while. Until she calms down a bit.” Those police officers were constantly on the phone, calling psychologists, calling their boss. And they said: “We’re not going to take her out of the house, you cannot let a girl like that just roam the streets in such an unstable situation.” Eventually they did take her away, and kept her in a holding cell for a while, waiting for the psychiatrist. I thought that was really terrible. Although those officers meant well, such a child does not belong in prison.’

These things do happen, though, even in Zeeland.

‘I MAY LOSE MY CHILD IF THIS CARRIES ON’

The main focus of attention for Patricia’s parents is Ithaka. Since the decentralisation of youth care, with municipalities at the helm, there have been more and more Patricias: children with such severe problems that they have nowhere to go for treatment, and consequently only get worse. Which is exactly what happened to Patricia, as well, as her mother recounts. *‘Because of her PTSD and re-experiences, she started severely harming herself, cutting. At times, she was suicidal or had fits of rage. This went from bad to worse. Then she would be admitted into crisis care — a few days, a few weeks. But they don’t provide treatment there; it’s basically just meant to calm a child down.’* In the end, they didn’t know what to do anymore, Lucia says: *‘We had also already called the municipality: “Listen guys, please help us, we’re at our wit’s end. If something doesn’t change soon, I’ll lose my child.”’*

And then, to make things even worse, the argument about the money started — about who should be paying for Patricia’s care: youth care or child psychiatry. This depends on the labels that are put on children. Lucia: *‘Youth care said that the youth branch of the GGZ (Dutch Association of Mental Health and Addiction Care) had to take responsibility. Because of Patricia’s autism and PTSD, because she heard voices and was sometimes psychotic. And the GGZ said that this had to do with behaviour and, therefore, was a matter for youth care. This issue was about money, about from which budget the money should be paid.’* There was then another so-called network meeting, where the professionals involved discussed the case; but again without

success, according to Lucia. *'The psychologist didn't come, the psychiatrist didn't come, the chief therapist didn't come.'* As a result, Patricia had to leave Ithaka, that much was clear. And so Lucia herself, assisted by Jeugdhulp Zeeland as this is the procurement organisation for youth care, started looking for a suitable place. *'The lady from Jeugdhulp and I just started surfing the internet. And that was when we came across De Smaragd. Especially because, on their website, they said that they were also treating children who had a psychiatric background. Which was very important to us. Patricia could get therapy there with the aid of an assistance dog, and as she loved animals, we thought this an interesting option.'* Unfortunately, this story has a fatal ending. Patricia committed suicide while at De Smaragd, in the special group of this closed care facility, despite all the intensive care. Lucia still does not understand how it could have happened. *'Your child is taken into closed youth care as well as mental health care for her own safety. And then things still go wrong. Patricia made many suicide attempts, especially during her last weeks at Hoenderloo. She tried to strangle herself on a Sunday and the next Monday she succeeded and died. How was it possible for her to end up back in her room with those same laces? That is something that I keep wondering about. Obviously, they never intended for my child to die. Of course they didn't. These are the people working there in the group. But how on earth can something like that happen?'*

THE COMPLAINT

Gerard and Lucia do not want anger to dictate what they do. But, in June 2017, four months after Patricia's death, these parents nevertheless did lodge an extensive complaint. Not addressed at De Hoenderloo Groep where Patricia died, but at Ithaka (and parent organisation Emergis), where all the difficulties with their daughter continued for years on end. Hoping, as they emphatically stated, that their complaint would help improve the youth care provided by this institution. An excerpt from Patricia's parents' complaint to Ithaka: *'We, the parents of our beautiful daughter Patricia, are filing a complaint against Dr XX [anonymised, ed.]. Patricia was known at Ithaka for over a period of four years, during which her complaints were not taken seriously, thus preventing her from receiving the treatment she needed. The transfer to De Smaragd, unfortunately, was to no avail. Patricia passed away on 20 February 2017 by committing suicide. She was no longer able to cope with the voices inside her head.'*

The parents further raised the point that, instead of the institution taking Patricia's complaints seriously, they in fact only provided 'crisis care', on

multiple occasions: *'Without any of these stays in crisis care being followed up by a suitable treatment plan or a referral to the appropriate treatment setting. We consider Dr XX as the responsible therapist accountable for this failure.'* The complaints committee took the parents of this girl 'with autism, emotion regulation issues and sexual trauma' extremely seriously. The committee was highly critical, writing: *'It is debatable whether Ithika was at all able to provide the right type of counselling for Patricia.'* Patricia's parents were vindicated on all fronts by the complaints officer. However, whether their complaint actually led to improvements to the care provided by Ithika in Zeeland remains to be seen.

The problems facing the youth care sector are large and persistent: waiting lists are everywhere, as are changes in therapists, incorrect problem assessments and insufficient cooperation and communication with parents. These things, therefore, quite often lead to the wrong kind of help being offered, or help arriving either too late or not at all. Whether the institutions involved are blaming themselves when things go wrong is also uncertain. In any case, following the parents' complaint about Patricia's treatment and suicide, the Executive Board of the care institution Ithika/Emergis comes across as not very empathetic. After the damning verdict issued by the complaints committee, the Board sent a short and businesslike letter that stated. *'In the opinion of the complaints committee, what was lacking above all was proactive management, perseverance in bringing together all parties involved, and providing day care when crisis care turned out to be needed for longer than is customary. With regard to leadership and tenaciously uniting all those involved, including external parties, we have now decided to change Ithika's management. This new management has been awarded a greater mandate and more responsibilities to ensure faster and more active coordination and communication between all parties involved, especially in more complex cases such as that of Patricia.'* The Board simply removed the management, but did not utter any words of sympathy, apology or regret.

MEASURES

After Patricia's suicide, the Health and Youth Care Inspectorate (IGJ) also launched an investigation, which is common practice in cases of suicide in a youth care facility. This also took a very long time; their report took a year to complete. According to Lucia, the delay was unnecessarily long because the facility was not cooperating with the investigation: *'Hoenderloo stopped everything. The inspector was really very toxic.'*

What bothers Patricia's parents the most is that DHG was allowed to add an appendix to this report to state which improvement measures they had already taken after their daughter's suicide. An outraged Lucia recounts: *'They did not implement any measures until after Patricia's death, but Hoenderloo still indignantly said: 'Now that we are already working on improvements we still get such a bad report.'* De Hoenderloo Groep (DHG), part of the larger Pluryn organisation, did indeed take certain measures. They could hardly do otherwise. Because Patricia's death was the second suicide in this closed care facility in a single year. One of the measures they took was to replace the management, as Ithaka had also done in Zeeland. Director Erwin Duits was transferred to 'Intermetzo' in Eefde, another Pluryn closed youth care facility. Whether that was justified? Was this a case of bad management? Could the suicide at De Smaragd have been prevented? In any case, Patricia's suicide had a huge impact on the director. Erwin Duits was deeply upset by Patricia's death, as he explained in a lengthy interview. *'That girl had an enormous impact on me. I was the first of the management staff to arrive on the spot. It affected me so much. When you experience such a thing and from this close up, all you can think is: never again, never again.'* But it happened to him once more, shortly afterwards. Soon after Duits had been appointed director of Intermetzo, an adolescent there committed suicide by hanging, using a belt.

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***'Then you see
grown men and
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For parents, a child's suicide is something they cannot get over. Especially when this happens at a closed care facility that is supposed to keep their child safe. Erwin Duits is very aware of this. But it is also very traumatic for the staff, as he thinks should be pointed out at least once. In particular, for staff members who provided very intensive care at the innovative closed care group De Smaragd. Patricia had come from Zeeland to Deelen, for the very reason that De Smaragd was an innovative initiative within closed youth care. De Smaragd was especially intended for young people with complex problems who had nowhere left to go. It also offered special forms of therapy, such as with assistance dogs, and sometimes they also counselled children one-on-one. The overall aim was to prepare these children for a life outside a closed youth care facility.

Despite such intensive treatment, suicide cannot always be prevented, Erwin Duits stated, and it always has a massive impact. *'You see the emotions of the parents, of course, but also of the care providers. They don't take this kind of job to see children*

hang themselves. You see these grown men and women crying. They feel they have failed, as they were unable to help such a young person — in spite of their dedication.’ Duits was particularly displeased with the report by the Inspectorate, which states that, in the beginning of her stay, Patricia made several suicide attempts, sometimes several in one day. The Inspectorate passes critical judgement: the psychiatrist, the chief therapist, was not present at the weekly consultation meetings with the team. And the doubts at DHG about whether they would be able to properly treat Patricia had not been shared with the parents. The Inspectorate looked at length at the ‘suicide protocol’ across the entire De Hoenderloo Groep. They found that suicide attempts were not recorded and evaluated carefully enough, and that staff seemed insufficiently trained in suicide prevention. Director Duits was especially agitated about this last point of criticism. *‘Do you know what the main criticism was? This made me so angry, the report said: “The suicide protocol is not up to standard.” What is that about — what the hell is that all about? Basically, we are being taken to task for not having our bureaucratic processes in order. That’s how it sounds to me.’* Because, Duits believes, there was nothing wrong with the suicide policy at De Smaragd, including with respect to Patricia. *‘Our child and adolescent psychiatrist was continually involved. To me, that is far more important than being able to tick boxes and filing reports. That is what I call overly bureaucratic. And then there is the intimidation of an institution — that if I can’t tick a particular box, then I’ve done the wrong thing.’*

‘CONTACT-INDUCED HELP’

Niels Eemstra, former team supervisor at De Smaragd Groep, still believes in this innovative form of closed youth care. We are sitting at an outdoor café, in the spring sunshine, near the location of De Hoenderloo Groep. Eemstra is a friendly, ambitious young man with a mission. He explains how he and his colleagues were actually very encouraged by director Erwin Duits who facilitated this alternative method to traditional closed youth care. Those traditional institutions are almost like prisons, where children are forcibly admitted but do not get any better. Not only are they not getting any better, they end up in a worse state than when they arrived, as countless experts point out and as is also shown by the many stories in *Wards of State*.

Niels Eemstra is highly critical of JeugdzorgPlus, the intensive youth care regime. According to him, the large institutions with repression and solitary confinement

cells are simply not suitable *'for a child suffering from trauma who is also dealing with a host of other problems'*. That is why he was glad to be given the opportunity to do things differently at De Smaragd. *'De Smaragd was especially for these types of children, who are ill and just need to be helped. Those who are misunderstood and don't fit into any category in our system, and who, therefore, otherwise literally and figuratively end up being locked up. That's why we started De Smaragd — without doors that lock, without solitary confinement. From the principle of making contact.'* Eemstra often spoke about his vision on this different form of closed youth care. He held enthusiastic talks about De Smaragd, on many occasions. At the same time, he also kept emphasising that the very large, expensive buildings in which all youth care institutions are housed are a financial burden and obstacle to the alternative care in small groups, such as at De Smaragd.

Jason, a well-known ward of state, spent the last four months of his institutional care at De Smaragd. This was thanks to a meeting of experts in Amsterdam where adolescents with complex problems were discussed. Niels Eemstra of DHG was one of the participants. After going from one youth care facility and psychiatric clinic to another, Jason finally ended up at De Smaragd. Indeed, Jason, who has extensive personal experience with JeugdzorgPlus, speaks about De Smaragd in milder terms than he does about two other closed care facilities where he stayed before: De Koppeling in Amsterdam and 't Anker in Harreveld. De Smaragd resulted in a turnaround for Jason, as he indicated in October 2016, in newspaper Trouw. Jason, who is transgender, gave an interview (at the time still as the girl Latisha) titled *'Diary from Youth Care'*. *'In Harreveld, I was still in anti-tear clothing in solitary confinement, whereas at De Smaragd I was given normal clothes again. Suddenly, there were caring staff who were acting normal towards me,'* according to Jason.

This diary, in which Jason talks about the violence, aggression and humiliation in closed care facilities, also identifies problems at De Smaragd. But irrespective of the mention of those problems, the diary was published at the initiative of DHG director Erwin Duits. The innovative and costly initiative nevertheless died a silent death, a year after my conversation with the inspired Niels Eemstra. De Smaragd, which even saw a visit by the Minister of Health because it was heralded as a showpiece of closed youth care, is no longer in operation today. Before De Smaragd had to close, Eemstra had already left. In fact, he left the youth care sector altogether.

'EXPERTISE NOT ALWAYS SUFFICIENT'

The Inspectorate was very critical of the 'suicide protocol' at the closed care institution DHG, and for good reason. It touches on the fundamental issue that this closed youth care facility has seen an increase in the number of suicides in recent years. There were quite a few suicides in Gelderland's Veluwe region, where many care institutions were traditionally located because the land was cheap there, because of the sandy soil. Within a short time, between November 2018 and early 2019, two young people also committed suicide at another closed care facility in Gelderland, the Ottho Gerhard Heldring Foundation (OGH) in Zetten. In those cases, the Inspectorate also ruled harshly. Both times, they found the staff lacking in knowledge about the complex psychiatric problems of the young people in JeugdzorgPlus in Zetten. And according to the Health and Youth Care Inspectorate (IGJ), the educational staff were also not sufficiently 'trained in suicide prevention'.

The Inspectorate not only criticises the closed care institution where adolescents have committed suicide, it is also and explicitly lashing out at the municipalities involved; those responsible for youth care. The Inspectorate's report of 21 November 2019 on a suicide that happened earlier in OGH states that this young person, after admission, had to wait 'several months' for psycho-education, therapy and social support. *'One of the Inspectorate's conclusions is that there are waiting lists for some forms of treatment during people's stay in closed youth care. This conclusion not only affects the organisation concerned, but it is also a clear signal to the municipality. They are responsible for the availability of the appropriate type of help.'* And that is all too often not the case, these days. This particular young person really should have been admitted to a psychiatric clinic, according to the Inspectorate. However, at the time, this was not an option *'due to a capacity shortage.'*

'MONEY FOR BRACES IS NO PROBLEM'

Whether they are called Noa or Patricia, or the far more impersonal 'juveniles' in reports by the Inspectorate, all are young people with very complex, often psychiatric problems, who increasingly are not receiving the type of care they need. In early 2018, Manon Hillegers, Professor of Child Psychiatry at the Erasmus Medical Centre in Rotterdam, described how in the Netherlands a child with acute appendicitis and impending perforation is operated on immediately,

in the middle of the night if need be. A child with psychiatric problems, however, is not getting the right kind of help. Hillegers spoke about this in her oration 'Our precious children'. Using the example of a girl named Eva, she illustrated that fact that good psychiatric care is currently lacking. One night, Eva was sent to hospital by her GP because she had been lying in bed for days, had stopped eating and was hinting at suicide. According to Hillegers, *'Her parents were afraid to face another night like this and were very worried, but, based on a physical examination, the paediatrician saw no reason for admission.'* The psychiatrist on crisis care duty, however, did not agree. *'In his report, he described a severely depressed, suicidal adolescent with likely also an eating disorder. He indicated hospitalisation. Eva and her parents agreed. Meanwhile, the search was on for an admission bed within or even outside the region. After two hours of phoning around, it became clear that there was no place available anywhere in the entire country.'*

This is how things go, these days, said Professor Hillegers. *'Unfortunately, the search for an admission bed for a seriously ill child with psychiatric problems is a common occurrence. Colleagues spend hours searching the entire country, looking for a place for their young patients. Parents are posting desperate messages on Facebook and/or send videos of their sick child to their municipal council member.'* Hillegers made another illustrative comparison: half of all young people in the Netherlands have braces, purely for cosmetic reasons. These braces cost around EUR 2,500, but we do not consider that to be overly expensive. For the treatment of children with cancer, anything is possible. In child oncology, the sky is the limit. In child psychiatry, however, this is certainly no longer the case. *'The Princess Máxima Center for Pediatric Oncology costs almost EUR 200 million. Many private stakeholders, in addition to the national government, have contributed to this. Grants are readily provided for the approximately 550 children who get cancer, every year. But do you realise that about 180,000 children (that is 5% of all children in the Netherlands) have a psychiatric condition that leads to severe limitations in their functioning or increased risk of disturbed development? For these children, good quality care with continuity in therapists is no longer a given, these days,'* according to Hillegers.

THE MERRY-GO-ROUND

The problem of this inadequate psychiatric care for children also has its origins in the new Child and Youth Act. As it is no longer the health insurers but the municipalities who are paying for child and adolescent psychiatry, referrals to

specialists are no longer decided on by physicians, such as GPs, but rather by municipal district teams. This is what critics call the 'flaw' in the new Child and Youth Act of 2015. As a result, things are often totally out of control. On top of that, there are increasingly fewer places for children in psychiatric clinics. Not only as a result of budget cuts, but also because of the increasingly popular belief that children are better off being treated as outpatients, from home, rather than in a psychiatric ward. Accare, a psychiatric care institution headquartered in Assen, has fewer admission places available at its facilities because of this belief, as was explained by child psychiatrist and director Peter Dijkshoorn: *'Over the course of about eight years, we reduced our number of beds from 140 to 45.'* In practice, however, due to long waiting lists or errors of judgement, such 'outpatient' treatment for children either does not get off the ground at all or comes far too late. Thus, the problems of young people with psychiatric disorders are piling up and lead to serious crisis situations, with children being sent from pillar to post.

Jason, one of the wards of state, was also on this 'merry-go-round'. He went to five closed care facilities in a single year, having to deal with 130 different social workers. In youth care, this is what is known as the merry-go-round. Experts, including Peer van der Helm, are disheartened by the continued increase in the numbers of transfers. Children keep seeing new physicians, therapists and care providers. As a result, these children, who are already damaged, are losing their faith in youth care and in adults in general. Van der Helm: *'We now have a 16-year-old in a family care home who has been to 22 different facilities. My record is 42 transfers for one boy in a single year.'*

TOUGH AND UNDERPAID

There is another major reason for poor youth care. Youth care facilities are facing staffing problems. A job in youth care, including in institutions, is difficult and unattractive. People work very hard, but wages are low and staff receive a lot of criticism. Reason for many care workers to leave the sector, or to move to a municipality. There, the pay is better, they no longer have to work hands-on in the trenches and irregular shifts are a thing of the past. Therefore, staff turnover in the youth care sector is huge, which is a structural, almost insurmountable problem.

Debbie is someone who switched from being a hands-on care worker to working for the municipality. She used to work as a family guardian (now called a youth protection worker) at a youth care crisis service. *'Days and nights.'* Two years before the decentralisation of youth care, Debbie changed jobs and went to work for a large municipality as a youth care organiser. She is a committed professional woman, whose real name is not provided here, because of her position. Civil servants and municipal council members could do with more 'substantive knowledge' about youth care, Debbie explained diplomatically when talking about her move to the municipality. She gave the following example: *'At city hall, youth care is managed by a council member. There are policy officers who are unfamiliar with what happens in practice. People with good ideas, heart for the cause and the best of intentions. But they are also all very busy working on tenders.'* Debbie's role is one of an intermediary between policy officers and 'implementation' — the people providing youth assistance in practice. She, too, has seen things going wrong in the sector. *'Waiting lists are increasing again, the entire municipal budget has been cut by 15%. That means that the number of places/beds [in institutions, eds.] has also reduced. From the expectation of providing far more out-patient care.'* However, this expectation did not become reality. Debbie: *'Thus, children are sitting at home waiting for much needed help, and I mean real crisis care. But even the district team, which tries to prevent an out-of-home placement, has a waiting list of sometimes up to seven months.'*

One of the goals of decentralisation, besides being a cost-saving measure, was also and particularly to do things differently: 'providing care up close' and 'achieving more coherent care'. After all, by the time a district team becomes involved, families are often already facing multiple problems. Such a cocktail of problems may consist of financial debts, parenting problems and addiction. The Child and Youth Act is about tackling everything in coherence. But, as Debbie has learned from experience, integrating all the help that is needed is difficult to achieve in practice. Because, although the law has changed, there have been no fundamental changes in the workings of the youth care sector itself. According to Debbie, organisations involved are all still applying their own methods.

Furthermore, since the decentralisation, the focus has mainly been on patients' *own strength*, meaning the support and help from their family or friends and those around them. To a far too large degree, according to a critical Debbie. This is not realistic. *'Society has become greatly individualised. Even I have almost no contact with my neighbours here, and I am a healthy, social person. People with all sorts of problems*

often don't have the capacity to ask their neighbours for help. But this is exactly what the government expects them to do. I find that a strange thought.' As a care organiser, she is seeing the problems in families pile up, and how this is ultimately at the expense of the children. This is how history repeats itself, Debbie believes. *'We keep changing the system. Each time, we conclude that it is not working as expected, and then we change it yet again. This decentralisation has not provided us with the time needed to effectuate a change in culture. We believe that, in theory, young people should not be under supervision for too long, and that, ideally, they should not be placed in a closed care facility. That there should be much more prevention, with a minimal amount of care that is provided as up close as possible. But, in practice, we continue to see young people being placed out of home simply because there is no other type of care available. This has largely to do with money, which is also true in our city. In the end, because the right kind of care cannot be provided, things are getting completely out of hand.'*

SMART REPORTING

I met Henk ten Berge at a youth care seminar held at the *Stichting Beroepseer*, the foundation on professional ethics, in Ulft. Amongst the attending municipal council members, civil servants, managers and youth care procurement staff, this friendly bearded man, well into his sixties, wearing a grey herringbone cap, was a striking figure. He also stood out for his calmness. During a chat we had, in-between sessions, Ten Berge said *'I've let myself be scaled down'* — this kept playing through my head in the weeks that followed. We therefore spoke again, at a later date. He personifies the huge workload, or caseload as it is called in this sector, which all youth workers have to deal with. And this is also the leitmotiv in all the interviews I conducted for *Wards of State*. At the time of our talk, Henk ten Berge was working for several employers, and was experiencing this heavy workload at all of them. He further explained his earlier statement about having been 'scaled down'. *'I was working as an ambulant therapist, providing intensive family care. This means you really treat people.'* In an ironic tone of voice, he added: *'But the current level of intensiveness means that the actual care given has been completely eroded.'* He was referring to the enormous bureaucracy everyone is talking about. *'The job also involves having many conversations, writing treatment plans in a certain system, applying a specific healthcare jargon. My supervisors all say that this is just part of the job, but it's not for me.'*

According to Ten Berge, all this writing is utter nonsense. *'I have to apply smart reporting. That's a typical healthcare term, it all has to be measurable. I have to write lots and lots of pages so that people who also have to have an opinion on the matter can see and read what is going on with my client. But it feels pointless, because everything is already known, as my client has long since been diagnosed.'* Ten Berge further clarified the nonsense of all that reporting. He was working mostly with people with intellectual disabilities, or young people with autism. *'These youngsters do not have a broken leg that will heal. They have something that will never heal. Their condition is for life.'* And, thus, all those obligatory kitchen table talks that municipal district teams are holding about the various types of support for these people are also pure nonsense, AND a waste of time, he thought. In fact, they are mainly about financing the care. A critical Ten Berge concluded: *'In the end, it's all about the money.'*

He does believe that things are now going slightly better at the municipalities, although, since the decentralisation, he has mainly been confronted by officials who have no professional care experience. Henk ten Berge explained the undesirable situations that this may lead to because these officials are mainly concerned with keeping expenditures as low as possible. *'They award fewer hours for youth care, while I need more. Those officials are briefed about what to say or not say about certain things. They will literally tell you: "If we do as you ask for everyone, the municipality would be bankrupt in five years", but, Ten Berge laughed, 'Then I just say: and what would happen if the municipality goes bankrupt? Would we stop providing care altogether? Would we just leave those clients to fend for themselves?'*

Eventually, even this experienced and laid-back Henk ten Berge fell victim to a burnout. *'I lost sight of the overall picture. I regularly felt that I had too much on my plate. People kept making demands. I'm currently working with the third new computer system at my main employer. The reports have to be in a certain format. That's heaps of work. And then, on a Friday evening, my supervisor contacts me and says: "Look, I've got some great news about how the computer could make our work even easier." And then you get yet another new format. For the clients I supervise, my phone is never turned off, not even on the weekends. They have to be able to rely on me. But working unpaid at the weekend for a new format?'*

Youth care worker 'Linda', also someone who did not want to use her real name, talked about the huge workload she was experiencing. *'Youth protection is the toughest job in youth care. We always have to go the extra mile. Care workers are*

probably the type of people who keep going, because they don't want to quite. I have had several managers in one year, every time a new team was being formed. You get to a point where you think: Right... and your name is...?' And then there is the caseload she has to deal with. 'We meet once a week. So we deal with dozens of cases in a couple of hours, where you are allowed to only discuss the most urgent matters,' Linda said this is simply impossible. 'In one of those multidisciplinary meetings I have to discuss that I want to apply for help for a certain child. Crises and near-crises are discussed there. So those get priority. If I want to discuss one of 'my' children who is not in crisis, but who does need home support, it often doesn't fit within the time that is available for that meeting.' as she explained. And that is very frustrating: 'You want to be meticulous about how you do everything. The heavy aspects of the work make that you are always short on time. I feel like I'm negotiating ice sheets, every day. It should feel like a solid base, but instead I keep stumbling.'

THROWING CHAIRS

There are so many different disaster stories about youth care, coming from all angles within the sector. The Minister of Health remains optimistic. In June 2019, in the Dutch medical journal *Medisch Contact*, he talked about the drastic system change in youth care, saying: *'I have not become disheartened about the decentralisation.'* The Netherlands' Ombudsman for Children, Margrite Kalverboer, on the other hand, holds the opposite view. In March 2019, she wrote him this pithy letter about the problems in youth care:

'Dear Mr De Jonge,

As the Ombudsman for Children, it is my statutory duty to advise you on legislation and policy that is affecting the interests of children. In recent months, I received many signals that the problems in youth assistance, youth protection, youth mental health care, and special education are piling up. From these signals I deduce that, despite our efforts in various domains, we are collectively failing to ensure the development, safety and perspective of a large group of children. This deeply concerns me.'

Her examples include organisations with which parents fail to make any progress and the waiting lists they face. Kalverboer: *'A growing number of children are having to wait for specialist care even when their situation is critical.'* In her letter, she is also deeply concerned about the crucial role that money plays in youth care: *'Continuity and quality care are at risk because of financial pressures and obstructive*

tendering procedures. All too often, I hear about children who are not receiving the appropriate care because it is not clear who is responsible or because their particular type of care has not been procured.' The situation is serious, argues Kalverboer: *'Acting in the best interest of a child is being complicated by systems, laws, rules, agreements, organisational interests and financial impossibilities.'*

The Ombudsman points to the increasing workload as another major problem, which the social workers are all talking about. Kalverboer says: *'Experienced staff are leaving the care sector and younger staff go to work feeling anxious because they are insufficiently equipped to act in the event of escalating situations nor can they ensure the safety of the children in their care.'* A supervisor who worked in the closed youth care facility Schakenbosch in Leidschendam, who also wishes to remain anonymous, fully agreed. He knows that, due to a lack of staff and because of the many temporary and inexperienced staff who are working in the groups, situations do get out of hand. *'It's very busy, it's chaotic. Staff are running behind all the time.'*

I heard the same from lecturer Peer van der Helm about this very facility: *'A social pedagogical assistance student of mine went to work at Schakenbosch. When I met her she said that, in the two months that she had been working there, she had not yet worked one shift with permanent staff. See how those institutions are completely out of their depth. No permanent staff available, all temporary workers.'* This is bound to lead to aggression, especially in a closed care facility where there are children with serious problems, says Van der Helm: *'This is, of course, disastrous for these kids; if, every day, they have a different supervisor in front of them, they will start throwing chairs around.'*

4 TRUTH

‘The facts are constantly being distorted. No efforts are made to uncover the truth. Cases are twisted in such a way that Bureau Jeugdzorg [Dutch youth care organisation, ed.] and the Child Care and Protection Board always appear to be in the right. They have to be, as they are designated by law as the expert organisations. Judges, therefore, should be able to rely on what they say.’ Desiree van Doremalen speaks from experience. She has children ‘with a disorder’, as she calls it. Ten years ago, one of her sons went off the rails so badly that Bureau Jeugdzorg asked the Child Care and Protection Board to investigate whether the court could issue a supervision order (OTS). *‘This is when a family guardian comes in to advise and assist with the upbringing and monitors the situation to make sure things don’t escalate,’* Van Doremalen explains. She and her husband, who have been married for more than 30 years, eventually managed to avert the threat of OTS with out-of-home placement. Most parents are unsuccessful in doing so, says Van Doremalen, who is assisting those parents. She became the support and advocate of the fathers and mothers who are forced to fight against the government; against unjustified OTS rulings or — even worse — out-of-home placements.

The latter happens very often in the Netherlands. In 2020, about 46,000 children were no longer living with their parents. This was partly due to the social security supplements scandal (2013–2019) at the Dutch Tax and Customs Administration, which prosecuted tens of thousands of families, unsubstantiated, for fraud and, thus, presented them with severe, negative consequences. As a result, at least another thousand and probably as many as fifteen hundred children were placed out of home. Every year, some 30,000 parents and children face a supervision order (OTS). The bad thing is that, according to Van Doremalen, 80% of these rulings are unjustified, because the organisations involved in such a decision are not diligently investigating what is actually going on in those families. In other words, because the youth care organisations are not focused on fact-finding.

For our talk, Desiree van Doremalen welcomed me warmly to her home in the city of Maassluis; the names of her four family members prominently displayed on a nameplate at the front door. It was a scorchingly hot day, but inside there was coffee and fresh apple turnovers.

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***'80% of
supervision
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Van Doremalen explains how she and her husband wanted the right type of youth care at home, instead of removing the child from its home. The son in question has autism and ADHD. He had been getting help for this for a long time, which was paid for from his personal health budget (PHB). Nevertheless, he was not doing well and Bureau Jeugdzorg wanted to intervene because they felt he was becoming uncontrollable. They intended to place him out of home and under supervision. Van Doremalen and her husband, however, objected and did not believe this to be the right solution to the serious problems that had arisen. Van Doremalen: *'So I said: "No OTS, and instead a wider scope of care, to be provided at home." But Bureau Jeugdzorg was unwavering; they found I was being difficult and had a big mouth.'*

Bureau Jeugdzorg, thus, simply proceeded with the legal OTS procedure. Whereupon the parents hired a good juvenile lawyer. And with success, as Desiree van Doremalen explains: *'This resulted in a new examination by a child psychiatrist, who concluded that an out-of-home placement with OTS was only going to cause greater harm. Our son's case was not about uncontrollable behaviour but rather about what would be the right type of care. We won the case. The court ruled that our son's care budget (PHB) had to be increased, and more care had to be provided at his home. In our case, Bureau Jeugdzorg and the Child Care and Protection Board had to back down.'*

Most parents, however, are unable to wage such a complicated and sometimes costly battle, says Van Doremalen. And so their children do face OTS, sometimes followed by out-of-home placement. In some cases, parents lose custody of their child altogether by means of an official removal of parental responsibility. The Van Doremalens were spared all this, but only because Desiree was able to combat the dreaded Bureau Jeugdzorg: *'I always kept my cool, staying polite and correct. You cannot shout at them, because that is when they have you over a barrel. I always stuck to pointing out the facts and insisting that we should base any decisions only on those facts.'*

In addition, Van Doremalen also always stayed in control during the investigation carried out by youth care services. Doing so is absolutely vital, she explained. *'Usually, they get their information from talking to everyone involved. I worked around this by telling them they could submit their questions in writing and would receive only written answers — from the school, from us, and from any other informants. In that way, people's words could not be twisted.'* She adds: *'But, you know, some parents are not smart enough to do that,'* at which point they become victims of the system. But not the Van Doremalens. After they succeeded in keeping their child at home, Desiree began, as she calls it, dabbling in assisting other parents who had come into conflict with youth care services. *'After that, more and more people with problems with youth care organisations came to me, asking for my help. In doing so, my approach has always been: "I can only help you if I can have the complete dossier." I study these dossiers in great detail and, as I am not a legal practitioner, I often put a lawyer on such a case.'*

It is quite common for parents who have come up against Bureau Jeugdzorg or the Child Care and Protection Board to do so without the help of a lawyer. But they should, according to Van Doremalen: *'Because in child protection cases, you are actually being subpoenaed by the government. The Child Care and Protection Board conducts the investigation, this is the Ministry of Justice.'* Parents should automatically receive advice from a juvenile lawyer paid for by the government, according to Van Doremalen who finds it rather peculiar that this is not common practice. She draws the following comparison: in criminal law, every suspect has the right to be assisted by a lawyer at the government's expense (i.e. legal aid), whereas parents who unwittingly become involved in a court case about their children do not have that right. That is an unfair situation, according to Van Doremalen. *'As a parent, you get no legal support. Indeed, you are often not even informed by the organisations that you have the right to be supported by a confidential advisor or a lawyer. Parents become disenfranchised at such hearings; they go there like lambs to the slaughter.'*

FACT-FINDING

Desiree van Doremalen is combative, which is what she is known for in the youth care sector. A conference on youth care? Van Doremalen will be there. A wrongdoing? She will comment about it on the Internet. A report? Van Doremalen is usually amongst the first to get her hands on it. A hearing? She will

sit in. Experts? She is in contact with them. Client interests in youth care? Desiree van Doremalen will get involved. Any news? She will text about it, straight away, sharing the information with anyone who needs to understand youth care issues. She assists parents from her position as an experience expert. Van Doremalen is also Chair of the recently established *Foundation Justice Wards of State*. Her involvement with parents, Van Doremalen said, is aimed at finding the right strategy in their relationship with youth care. Relevant questions include: *'How do you stay out of the clutches of youth care? How can you work with this parent for as long as possible to ensure that an OTS or out-of-home placement does not occur?'* As she emphasises, she is not categorically against out-of-home placements. *'Sometimes it is necessary. I'm not saying that we should become a country without any child protection measures. Some children just really can't live at home.'* There are however immense disadvantages to out-of-home placement, as she points out: *'It almost always leads to attachment disorder and trauma, as children are torn away from their biological parents. And then they all talk about detachment, but it is Bureau Jeugdzorg itself that triggers such detachment. Because what happens is that a child is placed out of home, the biological parents are allowed to only visit once a week for two hours, if the child is in a foster home this is even less often. And then, after six months or a year, a review is conducted that concludes: "The child has bonded to the current situation." While it was youth care itself that initiated this parental detachment. Youth care promotes parental alienation.'*

It does this to many thousands of children, every year. While, very often, there would be no need for taking such harsh measures. Van Doremalen: *'I dare to say that 80% of OTS and out-of-home placements are simply unnecessary. We have this many OTS rulings because of the way the process often goes. The biggest problem in youth care is that of the behavioural scientists in a multidisciplinary team formulating an advice about a child without ever having seen, spoken or examined that particular child. They do everything on the basis of assumptions that have been made by the family guardian.'* What is lacking is fact-finding, a search for the truth, as many conversations about this subject have indicated. The problem is large and of all ages. In 2015, the right to a proper fact-finding process was enshrined in the New Child and Youth Act, but the situation nevertheless did not improve.

There is a fundamental problem, explains Harry Berndsen. He studied social work and graduated from Leiden University. He is currently retired, but still very active as a researcher and mediator, also in youth care. Berndsen knows from personal experience and his research why this fact-finding is in such a poor

state. *'The core problem of youth care is that the people who work there all call themselves council researchers, Veilig Thuis investigators or family guardians, while they are not up to the task,'* as he explains in an interview. Berndsen argues that most of the people working in youth care are intermediate or higher vocational education graduates. And they are insufficiently trained in drafting good reports. *'Their job is to uncover the facts; this, you learn at university. I know what I am talking about, as I followed both higher vocational education and went to university. I know the difference. These youth care staff members are no good at fact-finding. They will conduct interviews and then conclude: 'This is what the interviewee said.' But that is not fact-finding. These people should not be put in charge of such a task — this is a big systemic failure that makes everything go wrong in terms of reporting and informing the juvenile court. Which, in turn, causes terribly stupid measures being applied.'*

It is a common complaint that, while youth care workers have far-reaching powers, they are not competent enough to carry out these very demanding tasks. It already starts to go wrong from the moment they need to have conversations with parents, Berndsen argues. *'What matters most is having the ability to conduct the difficult, conflict-related conversations. These people are simply unequipped to do so. They have not been trained in that area.'* And then things go wrong and escalate. *'After which enormous defence mechanisms become triggered, particularly amongst uncertain family guardians or insecure investigators. If someone is even just a little bit critical, they will say, "Oh dear, you're starting an argument" and "So, you don't want to cooperate", followed by "Well then, we'll take it to the judge". Their substandard level is truly unbelievable. Of all the family guardians I know, only 5% are up to standard. It's really quite appalling.'*

CHAIN INFANTILISM

In 2017, Harry Berndsen wrote a manifesto on chain infantilism in youth care (*'Keteninfantiliteit in de jeugdzorg'*) about this fundamental problem. In it, he describes what goes wrong in uncovering the truth: *'Conflicts between neighbours, family members and bitter divorces are increasingly causing false reports being submitted. Allegations of domestic violence, child abuse and sexual abuse of young minors are overzealously taken on board by the authorities. Stigmatising individuals by attributing psychiatric disorders to them is also a common occurrence. Disorders such as borderline personality disorder and narcissism are fairly popular diagnoses that seem to be increasing hand over fist. Thwarting someone by reporting them to Veilig Thuis is*

the overriding motive. Veilig Thuis [abuse hotline, ed.] tends to take these false reports too seriously, with all the emotions and stress that this entails for the wrongly accused.' On the basis of gossip, parents are often wrongly convicted by a children's judge, followed by an OTS ruling or out-of-home placement for their children. Berndsen puts it this way: *'For minors and their parents, very drastic and traumatic decisions are usually made on the basis of very shaky facts or are built on quicksand.'*

Also in 2017, Berndsen studied dossiers of parents accused of child abuse for a TV programme (titled 'De Monitor'). In only 8 dossiers, he found 189 (!) untruths — the nasty result of cutting and pasting misinformation. *'An error in the report of Veilig Thuis is literally copied into the report of the Child Care and Protection Board and subsequently also in the report of youth protection services. And will remain in place for years.'* During the TV programme of investigative journalism, Berndsen gave an example of such a situation. First, a psychiatrist declared that there was nothing wrong with a certain woman, her general practitioner confirmed this conclusion, and a social psychiatric nurse declared in writing: *'This lady is a normal healthy vital woman who is fighting for her two children, because they have been placed out of home.'* Berndsen describes how, despite these professional declarations, things can still go wrong: *'Then a family guardian, who is not authorised to pass judgement over psychiatric information, comes along and is quoted as saying: "At this point in time, Bureau Jeugdzorg has the impression that you suffer from psychiatric or psychosocial problems." This is just something concocted by the guardian,'* Berndsen continues, which, of course, is definitely the wrong thing to do. *'He simply made it up, he couldn't be making such diagnoses, as he is not qualified or competent to do so.'* However, such a fabricated diagnosis finds its way into the dossier — and remains there. Another example of 'chain infantilism', Berndsen says: *'It is a process during which the various links in the youth care chain adopt each other's futile comments and untruths without thinking, out of incompetence, laziness or with intention (i.e. deception).'*

POLITICS

Fact-finding in youth care is a recurring theme, also in politics, and countless studies and reports have been published on the subject in recent years. Already in late 2013, the then Ombudsman for Children, Marc Dullaert, published a report of over 100 pages, an analysis of a fact-finding study on far-reaching youth care decisions with serious consequences (*'Is de zorg gegrond? Analyse van het feitenonderzoek aan de basis van ingrijpende jeugdzorgbeslissingen'*). It starts as

follows: *'Every child has the right to live and grow up with their parents. Parents must ensure that children can grow up well. This is stated in the United Nations Convention on the Rights of the Child. If parents are unable to provide this environment, the government is obliged to help. Often a slight push in the right direction will be enough, but in other cases far-reaching measures may be necessary.'* These far-reaching measures are often not based on true facts, the Children's Ombudsman argues. He acknowledges that there are serious mistakes made with respect to fact-finding in youth care, mistakes that have major consequences. Dullaert: *'Youth care is about human judgement and therefore also involves human error. The tragic thing is that errors made in youth care can have a huge impact on children and their parents.'*

And so, according to the Children's Ombudsman, there should be a clear framework within which fact-finding should take place. That was in 2013. The matter remained a regular topic of political discussion. In the past, MP Vera Bergkamp (D66), for instance, was heavily involved in it. She was partly responsible for the right to fact-finding being enshrined in the Child and Youth Act in 2015. However, this nevertheless was still not enough to guarantee adequate fact-finding. June 2018, in collaboration with the Minister of Health (VWS) and the Minister for Legal Protection, drafted an action plan to improve fact-finding in the youth care chain (*'Actieplan Verbetering Feitenonderzoek in de Jeugdbeschermingsketen'*). The letter with which the Minister for Legal Protection presented his 28-page action plan to the House of Representatives first explains why the Child Care and Protection Board has such far-reaching powers: *'If a child's development is seriously threatened, the government must intervene. The court then imposes a child protection order. Imposing this means intervening in the private lives of the child and its parents.'* But such intervention, according to the minister, *'needs to be carefully prepared and substantiated, so that a judge is able to assess on the basis of the true facts and circumstances whether a certain measure would be warranted.'* However, all too often, this does not happen, as the minister acknowledged: *'Fact-finding is still not always carried out meticulously enough. This must be improved. Especially as it involves far-reaching interventions for both parents and children.'* He meant for his plan to turn the tide: *'It includes around 20 action points that may significantly contribute to the improvement in fact-finding and reporting in youth protection.'*

In October 2018, another roundtable discussion took place on the action plan. Around that time, Desiree van Doremalen also spoke on behalf of a parental interest group (*'Ouderkracht voor 't kind'*). She explained to the MPs about

children being placed under supervision or in out-of-home placement because of an alleged unsafe situation from which they needed to be rescued, without it being clear what this assumed threat to the child's development really was. Van Doremalen said: *'Currently, government intervention, through an OTS/out-of-home placement, is entirely focused on the obligation to frame and protect the young person, as the justification for intervention is linked to risk and danger, or safety and threatened development. A "cordon sanitaire" is placed around the child. The question to be answered is this one: can we determine, in advance, whether the level of exceedance of the behavioural standard is such that it necessitates intervention?'*

Such an assessment, however, often does not happen. And in spite of all the discussions, plans and reports, to date, very little has been done in the area of fact-finding in youth care, argues Desiree van Doremalen during our interview. She calls the enshrinement of fact-finding in the Child and Youth Care Act a 'paper tiger': *'Because it conveniently doesn't stipulate what a fact-finding investigation should look like.'* Van Doremalen even dares to claim that, if proper fact-finding did take place, it would be at the expense of jobs in youth care: *'If there would be proper fact-finding, just as should be done in a police investigation, going from a to z and finding things out and determining whether something is true or not — is it an opinion or a fact? Is it provable? Is it verifiable? — if all that would be checked properly, at a certain point there would be fewer OTS rulings and probably fewer out-of-home placements. Because the professionals would be doing a better job. And fewer out-of-home placements almost automatically means fewer family guardians and fewer counsellors would be needed. Ultimately, this means job losses.'* Desiree van Doremalen picks up a thick book. It is titled 'tyranny in youth care', the 2013 thesis of René Clarijs, a governance scientist who was director of De Glind, a small youth village near the village of Barneveld, with nearly 30 family homes that house children who have been placed out of home. Desiree has marked page 116, on which Clarijs argues that, in the Netherlands, youth care sometimes intervenes too quickly or too rigorously because no one dares to make a mistake. Van Doremalen couldn't agree more, reading out the passage that talks about 'a security utopia'.

Clarijs' argument, slightly abridged, reads: *'The youth care sector can be characterised as a zero-error sector. Mistakes are not allowed. Just as pilots and surgeons are not allowed to only get it right 9 out of 10 times, the same is true in youth care. Not being allowed to make mistakes makes this a sector in which the medical principle of 'In dubio abstine' (when in doubt, abstain) cannot be applied. Another principle is part of the Hippocratic Oath: 'First do no harm', which, when applied in youth care, goes beyond*

exercising prudence. Youth care workers need to act. This situation regularly causes embarrassment for many a professional. Action clearly is required, but often it is far less clear what type of action would be best.'

This ambiguity is due to the lack of universal truth. Like Clarijs, Van Doremalen makes the comparison with the medical world: *'When I go to a doctor, he looks at me and asks himself: What would be the best thing that I could do for this patient? In youth care, they don't ask themselves this question at all, they don't wonder if a certain action would help or do more harm? That is the whole problem, according to Van Doremalen. And, thus, action is regularly being taken rather hastily. 'This is creating a false sense of security. The motivation for removing a child out from its parental home is that, at the very least, it will be out of a particular situation. But then it is placed in a facility where it may be equally unsafe.'*

SMEAR CAMPAIGN

Lawyer Maria de Jong-de Kruijf, who did her PhD in Leiden on youth detention centres, is also complaining about the poor quality of reports in youth care: *'Children's history according to their dossiers is often not the story of the children or their parents themselves. Nevertheless, it is unquestioningly copied by everyone.'* De Jong also chairs a complaints committee of *Veilig Thuis*, the organisation where child abuse cases can be reported. She knows also from personal experience that far-reaching measures, such as OTS rulings or out-of-home placements, are sometimes based on a false narrative. De Jong talks about what she encounters in practice: *'I read dossiers all the time and keep noticing their poor quality. The content of Veilig Thuis reports is often really deplorable, but on many occasions these reports are what cases are based on, in first instance, and their dubious information is subsequently used for a very long time.'*

Veilig Thuis is the organisation that ultimately has to determine whether or not child abuse is in fact taking place and if intervention is needed because of an 'unsafe situation'. De Jong states that *Veilig Thuis* has a 'far-reaching investigative power'. For example: *'In conducting their investigations, Veilig Thuis has the authority to interview anyone and everyone, including general practitioners (GP) and teachers, who should be able to establish whether a particular case does involve child abuse. Parents then expect that this will invariably lead to the truth.'* But it does not. Intentionally

not, according to De Jong, as *'Veilig Thuis continually and loudly broadcasts that they are not about fact-finding.'*

Lousy fact-finding processes play a role not only in cases of OTS rulings and out-of-home placements when a child's safety is at stake, but also in messy divorce cases, where far-reaching decisions are often made on the basis of incorrect investigative results. Compiling accurate reports on parents and children is very difficult when ex-partners are slinging copious amounts of mud at each other, De Jong says. *'Reports sometimes seem like a smear campaign. Very many reports are about children whose parents are involved in a bitter divorce. These parents hurl accusations at each other, from which Veilig Thuis subsequently needs to discern the truth. I understand that this is an impossible task — there is no way of knowing whether or not the mother indeed called the father a 'bloody arsehole' on a particular evening. It is not a policy investigation.'*

A case in late October 2019 shows how horribly things can go wrong when an investigation is based mainly on smears. This case concerned a father (S.J.) who was no longer allowed to see his children, an 11-year-old son and 8-year-old daughter. He even went as far as going on a hunger strike when he found himself directly opposing youth protection services. He wishes to stay anonymous which is why we will call him by his initials (S.J.). The case involved a bitter divorce. The man came to the Netherlands as an Iranian refugee in 1994. His marriage to a Dutch woman failed after eight years. Initially, there was an arrangement for equal co-parenting, but this ended after only a year. At a certain point, he had the right to see his children for no more than one hour a month. Needless to say, he disagreed. This father accused the youth care and protection division 'Jeugdbescherming West' (JBW) of dereliction of duty, abuse of power and child abuse. According to him, the guardian sided with his ex-wife from the very first day. He had a 'gut feeling' about this, as he told a journalist from *Leidsch Dagblad* (Dutch newspaper [eds]). Explaining why he went on hunger strike, he said: *'Some people might not understand why I am doing this. But I can't live like this anymore. My children have lost their father already, because of this arrangement.'* At the time of the interview, he had been on hunger strike for one day. He said he had a headache and a dry mouth, but was determined to battle on, saying: *'I am willing to give my life to get my children back.'* The hunger strike and related publicity were successful — after a little over three days, JBW conceded and agreed to meet his demands for fair access to his children.

COLLABORATION

May 2020 saw the publication of yet another report on fact-finding, titled *'Samen werken aan feitenonderzoek'*, about doing so in collaboration with others. The report was produced by the knowledge institute of youth care (NJI) that is largely run on government subsidies from the Ministry of Health, Welfare and Sport, but is also funded through subsidies and commissions from other ministries and organisations. The report's focus on collaboration is striking and indicative of where the NJI believes the main problem lies: Child Care and Protection services and parents who are faced with an OTS ruling or even with out-of-home placement need to work more closely together. The NJI states: *'Youth protection measures are not taken lightly or without reason. They are based on court judgement. Such judgement is founded on information about the situation in which children are growing up and about the parents who are raising them. This information is currently the subject of much discussion. Clients are expressing their frustration about sloppy investigations and incorrect information that can haunt them for a long time. (...) At the same time, we see youth care professionals often having to act in a field of tension — between "knowing" and "suspecting" — and, on the basis of uncertain or incomplete information, having to offer advice on a supervision order (OTS) or even an out-of-home placement. In addition, acute situations require quick action and there is not always enough time to gather information thoroughly. Doing nothing may have serious consequences. And when things then do go wrong, the professionals involved and their organisations are likely to be heavily criticised for it. Which is also a real thing.'*

NJI, thus, acknowledges that youth care professionals often take far-reaching measures that are not based on hard facts. In large part, this is because the organisations concerned face a huge workload: *'Lack of staff and high turnover cause discontinuity in the teams.'* Thus, as the reports are often incorrect, it stands to reason that this regularly leads to major conflicts with parents who refuse to accept the help that is forced onto them on the basis of bad reporting. And they certainly will not agree to their children being taken from them on the basis of incorrect data. The NJI report describes how contact between parents and youth protection staff is often cumbersome, to put it mildly: *'Clients may feel they are already at a disadvantage when they first meet a counsellor. (...) Besides that, in many cases, they are not interested in receiving "unsolicited help". So, it is easy to imagine how these situations stir up emotions, such as fear, distrust and anger. Professionals may also feel tense when they are providing unsolicited help. (...) It is understandable that such intrusions into a family's private domain cause a certain degree of tension.'* The

report describes how parents, especially in cases of out-of-home placement, quite often go berserk. Added to this is the fact that social workers not always react appropriately: *'Many youth protection workers face verbal and physical aggression, intimidation and violence from clients and, in turn, have a stress reaction themselves.'* All this, therefore, need to improve. The NJI report believes there should be a 'good working relationship' between parents and youth care officials: *'Clients should be able to feel safe in their contact with care workers.'*

According to educationalist Harry Berndsen, however, the working relationship is not at the heart of the problem. He attended one of NJI's meetings where adolescents with youth-care experience, parents and professional care workers talked about the fact-finding process with each other in 'focal group discussions'. Afterwards, all participants were given the opportunity to comment on the resulting draft document. Berndsen wrote a response in a personal communication in which he stated that the fundamental problem is not the lack of a 'good working relationship', but rather the poorly written, inaccurate reports: *'It has been known and proven for years that the quality of reporting in youth care is substandard. Juvenile court magistrates receive input that leads to irresponsible and unsubstantiated decisions.'* Commenting on the report, he speaks of 'chain infantilism' again: *'Highly outdated and often unreliable material is being copied indiscriminately and uncritically.'* Youth care should no longer look away when it comes to fact-finding, as Berndsen says: *'As a certified institution, they should dare to say: Indeed, our family guardians are not capable of conducting an objective assessment. By evaluating their own OTS and out-of-home placement processes, they are essentially marking their own homework.'* Berndsen is of the opinion that the youth care sector should finally acknowledge that things are not going well with respect to fact-finding. He is in a position to judge, he believes, as his opinion is based on extensive experience: *'I have studied 380 dossiers over the past 20 years, assessment reports by officially certified organisations. In none of those documents have I ever come across a family guardian being reported as having done something wrong. And that is extremely suspicious. This cannot be true. I have witnessed first hand how family guardians are making many mistakes. They also just make things up and then report them as facts.'*

INDIGNANT

Parents and youth care 'clients' are incensed about the NJI report, which was so long in the making. About the content as well as the process of creating it, which was messy, in their opinion. Once finished, they were given only seven days to respond to the draft version. After there appeared to be a large amount of criticism, this deadline was extended by another three days. The meeting to conclude the process was held online rather than in person, because of COVID-19.

Parents, united in various groups, voiced many criticisms, despite the short time they were given to do so. These criticisms, however, were not incorporated into the report itself, but instead were simply attached to the end. Alfred Groenen of SWV (a collaboration of parents involved with youth care, *'SamenWerkingenVerband van Ouders met Jeugdzorg'*), is particularly angry about the low calibre meetings and the way parents were treated. His response on behalf of parents: *'Comments about the content and quality of the meetings most frequently included terms such as "infantile, irrelevant and unprofessional". Even worse, we feel that during the sessions, several people were ignored, and those with unwanted opinions, questions or requests were simply cut off.'*

Desiree van Doremalen, who also attended one of these focal meetings, is equally outraged. During the sessions, parents and clients were not allowed to take photos or make audio recordings: *'But the people from NJI did. There was absolutely no equality.'* She responded in writing, cynically noting: *'It is a pretty report, as far as layout goes, but in terms of content it has been written to ensure the following conclusion: "Everything will stay as it is, we are not going to improve or change the way we do things and we will not do anything to improve the legal position of parents and their children."'* There was no good 'working relationship' at these meetings, and NJI researchers displayed a condescending attitude. At least, this was how parents felt. According to Van Doremalen, this is also illustrated by the fact that the report does not pay any attention to the right of parents to be assisted by a lawyer. Desiree van Doremalen argued that the report should mention this parental right. *'I remarked that, yet again, they had not included the fact that parents can and may involve the help of a lawyer. NJI then replied that they had not included this option in their report because not every parent could afford to hire a lawyer. Thus, they are depriving parents of the opportunity to obtain legal protection.'*

POIGNANT STORY

A father going on a hunger strike or parents becoming aggressive — because of a government that intervenes from the notion that these parents are not looking after their children properly or are abusing them. And all this on the basis of reports that are rife with untruths and errors. The story below poignantly illustrates the tragedy to which poor fact-finding can lead. It was published in a Dutch magazine for parents (*Ouders Online*) and was titled: ‘Out-of-home placement, mission failed’ with the sub-heading ‘How we failed to save two children who had been removed from their parental home. We were no match for the William Schrikker Foundation (WSS).

The story is about Omar, Khadija and their children. Mother Khadija approached *Ouders Online* to tell her story, 13 years after their children had been placed into care. A brutal out-of-home placement of their young children, and everything else that happened afterwards, left everyone in this family damaged and traumatised. Khadija wanted their story publicised. In 2004, their children — Yasmina, a two-week-old baby, and Yassine, her 2-year-old brother — were removed from their parental home by the William Schrikker youth protection foundation, (WSS), without prior notice. Khadija was breastfeeding her baby when it was snatched from her arms. She was not even allowed to pump her milk. *‘Everyone was utterly perplexed’*, the article recounted about this out-of-home placement that also had the police involved. *‘The family had a good reputation, and there was nothing wrong. So how could this have happened? In short, there was a maternity nurse [helping with the newborn baby in the home (ed.)] who thought she had seen ‘something’ and had reported it. Had she known what this would ultimately lead to, she probably would not have done so. That ‘something’ consisted of messy things not (yet) having been tidied away and some dirty dishes in the sink.’* The children were taken away from their parents without any investigation by the Child Care and Protection Board. The court had granted the out-of-home placement based on assumptions.

The out-of-home placement with its disastrous consequences was reconstructed in 2017, in another digital magazine, *Follow the Money* (FTM). The FTM story contained more background information. The father had been treated at the GGZ (Mental Health and Addiction Care) for schizophrenia but was functioning fine on medication. The GGZ was under the impression that the couple was intellectually challenged, but did not examine them and, therefore, there was no diagnosis of any sort. Father Omar missed some of his appointments at the GGZ,

which started the ‘meddling’ intervention via socio-psychiatric care, involving unannounced home visits. The home of this family, who were in the process of moving house, was claimed to have been in a chaotic state. One GGZ worker suspected the father was not taking his medication. When the maternity nurse then observed the rather messy home situation, in combination with her belief that the mother was lacking in empathy for her newborn infant and that the family probably had no contact with neighbours or family, she notified the child abuse hotline (AMK, now Veilig Thuis). Later, according to the article in *Follow the Money*, this maternity nurse said that her statement had been documented differently than how she had reported at the time. Talk about fact-finding. Thus, a week after her reporting, the children were indeed rushed out of their home and subsequently placed at a secret location with a ‘crisis care’ family, which later became the children’s foster family. Nothing was discussed with the parents. The parents did fight to get their children back in a number of court cases, but all to no avail. The judges always followed the advice of the various guardians from youth protection organisation WSS, who kept insisting that the children could no longer live with their parents, and the out-of-home placement was extended repeatedly. Over time, the relationship between the parents and the various guardians became increasingly strained, which ultimately even resulted in them also losing parental rights over their two children. Both these children subsequently started displaying behavioural problems in their foster home. The boy was eventually moved to ‘s Heeren Loo (an institution for people with intellectual disabilities), in 2014. His sister then also started to show behavioural problems and had to stay at the same institution on the weekends. Incidentally, in 2014, Omar and Khadija had another child, daughter Kaoutar, who was allowed to remain with her parents.

FTM magazine contacted an expert, Piet Wentzel, (researcher, mental health psychologist and educator) to study the entire dossier and comment on the case. The children appeared to have randomly received ‘various diagnoses’ by WSS. Wentzel questioned all of those diagnoses. He concluded that yet another big mistake was being made — one that had been completely ignored. He suggested that the children’s troublesome behaviour may well have been caused by the youth protection organisation itself. *‘Nowhere in the dossier, there is mention of the possibility of there being a relationship between the children’s behavioural problems and their turbulent lives in foster care after a traumatic, abrupt and violent police-involved out-of-home placement. While such a relationship would certainly be obvious.’*

DOSSIERS

Here, we turn to the files themselves. The youth care sector is plagued by enormous bureaucracy, as explained earlier. Stacks of dossiers are created containing examination and interview reports or other documents about individual children. The quality of all this reporting is often rather poor. And there is yet another problem. The process of storage and archiving of the annually created tens of thousands of dossiers is not being monitored. The Child and Youth Act does specify the required retention period for these dossiers. A youth care dossier is to be stored for at least 15 years after the end of the care. Or longer, if necessary. The Child Care and Protection Board keeps a dossier until a child reaches the age of 24. Moreover, in cases where an OTS or guardianship ruling has been issued by the courts, such a file needs to be archived until the person concerned turns 30. Once these periods have expired, organisations are allowed to destroy the dossier. In practice, they always do. Young people and adults are entitled to have access to their own records. This is particularly important for people who have suffered trauma while in youth care. But when a large number of years have gone by, they are usually unsuccessful in obtaining these records.

NJI wrote a report on this subject, commissioned by Pro Juventute (predecessor of today's youth care services), titled *'Terugvinden van jeugdzorgdossiers uit het verleden'* [retrieving youth care dossiers from the past, ed.]. On the eve of the decentralisation, the NJI was to outline how dossiers could be made accessible to former youth care clients. Many of the organisations involved were not even willing to consider doing this, according to the NJI: *'Care providers have indicated that they hardly receive any inquiries from former youth care clients. In addition, we found that care providers generally keep only very few old archives.'* Therein lies a problem', Pro Juventute determined. Former youth care clients often start looking for information not until later in life, only to discover that they are unable to obtain their dossier, as most youth care institutions destroy dossiers after a period of 15 years. It has also proved difficult to get hold of their dossier within the 15 year window — right after youth care involvement stops or when they leave a youth care facility. Those interviewed for this book mostly found it very difficult to obtain their dossier. And once they do manage to get hold of it, they very often see that it contains many things that are not correct. In fact, all the children and parents interviewed criticised the reports written about them. The dossiers contain too little information, many incorrect 'facts' and/or diagnoses

that, they say, were never officially established. Thus, these records are mostly far from the truth.

Jason, for instance, claimed that in the closed care facility of Harreveld the daily reports contained hardly any information. This can also be seen when comparing his official dossiers and the passages from his book in which he describes his stay in youth detention (*Jeugdzorg, mijn dagboek*). Nola's mother also claims her daughter's dossier is incorrect. At some inexplicable point, information found its way into the dossier about Nola allegedly having been sexually abused. But her mother is adamant: *'There was never any question of that.'* And, even worse, in Tim's dossier there is a written account of a meeting about his care plan, which literally says: *'It is unclear whether the parents were ever married or when their relationship was terminated.'* Admittedly, the situation was a little complicated as the mother and her partner had been married twice, and were in a total of three relationships. But the ambiguity need not have existed; both mother and stepfather were present at this particular meeting, where apparently the question arose about their marital status. Examination of Tim's dossier reveals that the peculiar passage about the so-called 'uncertain' status of his parents' relationship was never corrected, but nevertheless recurs again and again in subsequent reports. This endless 'cutting and pasting' of entire passages, especially about a child's home situation and past, has happened in all the dossiers of the wards of state, including information that has no basis in reality — the 'chain infantilism', as Harry Berndsén so aptly calls it.

Getting hold of his dossier was problematic for Tim. Tim stayed at De Hoenderloo Groep (DHG) in Deelen for quite some time. He was handed his dossier, at his request, but this appeared to lack all information on everything that had happened in the years before his time in Deelen, years when youth care services had already been intensively involved with him and his family. Thus, Tim remained in the dark about the many questions he had about this period. To find out what happened before he was admitted to the DHG, he would need to go back to youth protection services, he was told. For Tim, this was easier said than done, and therefore, as he felt unable to do this himself, I did so on his behalf.

The search for his dossier even led to a meeting with his former guardian, at the offices of the youth protection services (*Jeugdbescherming Gelderland*) in Nijmegen. She did remember Tim and his family, she said. It had been many years since she had Tim in her care. She was the one who personally took Tim to the De

Hoenderloo Groep youth care facility. However, although very cooperative, she was unable to hand over the dossier that would cover the years in which she had been Tim's guardian. As she explained, in the past, she had handed over his complete dossier to the youth protection agency of the Salvation Army in Zutphen. Tim's younger brother had been assigned a guardian from this organisation because he was going to a foster home in the Zutphen region. It seemed logical for Tim's dossier to also be archived at the Salvation Army there. This is where Tim's dossier-retrieval project reached a dead end. He is in such bad shape that he can no longer bring himself to face all the formalities required to obtain this older dossier.

All of the interviewed wards of state and/or their parents are bothered by the fact that youth care services are so careless with how they compile and handle the dossiers. The documents on Patricia, who committed suicide at DHG's closed care facility De Smaragd, also contain peculiar entries. During the interview, her mother Lucia started talking unprompted about the entire nonsense in one of the reports. 'Father came with stepmother', according the report. Lucia recounted: *'This was her mentor from school!'* Laughing cynically, she said: *'It's extremely sad. You know what it is, we have already lived through such a soap opera that nothing surprises me anymore.'* And then there is Vanessa. Her documents state that *'father failed to appear at the hearing'*. Vanessa dryly remarked: *'Well, he couldn't, could he, for the fact that he was dead.'*

SOAP OPERA

Finally, the course of events around Judith's dossier is literally a soap opera. It took six months to track down; Judith was sent from pillar to post, following her dossier along an endless row of mergers, closed-down and newly created institutions. All this stands in stark contrast with the medical sector, where patients must be handed their dossier within two weeks of them requesting it and all information must be archived and retained for a long time.

Meanwhile, through her own inquiries, it had become clear that Judith's dossier was at Doc-Direkt in Winschoten, a company that manages and digitises dossiers for the government. A very obliging Ministry of VWS official, Luit Humbert, found Judith's name on the inventory list of De Lindenhorst archives that are being kept at Doc-Direkt. This led to yet another hurdle to overcome. For formal

reasons, this digital file first had to go from Doc-Direkt to the Ministry of VWS, and from there it had to be sent to De Lindenhorst. According to VWS, this institution was responsible for handing over the dossier to Judith. All in all, it took almost a year for her to obtain it. And the problems did not end there; when Judith was finally able to collect her dossier, it turned out to be disappointingly thin. The original paper dossier was missing, and the also provided inventory list, which showed all the available documents about her, showed that either De Lindenhorst or VWS did not intend to hand over all of information to Judith.

When she was in Zeist to pick up her dossier, at the office of the Director of De Lindenhorst, Judith immediately went through the copies they gave her, looking for the 'daily reports' that should contain everything that happens, per day, in the social group. She was particularly interested in these daily reports. To Judith's dismay, none of them were included. Director Christa Schrodeur, who had handed the dossier to Judith herself, replied: *'I don't know, girl. I understand you want them, they are most important to you. I hope they are still around. They ended up at VWS.'* Schrodeur then promised to make it her priority to find out how Judith could still obtain those daily reports. A day later, however, she indicated that she had no idea where the reports could be, after all. She had not been able to find out, she said; stating that, for her, this was the end of the matter — after which she quite abruptly cut off the rather awkward phone call.

Later it turned out that, in practice, youth care organisations do not provide these daily reports as a matter of course. Former clients not only have to ask for their dossier, but also explicitly need to apply for the group reports. If they do not, these reports are not provided. The institutions are reluctant to hand them over because they contain names of therapists and group supervisors. They prefer not to reveal the names of their staff members, from a safety perspective.

Micha de Winter, Professor of Pedagogy and Chair of the committee on violence in youth care (*Commissie Geweld in de Jeugdzorg*), conducted extensive research on the subject. He noted that, with regard to youth care dossiers, things are mostly in chaos. When he presented his report in June 2019, it also revealed the terrible state of the institutions' old archives and how difficult it is to get hold of dossiers. Fact-finding had proved difficult, even for this distinguished committee. All too often, the committee was unable to verify the stories from people who had reported abuses at institutions, as their dossiers were no longer available. De Winter states in his report: *'Personal dossiers end up in the shredder after around 15*

years and the remaining archives mostly appeared rather difficult to access. In addition, many archives were found to have been discarded by youth care institutions during mergers or due to lack of storage space.' When asked, per email, Micha de Winter confirmed young people's difficulties in getting hold of their recent dossiers. However, for an explanation of why this is so, he referred back to the sector. De Winter: *'We do not know why the dossiers are absent or in poor condition, that question should be put to the institutions themselves.'*

These institutions, however, often do not know where the dossiers of their former clients could be located. They do not consider proper archiving important. Moreover, careful handling of archives is expensive. Lecturer Peer van der Helm recognises the problem; efforts to get hold of a dossier on youth care very often fail, not only for those concerned but also for researchers. Van der Helm: *'I was doing research in one of those institutions, and wanted to know how certain children had fared. It turned out that, for at least half of them, the dossiers could not be located. In some instances, I had to wade through half-flooded basements and search behind planters. And when found and opened, they would also contain information on other clients. It was one big mess.'* Van der Helm confirmed that what happened to Judith regarding her De Lindenhorst dossier is common practice in the world of youth care. *'They send you fruitlessly from one place to another. Often there is nothing there. Those institutions change hands repeatedly, and sometimes premises then need to be vacated, at which point papers are all flicked into the bin. That's how it goes. Just chunked out. It is normal practice.'*

5 SNATCHED AWAY

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‘They came in the evening. All of them. While he was sitting behind the computer. We had just had dinner. Two policemen, someone from Child Care and Protection, the guardian, the district team. The worst thing is that he was simply snatched away by the police. I needed therapy to deal with it. I couldn’t cope with the fact that six guys can come into your own home and take a child just like that.’

Marianne tells how her grandson Tibo (not his real name) was ‘snatched from her house by the police’, and taken to the De Lindenhorst, the closed youth care facility in Zeist. Marianne certainly did not want them to remove her 17-year-old grandson from her home, and definitely not to take him to a closed care institution. But it happened nevertheless. She and her husband were taking care of Tibo, because neither his father nor his mother — his parents were divorced — were able to keep him in check. He had been doing drugs and taking pills and alcohol, roaming the streets at night, fought with his father, and smashed the place to bits. And he had big problems at school. Marianne wanted her grandson, who she suspected had autism but had not been diagnosed, to get the right kind of help. And with that help, Tibo could continue to live with her. But she and his mother were not on the same page on this issue, Marianne explains. The mother wanted Tibo to go to a crisis shelter.

The grandparents were living in a beautiful, detached house in the middle of a wooded area. The house was lined with lawns, terraces and flowering rhododendrons. It is difficult to understand why Tibo had been taken away so brutally, particularly from their house. Tibo had always said that he wanted to stay with his grandmother. But Samen Veilig, an organisation that steps in when a child’s safety is at stake, and the Child Care and Protection Board were of the opinion that the grandparents were unfit to care for their grandson. Tibo’s mother and the child welfare authorities were adamant about placing him in a closed youth care facility. Marianne, who wished to be mentioned only by her first name, was put on the spot, she explains: *‘I got this call — Tibo was staying with us again — from my daughter saying: “We are on our way to your place, because he is going to be admitted now.”’* Marianne was dead against her grandson being

taken from her home to a closed youth care facility, so she said: *'As I have indicated to you, he is not to be taken to an institution while he is staying with us. This is where he feels at home, this is where he feels safe. If you really want to do this, you should do so from your own home.'* She said the same to youth care services and the Child Care and Protection Board. But no one listened to her and so they arrived at her house in full force to take Tibo away. Marianne became emotional as she was recounting what had happened: *'He resisted, because of course he didn't want to go. I wasn't allowed near him, I cried my eyes out, it was so terrible. Because it was the last thing we wanted to happen. He ran into the kitchen, which is where they grabbed him. Of course he was kicking and screaming, and this is when a small handle of a drawer had broken off. But what does the report say? "He kicked and broke the fridge." This makes me wonder who does this kind of thing — writing down some untruth like that? How pathetic.'*

All the stories of the wards of state show how overwhelming an out-of-home placement of a child (or sometimes more children at the same time) is and how ruthless these things are being executed. And, also, how traumatising it is for all those involved. It happens to over 46,000 children in the Netherlands, each year. That is a very high number, compared to other countries. This puts the Netherlands amongst the dubious top of countries, where out-of-home placements in Europe are concerned. Since the decentralisation of youth care, there has not been a reduction in out-of-home placements, which had been the expectation, but instead numbers actually rose by more than 14%. Out-of-home placements always involve a great deal of emotion — with pushing, pulling and screaming, children crying, parents always upset and angry. The police is always present and quite regularly, youth protection staff — the guardians who take the children away from their parents — feel threatened.

In early November 2019, youth care facilities took to the media, sounding the alarm about this matter. Sixteen institutions for youth protection and juvenile probation services wrote a joint leaflet on the subject (*'Handen af van onze jeugdbeschermers'* [keep your hands off our youth protection workers]), which was sent to the Dutch Cabinet and House of Representatives. The reason for doing so at that point in time was a report by Netherlands Statistics (CBS) showing that over 80% (i.e. 8 out of 10) of youth care workers face aggression or physical violence. Incidents are often posted on social media after children have been taken away from their parents. *'Not only are they being threatened while doing their work,'* the leaflet stated, *'but aggressive clients and parents increasingly manage*

to attack youth protection workers also in their private lives. Youth protection workers become involved only after there has already been a great deal of assistance provided to that family. We do understand the desperation and helplessness of parents, but we never condone aggression.' The 16 organisations demanded that their staff receive better protection from the police — both during and after out-of-home placements. The Dutch NOS Broadcasting Foundation paid a large amount of attention to the topic. And, on the NOS website, a compilation was published from the William Schrikker Foundation (WSS) about the threats made against their personnel on social media. The compilation starts with an audio clip of an angry father threatening a WSS guardian: *'You really don't want to screw with me, I'll fucking kill you!'* Then follows a written threat: *'I'm still looking for you, and I swear that I'll find you. No matter if I have to go to all the addresses with that surname, I'll find you. You will be the first woman, with all the misery and anger that you have caused with your lies, where I will knock all the teeth out of your fucking trap.'* This is followed by a video of a gun being reloaded, after which an intimidating text appears on the screen: *'Dear WSS, What will it take: your building demolished? Smoke-bombed? People getting killed?'*

BRUTAL

As stated above, children being taken from their homes are scenes of violence. Accompanied by furious reactions and threats from the parents involved. Youth care workers and parents are invariably diametrically opposed. The Internet is rife with countless videos of things escalating completely when children are being removed from their home. As was the case with this family. In July 2019, police and youth protection workers from the William Schrikker Foundation invaded a home in the Dutch town of Middelburg to take an 11-month-old girl away from her parents. The father filmed what was happening, at the request of the mother. His video is titled: *'The gruesome practices of youth care out-of-home placement.'* It shows the mother in the bath with her baby daughter. She is naked when two ladies from the WSS and two policemen come upstairs. Another two policemen remain downstairs, in the hallway, at the bottom of the stairs and in the doorway. The police address the father and mother by name. They know each other. The whole neighbourhood is able to witness what is going on in this house.

A sympathetic policeman apologetically says to the father: *'The judge authorises us. I have a court order.'* *'On what grounds?'*, the father asks. The officer replies, *'We'll make it clear in a moment.'* It is obvious that the parents are completely caught off guard. *'You are out of your minds, you don't know what you are doing!'* the father shouts. He is not allowed by the police to go upstairs and is understandably furious. He is shouting, *'This is child trafficking! They are taking your children!'*

It is also clear that children have been taken away from this family before. According to the father, both he and the mother are constantly being told: *'You are not good at parenting, you are not capable of it.'* Then he starts swearing: *'But you think you are the Übermenschen, you are like Hitler's descendants. Bloody crap, bloody crap! You guys are really out of your minds, you take the cake. Bloody crap, bunch of toads!'*

While the child protection workers upstairs are trying to take the child from her mother, one of them, a woman, can be heard saying to the little girl: *'X [anonymised, ed.], aren't you screaming loudly.'* Then there is the sound of the baby screaming. The woman comes down the stairs with the naked child in her arms. Half wrapped in a towel, with the shampoo still in its hair. *'Bye X, it's probably the last time I'll ever see you!'* the father calls out to his little daughter. *'These are all mean people, who've come to take you away.'*

In the baby room, two other police officers work the mother, who is bundled up in a bathrobe, to the floor. The father is still standing in the hallway. *'I feel really sorry for you, mate'*, says the kind policeman. He is clearly troubled about this out-of-home placement and asks: *'When did all this start? Surely, there must have been a point when they said that things were not going well?'* *'Sure, false reports. All false reports,'* the father replied. *'And the Child Care and Protection Board, they make all the money. Look how it is here in the house, it's a nice house here, isn't it? We are nice too. The house reflects how we are. Do you understand?'* At which point the officer says: *'I saw that someone from the Child Care and Protection Board visited you here just last Monday. Everything was fine then. There was nothing wrong.'*

Meanwhile, the mother is being taken outside in handcuffs, screaming. The next day, the mother posts the video on Facebook. She calls on other parents to whom this has happened, to all 'fellow sufferers' to come in 'yellow vests' to a planned demonstration against youth care services. The WSS subsequently filed a lawsuit against the parents demanding that the video be removed from Facebook. The

court rules in favour of the WSS. More than a year later, the poignant video can still be watched on the Internet.

CLUMSY

The over 46,000 out-of-home placements per year are a thorn in the side of Peter Dijkshoorn, child psychiatrist and, until September 2020, director of youth care organisation Accare. Dijkshoorn advises the Association of Dutch Municipalities (VNG), in a bid to improve youth care in the Netherlands, something that is really needed, he believes. He argues that families should be provided with assistance at a much earlier stage, to prevent children from being placed out of home. Stressing that parents do not neglect or abuse their children on purpose, he said: *'Know that almost none of the parents in those 46,000 cases enjoy doing so. Their way of parenting is clumsy, I would say — mostly incapable rather than criminal. And because they feel helpless and powerless, they need to be shown how to become competent and powerful parents.'*

Those parents should therefore not be punished by taking away their children, but rather they should be supported so that they will indeed be able to take good care of them, as Dijkshoorn argues resolutely. Because it is not normal and highly undesirable that so many children are placed out of home in the Netherlands, every year. We have overshot the mark, he says. *'How we ended up here? Well, simply because we saw that children were not doing well. And so we invented rules to fix it. However, this has meanwhile gotten to the point where anyone who doesn't pass the smell test is considered a risk. Anyone with an intellectual disability is a risk. This makes no sense, and yet it is what we act upon.'*

Dijkshoorn likes to look at the bigger picture. He speaks of the 'collective impotence of society' when talking about the many out-of-home placements: *'In the Netherlands, we have 125,000 children of whom we suspect they are being abused. We have almost no parents about whom we think that they are enjoying committing this abuse. So, of those 125,000 children, there are a hundred or so with completely idiotic parents, psychiatrically ill people who might enjoy mistreating their children. But all the rest do so out of utter helplessness. Those people love their children, and it is this powerlessness that causes them to mistreat them.'* And precisely because we are so quick to place children out of home, incapable parents are afraid to seek help at an earlier stage, as Dijkshoorn outlines. *'In the Netherlands, parents rarely, if ever,*

go to their GP or district team of their own accord; they don't feel confident enough to say: "Doctor/district team member, I am abusing my child. I really don't like doing this, but I'm unable to stop, can you help me?" People just don't do that. You go to your GP for all sorts of things: stomach ache, headache, heart problems, a sprained ankle. That's all normal stuff. Or with your child's dyslexia, your child's anxiety, also all normal. But you don't go seeking help if you're abusing your child. Not only out of fear for legal repercussions, but also for societal consequences — merely talking about child abuse is enough to frighten parents. They think that if anyone would find out, their kids would be taken away.'

The grim reality is that this is indeed happening relatively often, according to Dijkshoorn. *'And so, their fear and suspicions are validated. And because they don't seek help, the abuse goes on. Not talking about it allows them disguise the abuse — for a while, but they cannot do so forever, and eventually things go really wrong. At which point, these children are removed from their home.'* Parents therefore should receive the help they need to cope with serious family problems. Taking their children away is not the solution and impermissible, as Dijkshoorn points out. *'It is really a violation of human rights for a child to be taken away from its parents. Things should really be seriously wrong before this would be justified.'*

Dijkshoorn wants the silence on child abuse to stop. *'That's where it begins,'* he argues, *'with our culture where talking about your own powerlessness is simply 'not done'. And because you are not allowed to talk about it, things continually and increasingly go wrong. If only we could change that, so that it would be acceptable for you to go to a GP when you're abusing your child and say, "I am abusing my child, can you tell me where I can go to get help?" And that the GP would say, "Yes, I can." And that you would then get help. Or that it would be acceptable for you to ask a neighbour for advice, or for a neighbour to talk to you if they observe things not going well in your family.'* Dijkshoorn believes that this would make the situation much better and that large numbers of children would no longer need to be placed in care.

Currently, quite the opposite is happening, and the consequences are disastrous, as Dijkshoorn indicates. *'Everyone is focused on being afraid to report abuse. That creates sickness and misfortune. These are the risks today, because of how we have all organised it.'* This brings him on the subject of the misery that is being caused by the increase in unwarranted reports of abuse and the poor quality reports by the Child Care and Protection services, which are full of inaccuracies, unfounded suspicions and smears. He describes what he has encountered in his professional

capacity: *'I have seen official reports that say, "There is an intellectual disability, which means there is a greater risk of sexual abuse." And such statements are readily copied into the overall conclusion — even though in the specific case there is no proof of sexual abuse, at all. Children, thus, have been taken from their parental home who should not have been.'*

Dijkshoorn also sees that children are placed out of home so rapidly for yet another reason; namely, because no one in the youth care sector dares to make a mistake. Youth protection workers are afraid of the consequences if they have not intervened and then things go wrong. Dijkshoorn says: *'If the people who take these decisions would decide not to remove a child from its home and then things go wrong anyway, these decision-makers will be on the front pages of all the papers and the Inspectorate will come after them. Or it may lead to parliamentary questions. This all plays a role in the decision-making. So, you can't really blame the guardians for opting to be safe rather than sorry. This system needs to change.'*

Juvenile lawyer Reinier Feiner is another prominent person who has been pointing out the flaws in the system for a long time. The various parties in the youth care sector, those who make the decisions and implement the out-of-home placements, have been given too much power and there is no one checking what they all do with that power. Feiner explains: *'You could say that the balance of power in the youth care sector has been disrupted for decades. Because the hands-on authorities — youth protection services, foster care and youth care institutions — have become partners in the implementation chain.'* They all interact with each other and have overlapping tasks and activities. *'All these organisations have become dependent on the municipalities'*, Feiner claims, by which he is referring to the financially large commissions they all need to receive from the municipalities, since 2015, in order to provide youth care. Things are arranged in a very complicated manner these days, and what all the implementing parties are doing goes completely unchecked. Feiner is critical: *'The big problem is that the implementing authorities cannot be corrected sufficiently. And children and parents are bearing the brunt of it. When they don't agree with something, they feel that there is no fair consideration of the facts.'*

Feiner is often present at court hearings where judges order out-of-home placements. This is where Feiner is seeing how the system is no longer working properly, and that implementing authorities — in these cases, youth protection services — have a degree of power that they really should not have. These

organisations essentially decide whether a child should be taken away from its parents or not. The court only formally ratifies such decisions. According to Feiner, the way parents react to these court rulings is an indication of something not being right. *'When a judge agrees with youth protection that the children should be removed from their home, I see the parents directing their anger not at the judge but at the youth protection representative. This is when you know something is wrong — parents apparently and instinctively know that the decision-making party is the implementing authority [i.e. youth protection, eds.] rather than the judge.'*

WITH THE USE OF WEAPONS

The Child Care and Protection Board, thus, is the organisation that has a deciding voice while also functioning as the implementing authority when it comes to removing these children from their homes. There are many disturbing videos on the Internet about what goes on. The police is always involved. Always there is screaming and shouting. The following is an example of a questionable out-of-home placement, again involving multiple parties.

In the Spring of 2012, Bureau Jeugdzorg and the Salvation Army's child protection services, with the help of the police, are taking children away from their mother, who is not from Dutch origins. A police van is parked outside. A hefty police officer, cap on, wearing a white shirt and tie, walks in the door and says: 'No filming allowed, sir.' Thus, things begin to escalate. The person filming nevertheless continues to film the brutal eviction from an open upstairs window. *'I want my mummy!'* a child screams and shouts, *'No, no!'* A woman with a floral blouse and her hair in a ponytail is carrying off a floundering and screaming child to the police van. This appears to be a bitter divorce case. *'This is unbelievable,'* sounds the voice of the person filming. *'You lot have hardly done anything against the ex-husband who has abused the children. And youth care is only working to ensure the children are with him, against their will. This is just unbelievable. Look at what is happening here!'*

The same video also shows the older brother, seven years after the event, commenting on what happened: *'Because of what later proved to have been deliberate lies, Bureau Jeugdzorg Gelderland arranged the emergency out-of-home placement of my brothers and sister. The reasons they gave: speaking Russian at home, the suspicion that my mother would return to her native country with the children, and that the children*

would have a loyalty conflict. It subsequently took my mother, our lawyer and me two years and eight months to get the children back home.'

This family turned to the media. Also in this case, youth protection services threatened to take them to court because of it. The Salvation Army accused the older brother of 'libel and slander', and later also of 'being threatening'. *'And, because I had gone to the press, youth care prevented me from having any contact with my brothers and sister while they were away, as punishment,'* he explains. Two years after the out-of-home placement, after yet another hearing, the court ordered an examination of the mother by the Netherlands Institute for Forensic Psychiatry and Psychology. The son recounts: *'The report was scathing. It accused the Salvation Army and youth care services of misconduct. By September 2014, the children were back home again.'*

SORROW AND PAIN

Although in certain cases — when there are major problems — out-of-home placements cannot be avoided, they also have a large impact on the people having to execute such an order. Highly experienced child protection worker Linda has regularly removed a child from its parental home, but always with a bleeding heart. *'When a child is taken away under such emotional circumstances, suffering and grief, this is a very traumatic event. Children wonder what they themselves have done wrong. Very often they ask 'Why do I have to leave?'* Believe me, a child's loyalty to its parent is very strong — no matter what the circumstances, and I'm really talking about extremely harrowing stories about parents 'correcting' their children with burning cigarettes to all sorts of other unimaginable things. And if you then were to ask these children: *'Where would you like to live?'*, invariably the answer is *'With my mum and dad'*. But there is no alternative to out-of-home placement, also not legally, say those involved in youth care. For example, taking one or both of the abusive parents out of the home instead of the child is neither realistic nor the solution, as is made clear from the many interviews conducted in the making of this book.

Vanessa, with an alcoholic mother with severe psychiatric problems who was neglecting her child, recognises the loyalty of children to their parents. During the many years after Vanessa's out-of-home placement, her mother and she wanted only one thing, despite everything, which is to be together again. Vanessa's dossier is proof of that. It contains numerous letters that both mother

and daughter wrote to the guardians and juvenile judges, with the aim of being reunited again. Vanessa about her mother: *'Yes, she neglected me, but she didn't abuse me. Absolutely not. I was put into care and my mother lost her parental rights. However, she did want to take care of me again. We gave it our all to achieve that, but without success. I would have liked it, of course. I am her child.'* Vanessa's face is showing her emotion. *'Of course I wanted to stay with my mother. She was everything to me. I didn't care about her being drunk. It didn't even bother me, because I was used to it. I wanted to be with her — as a child, you just want to go home.'*

Alex de Bokx of Dushi, an innovative organisation with some small-scale family homes for children who have been removed from their parental homes, also states that it is terrible for parents when their child is taken from them. And that it does a lot of damage. De Bokx: *'They experience a lot of grief and pain. And every time we are in contact with parents, they show their anger about what has happened to them.'* Many out-of-home placements are unnecessary, De Bokx also believes. *'Nine out of ten parents would be able to take care of their children at home if only they would have some help. Even if sometimes there are only two meals a day, instead of three. As long as there is someone keeping an eye on the situation, and you're able to create a proper network around them. And then there is school, too — as it should be. If things are not going too well then the child could perhaps spend a weekend or a few days with someone else. That is always better than being carted around nine or ten different places.'* He refers to the long string of different shelters where children end up being taken, once they have been removed from their parental home. De Bokx calls himself an 'independent-minded' person. He wants things to change in youth care, which is why he started the Dushi homes. He also realises that children only want one thing, and that is to be with their own parents. This is why, in the Dushi homes, parents play a big role: *'We focus strongly on the parents, embracing their involvement, because we believe that the relationship between a child and its parents is important. Because loyalty plays a role. We can make it homely for them and put some nice flowers on the table and such, but ultimately children want to live with their own parents. Whether you are 5, 15 or 35, you just want to have that relationship with your mother or your father.'*

During a visit to Dushi's offices in Arnhem, and the Dushi home in Ellecom, the table does have some flowers in a vase and there are candles burning, with coffee, tea and biscuits or cake on the ready. Dushi aims to provide these children with a feeling of family life, as much as possible, while also making them as independent as possible. The young ones go to school, attend clubs and, from

the time they turn 15, are obliged to get a small, part-time job. Furthermore, they do receive special forms of therapy, such as equine-assisted therapy. In addition, there is a great deal of opportunity for creativity, such as painting and music.

Dushi is particularly intended for children who have already had to live in many other different places. Often, children have suffered traumatic events and are therefore suffering from attachment problems. Dushi also focuses on this issue, which explains why the biological parents of the children play such an important role in the Dushi method, as De Bokx explains enthusiastically. *'In regular care, not that much attention is paid to this aspect. Of course they also have parental visits, and the guardians also do their part, within certain limitations. Guardians just stick to the rules: The judge has ruled that the child should only visit its parents once a month, and, so, exceptions on other days (e.g. mother's day, father's day) are not allowed.'* In the Dushi homes, these rules are disregarded. *'I think that, for example, on Mother's Day, children should be with their mothers. Irrespective of whether mothers are in prison, in some form of trouble or on drugs, they all know damn well it's Mother's Day and want to see their children. Which is why all children living with us get to see their mother on Mother's Day, their father on Father's Day. Attention is paid to birthdays, with grandmothers and grandfathers also invited. Birthdays with us are celebrated just the way they would be at home with family. The barriers that are raised following an out-of-home placement are all due to systemic rules',* Alex de Bokx concludes. *'It may seem like the law lays out all those rules, but that is not true; these types of rules are determined by the institutions themselves.'*

And thus parents, far too often, are unfairly sidelined when their children have been taken into care, and it is only natural that they then get angry about that, according to De Bokx. *'They are being labelled as difficult, unruly or violent, which in turn causes them to start kicking and screaming.'*

POLICE

Young children are not the only ones being taken from their parents because of neglect or abuse or because parents are suspected of doing so. Youth protection workers also regularly remove adolescents from their homes, again with police assistance. These are adolescents who have gone off the rails or are in danger of going down the wrong path; who are aggressive and need to be protected from themselves or their surroundings for safety reasons. These young people

are usually taken directly to a crisis shelter or a closed youth care facility. And, there, things are almost always tough.

Child psychiatrist Peter Dijkshoorn is also concerned about closed youth care, these days, because of his position as ambassador of a 'learning youth care system' (*Ambassadeur Lerend Jeugdstelsel*) for the Association of Netherlands Municipalities (VNG). He could hardly believe the way things were going. *'Children are transported in a police van when they are taken to a youth care facility of JeugdzorgPlus. It can't get any crazier!'*

Judith was picked up by the police in just the same way, in 2012. She had become uncontrollable and had ran off when she knew she would be locked up. It looked just like she was being arrested. She was also put in a police van. Recounting what happened, she said: *'When I heard from youth care about being locked up, I thought "thanks for warning me, I'm off!" Because I had heard stories about those closed care institutions. A friend of a friend had been raped inside one of those facilities. So I decided I would not go along with it. Then I left — just went and lived on the streets. From one place to another.'* In the end, Judith hid at her best friend's place, which is where the police finally found her. *'The police suddenly knocked on the door. They walked in, right while I was standing naked in the shower. I looked to see if I could still escape. The bathroom had two doors. One went to the living room. There was scaffolding there because they were renovating — I could go out a window there and just climb down. The door was ajar and I peeked through, saw there was no one there and quickly got dressed. Then, when I looked again, the police was standing right there, so I just stepped out of the bathroom. They put me in handcuffs, I gave my best friend a hug and went outside. Crying. They took me away. I was put in a police cell for about a day. They told me that the closed youth care facility De Koppeling was full. That is the closed care facility in Amsterdam where I would originally have been placed. Eventually, they took me to De Lindenhorst in Zeist.'* In many such cases, the police remove these adolescents from their homes at night. This is a deliberate raid tactic. Local residents are less likely to get involved during the dark of night.

'Constructive independent thinker' René Clarijs, as he calls himself, who has a lot of experience in youth care as former director of the De Glind children's village, explains what happens during out-of-home placements: *'Preferably, this happens in the most inhumane way. Two vans stop near the front door, police officers run out, break down the door and drag the kids out — who then think: What the hell is going on? It is incomprehensible. The police say that they do so on purpose, 04:30 hrs is their*

favourite time. We know better than to do this during the day, they say, because that would mean that we get the whole neighbourhood against us. People would crowd around our van, prevent us from leaving and we'd get beaten up. So we have no choice. We are told to go and get those kids out and we are just carrying out orders.'

The way the police remove adolescents from their parental home, or sometimes even pluck them from school, is downright intimidating, as anyone who has experienced this will confirm. Babs recounts what happened to her: *'I was 15 and I was at school when the police came on to the school premises and entered the building. I could only think of one thing: run! When you see police, this is what you do, you run. So I was already looking around to see how I could get away as quickly as possible. But they had the whole area surrounded. There really were police vans all around the building. And I remember thinking: What have I done wrong now? I really didn't know.'* Babs had already been placed out of home and was staying at a crisis shelter. Where she quite liked it. *'I thought: finally a bit of a home.'* But she could not stay there because it was only a temporary shelter. When Babs was picked up from school, she felt totally overwhelmed by the huge police force. *'There were eight or nine police vans, each with three, four men in it, to tell me that I had to leave the shelter again. They had been afraid that I would freak out at this news and be aggressive and I don't know what else. It was a bit excessive though, me alone against eighty million of them. They were ready to physically grab hold of me, but I said 'No need, I'll walk with you.'*

She ended up in a youth care residential group in Oosterhout. From there, Babs ran off again and could not be found for days. *'When I came back to that group, all they said was, "You are leaving here today. We are going to call the authorities because you have to go to a 'closed care facility'. You will not get any time to pack your things, you are leaving immediately."* Then I walked from Oosterhout to Weurt, where I stayed with a friend and her mother for about two weeks.' She was eventually also discovered at that address and was lifted from her bed there. *'All of a sudden, there were police cars there in the middle of the night and I had to come with them to 'closed'. I don't understand why they couldn't have waited for half a day or so? At least then I could have packed my things properly. But this was their tactics — so that I couldn't escape again. Then I ran away and walked from Oosterhout to Weurt, where I stayed with a friend and her mother for about two weeks.'* Eventually, they found Babs there, too: *'All of a sudden the police were there at night and I had to go with them to closed care. I thought: "couldn't you have waited half a day or so?" At least then I could have packed my things properly. But this was tactics. So that I couldn't flee.'*

PEPPER SPRAY

Then there is the story from the viewpoint of those who are involved in removing the children from their homes. The police are involved, in such cases, to protect the youth care workers, the guardians who have to carry out the order by the juvenile court, as youth protection worker Linda explains. She works in a large city in the Netherlands and explains that, because of the aggression of parents or the child itself, out-of-home placements and removals to a closed care facility usually require a heavy-handed approach. And this means that police assistance is indispensable. She gives an example: *'There was this huge chap. His mother had died, family no longer wanted him. He really flouted all the rules. He was not impressed by any form of authority. He could not accept that he needed to go to a closed youth care facility. This is why we took him by surprise, because of the risk that he would run away. And in the end, we had to remove him from the neighbour's house with the help of the police to take him to the institution. He put up a real fight and behaved like a wild animal. Two policemen were not enough to control him. At some point, for both his safety and our own, we had to pepper spray him.'*

The use of brutal force when picking up children who need to go to an institution has long been a problem and is always met with criticism. Juvenile lawyers in Rotterdam have also been seriously concerned about these practices and, in December 2008, sounded the alarm in an open letter in the media. There are striking similarities between the contents of this letter and the stories the interviewees in this book told me about common practices. The lawyers wrote: *'We consider the way that out-of-home placements are often conducted to be traumatising for children. They are lifted from their beds like criminals, or picked up from school by the police. It regularly happens that children are taken away by the police in front of their siblings and neighbours, then spend a whole day in a police cell and are not taken to an institution until the next day or even the following evening. Some children have large bruises from where they have been manhandled.'* Or they become injured. Like Nola. When she had run away from the Transferium, the closed youth care facility in Heerhugowaard, the police were involved when they took her back to the institute. Nola recounts how that went: *'I was at a fun fair, where they surrounded me, boxing me in. They pulled my arms back, very tightly as if I was some criminal. And, as I was walking too slow for their liking, they pushed me forward and then I fell a couple of times. In those days, I was already very aggressive. So, at that point, I wasn't going to cooperate at all, because I got really angry. Three of them grabbed me and one put me in handcuffs. My wrists started bleeding because they were too tight.'*

For her doctoral research on JeugdzorgPlus, Maria de Jong-de Kruijf, a family and juvenile lawyer, interviewed dozens of adolescents in closed youth care facilities. She also heard from them how heavy-handed the police invariably had operated. *'In Harreveld, one girl was pulled from a police van by 16 men'*, she said. But she also remembers the case of another girl, where an officer had acted more humanely when she was picked up. Maria de Jong tells the following, touching anecdote: *'She had literally been lifted off her bed in the middle of the night and taken to an institution. At which point she was completely out of control, of course. Then a police officer started singing to her in the van. This eased her mood and meant that she had calmed down a little by the time they arrived at the institution.'*

The way of transporting adolescents — either to a closed care facility, or to a court hearing about an extension of their closed care admission — has been under discussion for years. The transport method is not one that is geared to handle children and causes them a lot of stress. The way they are taken to a courthouse still happens in the way described by Rotterdam lawyers in 2008: *'The children are often transported in police vans. They are in that van for a long time, while it drives around picking up kids from various institutions across the country. For example, there was a 15-year-old autistic boy who needed to pee during the long drive. However, there was no communication system between the back of the van where he was and the driver's cabin. The glass between these two compartments was so thick that the driver could not hear him knocking. In the end, the boy peed his pants and then had to walk around in these wet, smelly clothes for the rest of the day. Youth care is responsible for providing suitable transportation, but they often forget to arrange suitable transportation or they deliberately call on the Ministry of Justice's transport unit, DV&O.'*

Many years after she got out of the closed youth care facility, Vanessa still talks about the DV&O van picking up kids from all across the country. She mentioned it back in 2005, when she was interviewed for another book about closed youth care (titled *'Onschuldig achter de tralies, het eindstation van de jeugdzorg'* [innocently behind bars, the final stage of youth care]) by Anna van Es and Bram Hulzebos. At the time, Vanessa said: *'So, you get picked up by that police van. Have you ever seen the inside one of those? Well, it has room for three people to be transported in it. There are three booths. They are tiny, about the size of a toilet. So you have to sit in one of those. They would pick me up early in the morning from Almelo. You'd think we'd go straight to Den Bosch, but sometimes we had to go all the way to Amsterdam to pick up someone else. Then when we finally got to the court, they'd make me wait in the cell block until I could go upstairs. This could take hours.'*

SEPARATION

There is yet another issue related to out-of-home placements that causes much grief and emotional damage. Very often, children within the same family are initially taken from their parental home together, but subsequently the siblings are separated and taken to different foster homes or institutions. An NJI study shows that, in an estimated 50% of cases, siblings are not placed in the same foster home or family home. *'Even though they are entitled to stay together, under international laws and regulations,'* according to children's rights organisation *Defence for Children International (DCI)*. In January 2019, DCI expressed concern about sibling separation in a letter to the Netherlands House Committee on Justice and Security, ahead of a parliamentary debate on civil and family law: *'When a child is forcibly placed out of home, this has a far-reaching impact. It means that the child will be separated from its parents, goes to live somewhere else and will temporarily have less or even no contact with them. For some children, the out-of-home placement also means they are torn away from their siblings, because these siblings are able to stay with the parents or because they are taken to a different foster family, family home or youth care facility (...). It is concerning that such children are separated not only from their parents, but also from each other.'*

Lack of sufficient capacity at youth shelters where siblings could stay together is usually the reason for this separation. But that does not make it right, the DCI states. *'Because when siblings are separated when they are removed from their home, they suffer further emotional damage and their family ties are negatively affected, which may complicate a possible future reunification with their parents.'* Separation means the siblings will have *'limited contact with each other, even though they are entitled to this'*, according to the children's rights organisation. This current practice of separating siblings is also not in line with the UN Convention on the Rights of the Child, simply because this is not in the best interest of the child.

Alex de Bokx of Dushi homes also confirms that siblings do not go to the same shelter after an out-of-home placement. This is an abomination, according to De Bokx, and he always tries to avoid it. At the time of his interview for this book, De Bokx was making every effort to keep children from a certain family together. *'We had just finished renovating the house in Doetinchem. It was finished. We were asked to take in children, this concerned three children from the same family. We said we would, but only if all three would come together. We were not going to separate siblings.'* This case involved a boy of 13, a girl of 6 and a boy of 4 years old, explains De Bokx. *'It*

was agreed that they would come. The boy was in a crisis shelter in Middelburg. He had been living with his father in the village of Dieren. There was nowhere else for him to go. This boy is currently already staying with us. The other two siblings were also supposed to come here. But then, suddenly, someone from youth protection said that it would not be a good idea after all, for all three children to come and stay at Dushi. They felt that the 4-year-old boy was too young. A decision taken from behind a desk.' It angers De Bokx; he fought this decision, but without success. Eight months later, in September 2019, the three children were still not in the same place together. De Bokx shows the curt e-mail correspondence about this matter with the guardian of WSS youth protection services (William Schrikker Foundation). She could not be swayed, much to Alex de Bokx's frustration. He describes the current situation of these children: 'The 13-year-old boy is living with us, the other two are not. I had a discussion with the William Schrikker Foundation, but they are sticking to their decision. And to make matters worse, these other two are not together either.'

Three children from one family all going to a different shelter. While all three would have been welcome at Dushi. A frustrated De Bokx states: *'It's a system thingy. Separating whole families, twins, you name it, it happens. Everyone may be doing their best, but the result is not good enough.'*

6 LOCKED UP

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'I was in the back of a police van. There were two fences. Very high ones, I think about four metres, with barbed wire around them and cameras everywhere. As I entered the grounds, there were guards sitting there — I had to walk through an electronic gate to check if I was carrying any weapons. Then I was body searched. I had to take off all my clothes and take a shower using lice shampoo and put on clothes of theirs. Then they took a picture of me.' This is what happened to Judith when she arrived at De Lindenhorst in Zeist. It is illustrative of the experiences of all wards of state. When they have to go to a closed youth care facility, they are forcibly seized and transported in police vans. That, in itself, is already intimidating, and the children still have no idea what else awaits them in that facility. Close to 3000 children end up in JeugdzorgPlus every year, where they are locked up for behaviour modification and re-education. It is a typically Dutch solution for children that youth care is unable to cope with.

René Clarijs has worked in youth care for decades, including as director of youth village De Glind. He is vehemently opposed to the JeugdzorgPlus regime. He wrote a book titled *'Tirannie in de jeugdzorg'* (tyranny in youth care) on which he obtained his master's degree (MSA) in 2013. He also wrote articles comparing youth care in the Netherlands with that in other countries. Clarijs made an overview of the data for 2012. In Denmark, only 5 children per 5 million inhabitants were in closed youth care facilities at that time; in Belgium there were 15 and in Germany 80. In the Netherlands, as many as 420 children per 5 million inhabitants were in such institutions. Since 2012, the numbers have continued to rise. Clarijs: *'This Dutch score is not just a little worse, it is dramatically worse. The Netherlands is the front runner in Europe in terms of the number of incarcerated juveniles.'*

Decentralisation of youth care was supposed to bring help 'closer' to those in need and should have turned the tide. The opposite happened, because, in addition, the 2015 measure also involved hefty spending cuts. Within two years, the numbers of adolescents in closed youth care rose by 12% and out-of-home placements by 15%. René Clarijs' explanation for this is that, while we keep making systemic changes, we do not change youth care itself. Instead, help is

offered at the end of the chain — expensive help, in institutions where children end up when their situation has gotten out of hand.

For many years, he has been trying to convince everyone in youth care and in politics that efforts should be made to change the help provided at the front end of the chain, in places where children spend their free time. Clarijs calls this the ‘third environment’. The first environment being the parental home, the second is school. Children spend 5,000 hours a year in the third environment, which is their leisure time. At school, they spend only 940 hours. Therefore, much more needs to be done in that third environment. This is where youth care should be deployed, but currently it is not, as he explains. The system is truly deadlocked, much to the disappointment of Clarijs, who makes the following comparison: *‘What we do now is comparable to leaving a child with a cold untreated and wait until this turns into a very severe pneumonia after which we have it admitted to hospital. That’s about what happens; it is the way the system has been organised. Municipalities are so overwhelmed by the money they need to spend on youth care that there is no money left over to do anything on the front end.’*

And so those children end up in these JeugdzorgPlus institutions: *Because there is no safety net at the front end, some children fall by the wayside and end up at the back end of the chain. Nothing is done until these adolescents reach the point where they become troublemakers, beating up old ladies, so to speak. At which time they end up in closed youth care. Looking at this I wonder if we have gone completely mad? Why are we number one in Europe when it comes to incarcerating children? Isn’t that crazy? Such a rich country! All highly educated people, and we can’t even handle the children.’*

PRISON

The adolescents are not experiencing JeugdzorgPlus as help or care, but rather as a prison. For Judith at least, this is what it felt like. She felt like this from the start, in 2012, as soon as she arrived at De Lindenhorst in Zeist. The high fences, the naked body search, the ‘prison clothes’. When asked why she ended up in this closed care facility, she explains that she was a runaway and a truant. She also suffered from mood swings, smoking dope and drinking. But she was not a criminal, she insists. Which is what makes it all the more incomprehensible to her that, in her opinion, she was held in a prison in Zeist. When she returned to collect her dossier, six years later, she still had that same feeling, pointing to

the fences and the gate that kept opening and closing in a lock motion: *'Nothing has changed'*, was her immediate conclusion. *'I entered the premises inside a police van. Once inside the gate, I was pulled out of the van and had to go into the building through the back entrance.'* After handing her the dossier, for which Judith had to wait many months, director Christa Schrodeur stepped outside with her. Judith was smoking a cigarette. The director said she understands that Judith sees De Lindenhorst as an impregnable fortress. While they were standing in front of the entrance, the gate kept opening, just a little bit, and immediately closing again. *'This is because of the lover boys. Out of safety. They come to see the girls here'*, Schrodeur explained. It is necessary to protect the girls against prostitution and human traffickers: *'They are being threatened. These girls are really vulnerable.'*

Judith walked the grounds for a while. She looked around intently, pointing to two buildings: *'There's red and there's blue. When I stayed in red, I had no curtains in my room because you could use those to commit suicide. I had to bend down to change my clothes because otherwise everyone could see me.'* Judith's story is identical to that of all of the wards of state who have been in a closed youth care facility. Although they had committed no crimes, they had to go to 'prison' anyway. This is how they feel. Including Babs, who ended up in the Ottho Gerhard Heldring (OGH) closed care facility in Zetten, in 2016. She also has detailed memories of when she arrived there: *'You enter the premises, and you can actually see fences everywhere. They drive you to the big building. You immediately have either police or security breathing down your neck, they take you inside and then you're interviewed. After that, you have to walk to your group, usually a security guard walks with you. There, they do a urine test. With open doors. They just sit there and watch you pee. They all behave like it's nothing. But I think: Why the fuck are you looking at me while I'm peeing? They tell you to go and do that right in front of them and then tell you to undress all the way. To make sure you don't have weapons and stuff.'*

Then there is Vanessa. She led a rather wild adolescent life. After first fleeing from youth care services, her mother and her guardian eventually took her to a closed care facility. This was many years ago, but Vanessa still remembers exactly what it was like, because it was such an intense experience: *'I had run away to Stadskanaal. I walked around for a week while suffering from appendicitis. While there, I first went to a hospital where they only gave me some antibiotics because they thought I had a bladder infection. But I went crazy with the pain and had a terribly high fever. Then I called my mother and she came to get me. She took me to the hospital in Nijmegen. It was touch and go. It turned out that my appendix had ruptured.'*

From her stay in this hospital, Vanessa had to go straight to Het Poortje, a closed care facility in Groningen, which is on the other side of the country. That was double bad luck, she says: *'Because yes, then youth care had me. Again. My mother was not allowed to say anything, but she knew I was going to "closed". In the car, I asked my guardian: "Can I go to the shop later then?" and he said "Yes, yes, you can." But that was a lie. As I stood in front of the gate, I knew I wouldn't be able to go to the shops any time soon. And then, once you're in there, they treat you like a prisoner.'*

Almost all adolescents report that, when they arrive at a closed care facility, either for the first time or when they return from leave, they have to bend over, naked, for a check to see whether they have any drugs hidden up their anus or vagina. This is called a strip-search, which also happened to Vanessa, who was in closed care facilities in Groningen and Zetten and, most recently, in Harreveld: *'We had to undress completely. After every visit, no matter from whom, even a visit from the lawyer, they strip-search you. You have to bend over three times. Come on, right? I was a child. That's ridiculous really. Pull your tongue up. Hair completely checked. Spinning around, bending over three times, arms wide. They started touching and looking everywhere.'*

But all these far-reaching measures, restrictions, checks and sanctions have little effect, as is also demonstrated by the stories. Many adolescents end up using drugs, or remain on drugs while staying at a closed care facility. Or they develop other, wrong behaviour. Although JeugdzorgPlus is not officially a prison, it does house children with serious problems who, in addition, can also be criminals or addicts. And these adolescents have a negative influence on the rest of the children. They *'infect each other with bad behaviour'*, is what they call it.

Babs speaks from experience. She explains the situation around drugs in JeugdzorgPlus facilities: *'The facility itself is where you can get the most drugs in the world. Really unbelievable, cocaine too. It's very simple to smuggle that stuff in. If a guy has a small bag of weed, he rolls it up and sticks it under his balls. Because they are not allowed to go there. Girls hide it under their breasts. There are people who put shit in a condom and stick it up their ass.'*

Jason thinks the check for drugs is not the worst thing that happened to him in JeugdzorgPlus. He was in closed psychiatric wards and in three different closed youth care facilities; in De Koppeling in Amsterdam and at ZIKOS, the very intensive and short-term observation and stabilisation institute, in Harreveld.

Most recently, he was at De Smaragd, De Hoenderloo Groep's innovative closed youth care. Jason has the most appalling memories from his time at Harreveld (part of the Horizon organisation), and in particular of the punishments he received there. *'It really is a madhouse there. Belittling the young people. For the slightest thing you end up in solitary confinement. I was restrained in a chokehold, several times; they throw you to the ground for the smallest things. It is very repressive, aggressive. We were locked in our rooms, really for hours on end, without knowing how long it would last. We could be locked in our room for 20 to 22 hours a day, with the door locked, every day, for a long as three or four months.'*

GUINEA PIG SET ON FIRE

With these terrifying stories about closed youth care in mind, I went to check out the Transferium, at the time still a closed JeugdzorgPlus facility, in Heerhugowaard. Since 2019, this facility is no longer allowed to provide closed youth care, after losing a European tender. Director Vrank Post appeared very relaxed, as he welcomed me. He described the type of adolescents staying at his facility: *'The kids who come here are those who will set fire to their guinea pig; they are that sick. They are genetically predisposed. Something is wrong in their environment. For example, one of the parents dead and/or parents divorced, sometimes the situation is so dire that it's a miracle they made it to 15.'* Post said to take the criticism of closed youth care seriously; he wished it were not needed at all, but he nevertheless defended the existence of JeugdzorgPlus. *'There is even more need for it today than ever before'*, he stated. *'People should be glad there is JeugdzorgPlus. We take in the most complicated adolescents who no one wants. They are pulled from whorehouses, from drug dens. We don't say no to any child who needs to be in our facility. I think there should be more appreciation for the terribly complicated work that we do. We go through the most horrible situations with these kids.'*

.....
'Some of the adolescents we get here are very disturbed; they will set fire to their guinea pig.'
.....

'Today is the first day of the rest of your life', is written in large letters on the walls of the courtyard. Except for the moat and the high walls, the red brick building of this closed care facility looks fairly open. No grim appearance with fences or bars in the windows. Director Post himself also has an open attitude: he speaks to the press without a communications officer present, he does not set any conditions

in advance of the interview, nor does he ask to see the text before publication. Remarkable in this industry. In his office is a cage with a brown lop-eared bunny. It belongs to a girl who hears voices that sometimes are telling her to kill the rabbit. Post watches over the animal. *'I told her: it's your rabbit, your responsibility. If you hear voices telling you to harm the rabbit, you can take it in to my office.'*

We are seated at a round table on translucent purple-coloured acrylic chairs. On the wall hangs a painting of a crying gypsy boy. More images of sad gypsies hang in the corridor. *'Art is about emotion. I get a lot of comments about those crying children. But they tell a story. The adolescents here all have attachment disorders. A child that says, "I'll kill my mother or fuck my dog", seems angry. But, in fact, this is grief.'* Vrank Post previously worked at a youth detention centre. He wrote five books about these centres, child soldiers and crime, about the enormous problems, just like those of the adolescents staying at the Transferium. Post gives an example: *'We had a boy who had been here for two years. He wasn't getting any better. He had the IQ of a parakeet. He went on leave, stole a scooter and committed armed robbery.'* Youth protection then wanted to transfer the boy to a more severe facility elsewhere, but the Transferium prevented this transfer, as that would have been a tragedy for him and his family. *'The family guardian thought he should go to another facility in the eastern part of the country. We really put our foot down to prevent that. His mother was living in North Holland and we wanted to keep him near her.'*

Post gives another example of the types of children staying at the Transferium: *'We have a 13-year-old boy here. His stay costs half a million euros per year. He has a chihuahua dog. That's his soft thing. He sits here alone in a room. The municipality pays. He has started to go back to school now and eight times out of ten this goes well.'* However, once he turns 18, he will have to leave closed youth care, because he will be treated as an adult, and Post fears that the boy will not do so well after leaving the Transferium. *'He has to look for help elsewhere, but his capacity for learning is not great, nor is his conscience. Chances are he will commit a robbery and be put in the [special detention centre (ed.)].'* A wry observation, but bitter reality, according to Vrank Post. He thinks there are 'unrealistic expectations' when it comes to closed youth care. *'We get children here for whom things have been going awry for 15 years straight — and we have to solve that in eight months. This is impossible, it cannot be done. This requires far more treatment.'*

Lawyer Maria de Jong-de Kruijf explains the official purpose of closed youth care. She quotes from the Dutch Child and Youth Act (2015), which translates as:

Serious behavioural problems should be treated and behavioural modification should be achieved, so that a child is able to function in society again.'

To achieve that goal, children are also deprived of some of their rights, such as the right to live with a family and the right to personal freedom. And this is where interests collide, according to this critical lawyer — because the Child and Youth Act does not stipulate which measures are allowed to be taken in such facilities, nor does it say what this treatment should consist of. And because so little has been legally defined about JeugdzorgPlus, children all too easily end up in these closed care facilities. Often, they themselves do not understand why they are being locked up. During a study day on the occasion of obtaining her PhD degree at Leiden University, De Jong said that she had been shocked by their stories when, as part of her thesis research, she had interviewed adolescents in closed care facilities. *'When I started my research, I was a bit naïve about what types of adolescents would be in JeugdzorgPlus. I was a lawyer and was unfamiliar with the institutions. Thus, every time I visited, it struck me: what kind of life will these children actually end up with and how little self-awareness some of them would have. How difficult it is to really understand why they are there. One of them once told me, when I asked why they were there: "Because I had to lose 20 kilos."*

'TAKING A GYM BAG TO AN INSTITUTION'

Levi van Dam, remedial educationalist and scientist, believes that children do not belong in any youth care facility, especially not a closed one. He researches alternative forms of youth care. In that context, the enthusiastic Van Dam obtained his doctorate from the University of Amsterdam on a method that he called JIM (acronym of the Dutch 'your choice of mentor' [*Jouw Ingebrachte Mentor*]), where children appoint a confidential advisor who will support them during the time that they are involved with youth care.

The JIM method is primarily designed to prevent out-of-home placements. By letting children choose their own advisor, who will be involved in the decisions about what type of help would be appropriate for them, and who will assist and support them. Van Dam feels very 'uncomfortable' about the large numbers of children being placed into care in the Netherlands. *'We are placing the most vulnerable children in a very unnatural setting. We literally say to a 14-year-old child with a gym bag over his shoulder: "In six months you will be allowed to go home again."*

It is an illusion to think that, by then, things will be fine again, Van Dam believes. *'I don't believe this can work. Removing a child from its environment is inhumane and I have seen scientific proof that it does not work. That's where my discomfort lies.'*

However, a substantial part of the total youth care budget currently does go to these institutions and to specialised, extremely expensive closed youth care. Levi van Dam: *'If we can save money there, then we can help young people better and free up funds to help many more of them.'* And so the JIM method was conceived: *'I thought: Can't we think of something better? Very simple.'* The JIM method can be the way to get things moving again, to get a child back on track. Like what Marianne, Tibo's grandmother, wanted to do for her grandson. By giving her an official role as a JIM, her grandson Tibo got back on track. It worked out well for Tibo, in the end. The JIM method, in actual fact, is a new form of an older, forgotten tradition. Marianne: *'In the past, in the 1930s and 1940s, when extended families all still lived together, it was the same, wasn't it? If there was a problem, there was always an uncle or an aunt or a grandmother who helped a child like that, right? A JIM is actually something from the olden days, isn't it. I always say that, you know, help used to just be there.'* Had she, as a closely involved grandmother, been able to be the JIM for Tibo even earlier in time, he would almost certainly have been spared first being locked up in De Lindenhorst in Zeist. *'Did it do any good, this out-of-home placement, at that closed care facility?'* She wonders aloud. *'I don't think so. In hindsight, nor did the guardian. That's why I'm so enthusiastic about JIM. Children no longer trust anyone, including their father, mother, and social workers. However, they will trust a JIM that they can choose themselves. And the advantage is that the same JIM will continue to support the child, unlike a social worker, who disappears again, or gets another job. But a JIM has a bond with the child. A JIM will always be there.'*

Levi van Dam and his colleagues have the wind in their sails: the Minister of Health mentioned the JIM method in his action programmes as an example of innovative youth care, according to a proud Van Dam. And an initial scientific evaluation from October 2019 brings even more good news. It shows that for 70% of adolescents who had help from a JIM, an out-of-home placement was actually avoided.

‘WITH THEIR BACKS TO THE WALL’

Despite new initiatives to keep children out of youth care facilities, things are not progressing very rapidly, in the meantime. More children than ever are currently being placed in closed care facilities. Amongst them 14-year-old Nola, who was still staying at the Transferium at the time of the interview. Nola and her mother tell their story. Mother Jacqueline, a warm woman with a husky voice, is not ashamed of the fact that her daughter is at the Transferium. She says that JeugdzorgPlus can happen to any child, from any family, even the best family: *‘It’s not just immigrants, anti-socials or the lower educated. I have always been very open, we live in a small village. I’ve always said what was going on.’* And when she did talk about it, she turned out not to be the only mother with children with complex behavioural problems: *‘You know that, when you speak up, suddenly you hear a lot of stories of people who are in the same position.’* Jacqueline also recognises that parents often agree to their child being locked up, purely out of desperation. This was also the case when Nola had to go to the closed care facility. Looking tenderly at her daughter, she says: *‘Nobody actually belongs there. But we had our backs to the wall. What were we supposed to do with you? Why did we do this? For our own safety, and actually from a feeling of love. Out of love.’*

In practice, however, things often turn out to be more complicated. Most young people in closed youth care do not experience their confinement as ‘an act of love’ at all, and only become angrier, more aggressive or depressed. Transferium director Vrank Post says that girls, in particular, often and rather quickly become depressed. *‘Those girls have experienced terrible things. They are lifted from their beds in a whorehouse, come here and suddenly find themselves in a void of peace, cleanliness and regularity. Of course, this makes them depressed. In the period before their arrival, they went from stimulus to stimulus. They were hounded. Here, they’re facing a void.’* It is the job of the social workers at the closed care facilities to help these derailed and often also depressed adolescents back on their feet. Post says: *‘It works for some children, but for many it does not. For example, because they are intellectually challenged, or addicted, or because of the parents. They just have had a terrible life.’*

Of course, Vrank Post would also prefer it if closed youth care could be abolished. But we simply cannot do without JeugdzorgPlus, he says. *‘It will always be necessary to lock up adolescents, temporarily. Because they run away and because they can’t stay anywhere else because of their aggression. Here, they learn that aggression is not the best solution, nor is running away. The children here throw with boiling water,*

chuck a piece of glass from a broken window, or smash their room to bits. And they have a great distrust of adults.'

BARBED WIRE

Director Jean Paul de Rijk looks out the window, pointing downwards: *'This is where a girl got very angry. It's her bedroom window.'* Outside, pieces of broken safety glass lay scattered on the ground. He discovered it while touring the sprawling grounds of OGH, the closed care institution in Zetten. He immediately arranged for a new window to be installed. We walk on. Borders filled with gravel in the courtyard garden had to be replaced with artificial grass. De Rijk commented: *'The adolescents were swallowing the pebbles.'* He is a friendly director of a JeugdzorgPlus institution who also spoke with me three months before that, when our conversation was only supposed to be informative; I was not allowed to quote him then. But later, I was allowed to come back for a tour and could use what he said. I was watching youngsters returning from the school across the road. They are shouting at each other. A supervisor walks with them and calls out: 'hurry up!'. These are young people who already have a little more freedom and no longer have to go to the in-house school. In the corridor, a girl and a lady in a white dress have a discussion about whether the girl is allowed to 'walk freely around the grounds'. Outside, everything is vandal-resistant. A table-tennis table is made of concrete, as are the benches that are fixed to the ground. Even the game of checkers and chess is made of concrete. We tour the large Olympic-sized sports hall. Then we pass a little church on a hill where Ottho Gerhard Heldring is buried, the preacher who founded a youth boarding school here in 1847. As we continue our walk, this leads us along the empty stately home *Het Groote Huys*. Somewhere else there are horses and covered wagons. Director De Rijk stresses that there is a difference between the strictly closed section and the rest of his care facility. The strictly closed section has barbed wire, the doors are very heavy and stickers saying 'close the doors' are everywhere. He points in the distance to the more open part where young people also have more freedom. This has another immediate disadvantage: *'At the back, they can easily jump the fence, into the cornfield. It happens. Two years ago, three boys escaped from here. We called the police and they came from Amsterdam with a helicopter and found them with the use of infrared light.'*

We continue walking along a glass-walled corridor, a walkway between buildings. It is reminiscent of a zoo where you can watch the wildlife through the glass. The adolescents are only allowed to walk here under supervision. This is necessary, because otherwise they will go crazy or run off, De Rijk explains. He points to the gap between the bottom of the glass and the ground and says: *'This was still a point of discussion, because a brick could be slid under with which they could then smash the glass. And on the other side, they could pass things to each other. So now there is mesh. And they were climbing over the courtyard fence, which now has barbed wire again.'* Locking them up, therefore, is not always successful. Running away can also lead to tragedy, as happened in May 2017, when a 17-year-old boy drowned in the nearby Nederrijn River after fleeing from the closed care facility in Zetten.

Shortly after this meeting, a court case revealed that OGH in Zetten was experiencing much trouble from lover boys who would recruit girls for forced prostitution. The girls need to be protected from these lover boys, who are actually pimps. But even this does not always succeed. Many of the girls are intellectually challenged. During the interview and tour in Zetten, however, not a word was spoken about lover boys.

ANTI-TEAR CLOTHING

'Looking to one side, I could see eight metres of bars covered in barbed wire. If I looked to the other side, I saw one of those steel doors with a small peephole. A cell. Do you know what it is? OGH has been a lot of things. It started as a women's shelters for pregnant teenagers. Before it turned to closed care, it was a juvenile detention centre. So, they never changed those buildings.' Babs had been forcibly admitted to the OGH in Zetten. Two years ago, she was still locked up here. The fact that OGH was previously also a youth detention centre is still palpable, according to Babs. Here, the young people face a 'prison regime'. *'On my very first day here I was pushed to the floor and thrown into solitary confinement. And frisked and body searched. They searched my bag and found money, cocaine, weed, a weapon and seven phones. At that point, I was still standing there in that anti-tear dress. Then they said, "We need to body search you." I asked what they were going to do... Well, they actually check your whole body, except for the places where it is officially forbidden. They just feel you up, everywhere. If you're being frisked, at least you are still wearing normal clothes, but when you're body searched, you're naked under an anti-tear dress.'*

The term is a frequent one: anti-tear clothing. Everyone is talking about it. A closed youth care facility apparently includes anti-tear clothing, which adolescents must wear when they are in solitary confinement for their own safety. Finally, I am able to look at such a garment here in Zetten. In an office near the cells, director Jean Paul de Rijk takes one from a cupboard and removes the plastic. It is a blue shapeless dress made of heavy denim. Non-tearable, which means that youngsters cannot tear it into strips with which they could hang or strangle themselves. We are in the intensive care section where the cells are located, also called *comfort rooms*, a name wrongly suggesting a degree of luxury such as in an expensive hotel. There is also an 'extra secure room'. I see beds fixed to the floor, plastic-coated mattresses, cameras.

De Rijk calls the room with the pale green floor 'the king amongst solitary confinement cells'. With a small port in the cell door for 'first contact', with a toilet and shower and a big screen fitted inside the wall. This is a TV/touchscreen. Director De Rijk commented: *'Occupants can watch a film, or see the weather forecast, and control the light and temperature themselves.'* But there are no curtains or rails. *'They were using them to hit with'*. Therefore, at night, a piece of blackout cloth is now hung in front of the window, attached with Velcro. She is not here now, but the girl currently staying here is severely cutting herself, says De Rijk. The toiletries present in the room are proof that there is indeed a girl currently residing in this 'king amongst solitary confinement cells'. *'She bites into the wounds, biting pieces out'*, De Rijk said about the harm the girl inflicted on herself. For her own protection, she was put in plaster. *'We first put her arm in plaster in a straight position, but she kept pulling it off. Now, it is in bent position so she can't take it off anymore.'*

IMAGE

Then I went to the next closed care facility, De Koppeling in Amsterdam. This used to be a youth detention centre as well, under the name 't *Nieuwe Lloyd*. A group of young people passes by. They are coming from school and are walking to their group for lunch. Wearing sweatpants, comfortable sweatshirts, caps on; a mix of white and coloured. Two boys are blocking the road. One of them shouts, with a smile on his face: *'I'm going to kidnap you. No, just joking'*. I smile back, but feel very sorry for them.

De Koppeling is located on the edge of the city, on a dreary and windy site, with grand café Zip & Zo and fast-food restaurants KFC and Burger King. The facility consists of two parts. The old building, the former JJI, and the new wing which De Koppeling built in 2012 at the request of the Ministry of Health, Welfare and Sport, under the framework of JeugdzorgPlus. The entrance has brightly coloured glazed tiles. All the closed care facilities that I have visited have brightly coloured reception areas. This is clearly a strategy, as this gives a 'softer' impression. But this cheery look cannot remove the toughness emanating from the closed care facility. Because those colourful rooms also have a set of parallel doors with locks, walk-through detection gates and cameras.

At De Koppeling, staff are sitting behind glass, looking at 15 screens to monitor the various areas of the large complex. This is also where visitors have to report. Guards with rattling bunches of keys on their belts walk to and fro. A girl of about 15 years old, her hair tightly pulled back, is following a supervisor like a zombie. The interview with director Frederique Coelman about De Koppeling and the JeugdzorgPlus regime is arduous. She uses ambiguous language, calling JeugdzorgPlus *'care behind closed doors'*. According to Coelman, the Netherlands has thus created *'a single solution for actually a very complex issue'*. Nevertheless, this 'single solution' is resorted to rather often, Coelman admits. *'I know that, in the Netherlands, we have the most adolescents in closed youth care compared to other countries.'*

At the end of the laborious interview, director Coelman gives me a quick tour of De Koppeling. We come across a wall and high fencing with spikes on top. Coelman says: *'This was the old entrance. Detection gates, locks, cameras, guards behind glass. We didn't want that anymore, this is no longer a prison. We now have a new entrance at the car park.'* She refers to the colourful entrance. But the fences and barbed wire did return, eventually, as Coelman adds. *'The kids kept running away from here and the parents didn't want that.'* The quotes from the interview that I sent the director ahead of publication, as we agreed, consisted of transcripts of the literal statements recorded on tape, came back completely rewritten. Both Coelman and her communications officer, who was present at the interview, had enthusiastically crossed out parts of the text. Furthermore, they said they would not give permission for publication, not even if I adopt their 'corrections'. But this was not what we had previously agreed to.

MEDIAEVAL REGIME

De Koppeling is apparently afraid of negative publicity, of a bad image, after critical questions about closed youth care. This fear is justified. After all, closed care institutions are under fire. JeugdzorgPlus is in fact just another prison, is the widely shared opinion. Perhaps it is even worse, because so little is regulated for young people. And more and more bad stories are surfacing on this subject.

Like the one about Iboya. She was in the Schakenbosch, a closed care facility in Leidschendam. Her grandmother, Jose van der Helm, was horrified by what she saw there. Iboya, without having committed a single offence, ended up in what she and her grandmother consider is a prison. At home, things were no longer working out between Iboya and her mother. Something had to be done. That was why Jose van der Helm, beforehand, had spoken to her granddaughter about Schakenbosch in positive words: *'Ah well, it's only a temporary place to stay. And you'll be rid of all that fighting at home.'* However, when she saw with her own eyes what the closed care facility was like in practice, this radically changed her mind. Iboya's mother and grandmother took Iboya to Schakenbosch together. Straight away it did not feel right, Jose van der Helm recounts. *'We went inside. Gate opened, gate closed. A surly guy checked her bag. I was like: What's going on here? And the doors being locked. I thought: We're in prison here. Then we had to leave and Iboya was crying. I left quickly and went for a coffee first. I couldn't leave straight away, I was so upset. My daughter was shocked. She hadn't expected it to be this closed. Well, it WAS a prison.'*

Her granddaughter's stay in that closed care facility was one big negative experience. Since that time, Van der Helm has felt compelled to voice her disapproval of JeugdzorgPlus in the media whenever current events would warrant it. The newspaper *Algemeen Dagblad* of 15 June 2019 contained a long letter to the editor that she wrote in response to a report by the De Winter Committee on violence in youth care (*Geweld in de Jeugdzorg*), which had just been released. This report showed that violence was and still is omnipresent in youth care institutions in the Netherlands. Especially in the closed care facilities. Van der Helm cited what she wrote in response to the news about this report: *'If the ministers are unaware of the fact that children of around 13 years old are being locked up in institutions with medieval regimes, they are walking around with their eyes closed. My grandchild of 15 ended up in a closed youth care facility. Never been in touch with the law, but she was a difficult teenager. They locked her up in a small room, day and night.'*

If I was allowed to visit at all, we were put in a bare room with a guard who had visibly had a bad night. In a word, repulsive. Because the door to her room did not lock properly, she was regularly targeted by other children. When I spoke to the head of department about this, she informed me that this was a good thing that would make her tougher. It was part of the policy.' During the conversation, Jose van der Helm's emotion is still there, after all this time. She cannot and will not understand why children with parenting problems end up in prison-like institutions. *'For my grandchild, this remains a black period in her life, from which she has gained nothing,'* is Van der Helm's conclusion about what the incarceration has done for Iboya.

Expert Peer van der Helm [not related to José, ed.] is also a staunch opponent of closed youth care. In early December 2019, it had just become known that the JeugdzorgPlus institution De Hoenderloo Groep (DHG) in Deelen was to close its doors — due to abuses there and because of financial problems at Pluryn, its parent organisation. Peer van der Helm, in the daily newspaper De Stentor, said that he had been 'eagerly awaiting' this moment for ages. *'You really shouldn't want this system anymore. There are some 4000 to 5000 young people in the Netherlands staying in a closed youth care facility [including psychiatry, ed.] and having to deal with repression. Around 1600 children are staying in JeugdzorgPlus institutions, such as in Deelen, and this number continues to grow.'* Peer van der Helm is bitter about how adolescents with complex problems are treated in the Netherlands and that nothing ever seems to change, as his quote in De Stentor shows: *'I have just read some reports on suicide in young girls. In hopeless situations like this, while they are in solitary confinement, or conveniently under a blanket in the corner of the room. Then the staff doesn't have to think about it. Until she's hanging from the shower rod. And is anyone responsible at that point? Of course they're not. No one in particular. But it does happen. And parents are always seen as being querulous.'* During previous interviews for this book, he indicated that he thought he was one of the very few who dared to say anything, to expose the abuses in closed youth care. *'Of course, I keep shouting and screaming that this is really bad'*, he said of the whistle-blowing role he actually plays. When asked how long he will continue to play this role, he is adamant: *'Until my retirement.'*

Van der Helm is not being appreciated for his efforts. He is even reprimanded by directors of youth care institutions for his criticism. This has happened to him on several occasions already. There is also something else that is bothering him: the studies that he has conducted and subsequent reports that he has provided at the request of the closed care institutions, over many consecutive years, on the

living conditions in these homes, are not being published. The institutions are afraid of the consequences. But they should be made public, Peer van der Helm believes. Because things are bad. They should be open about this, he says, and especially address the wrongdoings with regard to aggression, punishment and, for instance, putting young people in solitary confinement.

Most vulnerable, according to Peer van der Helm, are the girls in JeugdzorgPlus. In De Stentor newspaper, in the piece on the closure of De Hoenderloo Groep, he writes about the dreadful situation for girls in closed youth care facilities. *'Often they would have been abused already, and then once again in an institution like Hoenderloo. The girls are cutting themselves, harming themselves. The staff unable to act on it. This leads to the most ridiculous rules: "If you manage not to throw up on two occasions, you're allowed ten minutes on your phone" and "you're not allowed to see anyone during the holidays, except your parents on Boxing Day between 17:00 and 19:30 hrs", or "you're only allowed to wear anti-tear clothing, and once you do, you will not be provided with sanitary pads".'*

SOLITARY CONFINEMENT

There is the anti-tear clothing again that adolescents are wearing when in solitary confinement. Which brings up the next, very thorny issue of JeugdzorgPlus; the solitary confinement cell, or separation room, with the lighter variants in terminology being 'chill-out' and 'time-out'. It is estimated that, in closed youth care facilities, at least a thousand youngsters end up in such a room, each year. Increasingly often, harrowing stories are coming out about this. Like in the case of Jason. He had been staying in several closed care facilities. But his experience in Horizon's ZIKOS in Harreveld was the most horrible. In Harreveld, Jason was continually put in solitary confinement. He wrote about this and his experiences in other closed care institutions at length in his book *Jeugdzorg, mijn dagboek* (Youth care, my diary).

In Hoenderloo, at De Smaragd, which has the less stringent form of closed youth care, he eventually fared better. His stay there was the last for him in a closed care facility. Erwin Duits, director of DHG, the organisation to which De Smaragd belongs, and Jason's supervisor there discovered that Jason wrote very aptly in his diary about his experiences in JeugdzorgPlus. They encouraged him to turn it into a book and subsequently self-published it. They wanted the outside world

to hear what closed youth care does to children. *'It brought me to tears'*, Duits said about Jason's book. However, at parent organisation Pluryn they were not happy about his publication, he said. *'That was a little bit of an issue.'* From the board's point of view, understandable. After all, the content of the published diary is shocking. It contains very serious passages about JeugdzorgPlus. Also about solitary confinement. He writes most negatively about ZIKOS, where he ended up in solitary confinement 'countless times', as Jason explained in an interview. *'I can't even count the times I was put in solitary confinement, but it was very often — usually for a number of hours or a night.'*

In his book, Jason describes how things went when he had been in time-out for a considerable amount of time at ZIKOS and subsequently was caught with razor blades with which he was cutting himself. Jason is transgender. At the time, he was still the girl Latisha, also known as Asha. The diary says this about solitary confinement: *'I took out my razer blades that I had put between my teeth and my cheek and held them in my hand. When the door opened again, I handed them over. "Asha", one of them said, "You're going to the separation cell." (...) I spent that night in solitary confinement.'* And then, the following day: *'As I opened my eyes, several people stood in front of me. The light in the cell blinded my eyes and I couldn't see. (...) I hadn't slept at all. When I was in the shower, my head filled with thoughts. I had not even been allowed to take my own clothes because they were afraid that there may still be blades in them.'*

About a month later, Jason (as Asha), again in Harreveld, was put in solitary confinement. This time in the 'chill-out'. *'Jaap clamped his arm around my neck and dropped us both to the ground. (...) Then they dragged me and threw me into the chill-out. (...) In a panic, I looked around the pillow-covered room. Everything was white. Room six.'* During an interview, Jason explains how terrible being in a chill-out is. *'Chill-out, time-out. You can give it another name, but it's still solitary confinement, a separation cell. It's a bare room but scarier. With cushions covering the floor, for really psychiatric people. I got locked up in there every time I was at Harreveld.'* A chill-out is a hallucinatory space, according to Jason. That's why it's terrible to be in it. He describes how he once tried to feel safe in the chill-out, but in vain: *'I had my hoodie on, but that wasn't allowed. So, I turned over a chair and sat under it. That gave me a sense of security. But they took that away, too.'*

Emotional stories, which come up again and again in all conversations with young people, staff and administrators. In fact, everyone is troubled by these solitary confinement cells. They are very much under discussion and, therefore, also on the political agenda. The Minister of Health determined that the use of

solitary confinement cells had to be abolished by 2021, in both mental health care and regular youth care. But, by 2023, this deadline had still not been met. It is indeed a difficult task. Banning solitary confinement in closed youth care will, if it is successful at all, take many years, because it requires a completely different way of working. In a sector that is in chaos, where everyone is mainly surviving, and where financial cuts have to be made, such a cultural turnaround is not so easy to achieve.

In June 2019, the IGJ Inspectorate came out with a fact sheet on reducing freedom-restricting measures (*Terugdringen vrijheidsbeperkende maatregelen*), listing the things that need to be regulated to ensure that, by 2021, children in closed youth care would no longer end up in solitary confinement. However, the same fact sheet already shows that meeting this deadline would be very complicated. The Inspectorate has visualised the process and the measures required in the fact sheet. The positive developments towards abolishing separation rooms are listed in a green column. The 'impeding factors', as IGJ calls them, are in an orange column. One look is enough to see that there is still a long way to go: the orange column is twice as long.

Child and youth psychiatrist and director Peter Dijkshoorn, however, insists that solitary confinement in the mental health care system as well as in closed youth care should disappear. To achieve this, he founded a movement (*'Beweging van Nul'*) in late 2018, together with 15 psychiatrists, psychologists, remedial teachers, administrators and researchers. In collaboration with journalist Tilly van Uffelen, he also wrote a book, *'Jij hebt de sleutel'*, about the road towards humane youth care without solitary confinement, which was published in mid 2019. The back cover reads: *'There is growing awareness in youth care of the fact that solitary confinement needs to stop.'* Followed by the clear message: *'If it is up to the minister, then children and young people will no longer need to be kept in separation from 2021 onwards. If it would be up to those who have been and still are experiencing it themselves, it would stop today.'*

In the institutions of his own youth care organisation, Accare, these separation rooms (or cells) were already banned in 2006, as Peter Dijkshoorn explains. Since then, the annual number of solitary confinements at Accare decreased from 400 to just 1. *'It has been an intense process that demanded a lot from the staff. But they stuck it out by continually working from the conviction that solitary confinement is inhumane and unnecessary.'* During an interview, Dijkshoorn once again revealed

his sincere aversion to solitary confinement, or as he calls it, the 'shit separation'. Nevertheless, he was also doubtful about whether such confinement could be fully terminated by 2021 in the entire youth care sector. *'But that doesn't mean that it can't be done,' he adds.* Dijkshoorn outlines what his institution is doing to achieve this. *'At Accare, we have been averaging two separations a year for years now. Every separation is analysed. Why was it necessary, what went wrong? How can we do better? What can we do differently next time?'*

It was quite a struggle to finally achieve close to no solitary confinements at Accare. *'It was our policy that we were going to stop using solitary confinement and get rid of the separation rooms. The Inspectorate forced us to enter into an agreement with another organisation where children could go in case of emergency. This made the staff visibly nervous, wondering: "What if they don't have a place available when we need one? And what if things are hectic, how would we then get someone over there?" This led to tension, which caused a great deal of unrest about the growing risk of perhaps having to face this type of problem at our facility. Then we decided on keeping one separation room. It represents the most expensive, unused square metres here.'*

'BACK TO ZERO'

Totally abolishing solitary confinement, thus, has proved difficult. The sector is nevertheless moving a little bit in that direction. The closed care facilities have no other choice. They are consulting with each other about ending solitary confinement. Peter Dijkshoorn also participated. *'I attended a meeting where it was collectively decided: we have to stop this. It was a lived-through moment: This is where we have to go.'*

In February 2018, JeugdzorgPlus directors declared that they would stop applying solitary confinement. This had everything to do with the action programme on youth care ('*Zorg voor de Jeugd*') that was being developed at the time, which the Minister of Health subsequently presented in April 2018. This programme confirmed the agreement reached in the youth care sector to indeed reduce 'forced solitary confinement' by 80%, by the end of 2021. And that, by autumn 2021, a bill would be included about prohibiting 'specific separation rooms'. However, matters continued to be cumbersome, according to a report on the second phase of the project, titled '*Ik laat je niet alleen*' [I won't leave you by yourself] that aimed to explore the possibilities of reducing the use of solitary confinement

in JeugdzorgPlus. The report was published in June 2020. Several things stand out in the report. For example, it does not use the word ‘abolish’ with respect to the solitary confinement — it says ‘reduce’. Furthermore, it does not mention a deadline for total abolishment by 2021, but does say that ‘forced solitary confinement should be reduced to zero by 2022’. Today, in 2023, this objective had still not been achieved. Thus, the reports and plans on abolishing solitary confinement in youth care are contradicting each other. The research project *‘Ik laat je niet alleen’* makes another thing painfully clear: how often children in the Netherlands are being put in solitary confinement or a similar situation. All of the ‘forced solitary confinements’ between October 2019 and May 2020 were recorded. This is the first time the sector has kept mandatory figures on so-called ‘unplanned separations’, or ‘placing adolescents against their will in a room from which they are neither able nor allowed to leave’.

The outcome of this recent form of registration is not a cheerful one. Despite all the reports and action plans and the stated intention to abolish separation, it is still happening extremely often in youth care facilities. In the 8 months of data being recorded, there were as many as 4,575 cases. The vast majority of ‘unplanned separations’ involved adolescents who had to stay in their own room for punishment or protection. But in close to 400 cases (9%), young people ended up in solitary confinement or a separation cell anyway, for a variety of reasons. Another 435 children (10%) were put in chill-out/time-out, in a seclusion room or in an low-stimulation room, as other separation rooms are euphemistically called.

Thus, the measure of solitary confinement is indeed still applied, rather often. And the actual number of confinements is even higher, seeing that the report speaks of ‘under-registration’ because some institutions have provided no information or only some. The conclusion that ‘often, the working method and culture within JeugdzorgPlus institutions is still focused on control, management and repression’, is not a hopeful one. However, the umbrella organisation, Jeugdzorg Nederland, is quite satisfied with the progress made in the project *‘Ik laat je niet alleen’* and states that the individual institutions have set to work, energetically, to abolish solitary confinement. The website of Jeugdzorg Nederland carries the optimistic statement, in big, bold letters that ‘Jeugdzorg lays the foundations for reducing forced solitary confinement’. But it also says: ‘The objective of reducing forced separation has not yet been achieved’. It requires patience. Jeugdzorg Nederland, at the time, did not expect to achieve a complete end to solitary

confinement before 2022, writing: *'It is not expected that forced separation will be reduced to zero within two years'*. The required cultural change will take some time. It seems insiders may be proved right when they say that things are moving so slowly because there is not much overall willingness to ban solitary confinements in JeugdzorgPlus. In fact, another report, also belonging to the youth care action programme, about the best care for vulnerable young people (*'De beste zorg voor kwetsbare jongeren'*, published in March 2019), explicitly states that enforced separation remains necessary.

Whether youth care workers were happy with this report is debateable, as it disqualifies them. It suggests that solitary confinement rooms remain necessary because staff in closed youth care are not skilled enough to cope with their heavy task without the power tool of solitary confinement at their disposal. The report literally states : *'(...) the professionals indicate that working with highly vulnerable young people is not for everyone. It requires enormous flexibility to offer truly tailor-made solutions, intensive personal contact with young people and their parents, as well as courage and a focus on action, especially when the situation threatens to become unmanageable and forced separation is imminent. The ability to make choices other than solitary confinement, at such times, is something that not everyone possesses nor can it be learned.'*

This is quite something to hear, as a hardworking care provider and supervisor in youth care. Nonetheless, there are JeugdzorgPlus institutions that, despite all obstacles, are working on closing their separation rooms, such as at the Transferium in Heerhugowaard and De Koppeling in Amsterdam. De Koppeling decided to abolish solitary confinement altogether, from 1 November 2019. *'It has become a matter of principle for me,'* explained director Frederique Coelman in the Volkskrant. If there is a separation room, it will be used. She added: *'You shouldn't want that. These children have been abandoned so many times. If you lock them up in solitary confinement, you let them down yet again.'*

Peer van der Helm, however, is sceptical about the sector's attempts to abolish solitary confinement. If the closed care facilities would actually succeed in banning these separation rooms, they will think of other ways to isolate children in violent situations, he predicts. One way is to simply lock them in their own room. This already happens, en masse, and will happen even more often in the future, says Peer van der Helm. He graphically explains what would happen, in such cases. *'The door will be locked and the furniture removed. And there it is, another*

separation room. They will first put a child in its own room. What will this child do then? It'll turn the stereo all the way up. The noise will resonate throughout the whole building. Then the supervising guys will come back in and take everything away; in effect 'stripping' the room. What will this kid do next? It will pick the electrical wires out of their sockets and try to start a fire. I know staff who have PTSD because they have had to remove children from burning rooms. This happens everywhere. Seriously. And if the power would be turned off, those kids will put a toilet roll in the toilet and flush a thousand times, until the water flows from under the door. At which point also the water would need to be turned off.'

7 CATCH-ALL

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'Welcome to Jeugd zorgPlus. Life is not all roses here.' Vrank Post, director of the Transferium in Heerhugowaard, is not sugarcoating it. We are sitting in his office. The interview is interrupted by the muffled sound of groans coming from far away, followed by someone crying, in fits and starts. The noise is coming from the corridor and it is getting louder and louder. It is distracting me and I ask him whether things are going okay over there — I say that I have a knot in my stomach just listening to it. Post responds rather unemotional: *'We have court cases today. I suspect someone's stay here has been extended and they're not terribly happy about it. What you're hearing is enormous grief.'* The crying then turns into high-pitched screams. Only after about four minutes do they slowly subside. It illustrates how much it upsets these adolescents to hear that they have to stay at the facility even longer. The closed care facilities are the end of the line in youth care. It is where the children and adolescents go that nobody knows what to do with anymore. An institution with barred windows and fences. Such a stay requires the juvenile court to issue a so-called 'closed youth care authorisation'. In this book, I discuss this Jeugd zorgPlus in detail, because it is the most invasive and the most expensive form of youth care, and because it is the subject of much debate. Virtually all young people who have stayed at a Jeugd zorgPlus facility are traumatised when they come out again. There is a growing realisation that locking up children for their 'own good' is not the best way of solving serious behavioural problems or treating complex psychiatric conditions.

But Jeugd zorgPlus has not yet been abolished — far from it. The Netherlands is the top country when it comes to locking up children; it happens some three thousand times a year. These adolescents are derailed, aggressive or addicted, or they need to be locked up to keep them out of the hands of lover boys. Often, they have problems such as eating disorders, autism and depression or even being suicidal. Closed care is the toughest and most expensive youth care there is. A year in a closed care facility costs over EUR 150,000 per child and this does not yet include examination, treatment or therapy. How did Jeugd zorgPlus become established in the Netherlands? The Closed Youth Care Act, which entered into force in 2008, under responsibility of the then Minister of Youth and Family

(André Rouvoet of the ChristenUnie), was the predecessor of the Child and Youth Act of 2015.

JeugdzorgPlus, thus, was established fairly recently and took shape rather by accident. Until 2008, young people with serious behavioural problems who had not been sentenced (i.e. civil-law offenders) were housed in juvenile detention centres (JJIs) together with criminal adolescents who had been sentenced (i.e. criminal-law offenders). These detention centres were of course part of the Ministry of Justice. In the past, there was never any debate about mixing these two groups. But then this changed. There were growing concerns about placing criminal and non-criminal adolescents together in JJIs, especially amongst parents who feared that their innocent children would be faced with and 'contaminated' by bad behaviour from the juvenile criminals who were also staying at these detention centres. There was increasing social and political pressure to change this situation. The Ministry of Youth and Family agreed, and subsequently came up with the Closed Youth Care Act, which enabled the establishment of JeugdzorgPlus institutions in the Netherlands.

Family and juvenile lawyer Maria de Jong-de Kruijf obtained her PhD on closed youth care in early 2019 with her dissertation on legitimacy and legal safeguards of placing children in closed care (*'Legitimiteit en rechtswaarborgen bij gesloten plaatsingen van kinderen'*). She calls the creation of these JeugdzorgPlus facilities *'a minor landslide in the system of child protection and youth care in the Netherlands on several fronts'*. The law that made this possible was introduced at breakneck speed, partly due to the amount of social pressure. Closed youth care was established very quickly. As Maria de Jong said: *'A large number of new institutions were built then, and JJIs were converted. And, of course, then they all needed to be filled.'*

What exactly JeugdzorgPlus was supposed to look like, however, was still unclear at the start, Maria de Jong also says: *'Do you know how many institutions they thought they would need? Fifty nationwide! In 2007 they still believed that.'* Ultimately, it grew to over 30 times this number, with 1,600 facilities nationwide. Each year, there are around 3,000 adolescents in JeugdzorgPlus. The closed care facilities are also housing children with far more complex problems than previously estimated, explains lawyer De Jong: *'Right from the moment that closed youth care began, the target group turned out to have far more serious issues than previously estimated. It's just absolutely not as expected.'* So, now, we have thousands of children in these closed care facilities in the Netherlands. The stay of many of them is unfounded

but simple for lack of an alternative. The Minister of Youth and Family, during the high-speed introduction of Jeugd zorgPlus, promised that this would not happen, and that there would also be more other forms of youth care. But these proved empty promises, according to a critical Maria de Jong. *‘Urged by the many questions in the House of Representatives, the Minister of Youth and Family adamantly declared: “Parallel to establishing and organising this closed youth care, we will also install an equal number of non-closed, fully fledged care alternatives for very troubled young people. We will also establish those.” But that simply didn’t happen, it just didn’t.’*

Peter Dijkshoorn, child psychiatrist, repeatedly quoted Maria de Jong’s thesis during our interview. He shared her conclusion that too many children wrongly end up in closed youth care. According to Dijkshoorn, the cause is that *‘we have a system in which we do not properly analyse children’s problems. And by that I mean looking at everything. The child’s temperament, its natural tendencies as well as what happens in the child’s family, the good things and the not-so-good things, the circumstances in its environment, the social situation. We are creating poverty in our society. Poverty does not help these types of situations. Parents living in poverty are vulnerable. Well, then find out if this is so and properly outline the situation.’* Because of problems at home — abuse, aggression, addiction and/or debt — children become traumatised and develop problems themselves. Attention and help should therefore go to those parents at an earlier stage, says Dijkshoorn. To prevent worse. But that is not currently the reality. *‘We all stand by and let that happen, the situation is bad. And eventually those children, twisted as they already are, end up in Jeugd zorgPlus. And the staff there have to sort it out, which is why I stand up for them. But I also think that, together, we have to make sure that things improve up the chain. Because then they would not have to work in those circumstances.’*

LEGAL

For her thesis, Maria de Jong-de Kruijf interviewed 40 adolescents who were staying in a closed care facility. It did not turn out to be a cheerful report. De Jong is critical of Jeugd zorgPlus for many reasons, as it seems to fail its objective on many points. Such as with young people often not understanding why they have to go to a closed care facility when they have not been convicted of a crime, or when they are there but receive no treatment or the wrong type of treatment because of waiting lists, lack of staff or money, or because they themselves are

refusing treatment. Children in JeugdzorgPlus mostly have a resisting attitude, De Jong noted, as they try to escape from the closed care facility.

Outsiders, in many cases, do not understand the JeugdzorgPlus regime. Most people are simply unaware of the fact that we lock up so many children without criminal records, each year. Maria de Jong, furthermore, is of the opinion that the name JeugdzorgPlus is inappropriate. *'I think the name conceals the nature of these facilities'*, she says. *'It doesn't really make sense. There are even JeugdzorgPlus institutions called "educational treatment centres". But they are not.'* All in all, according to De Jong, there is little difference between a youth detention centre and a closed care institution. *'They often have vandal-resistant equipment. When the kids come in, everything is taken from them. And the language these youngsters speak is really prison slang.'*

The lawyer receives support from unexpected quarters. Erwin Duits, until April 2017 director of the closed care institution De Hoenderloo Groep, in Deelen, which has since had to close its doors, thinks the same way. He left the youth care sector, partly out of frustration, and is currently chairman of the board of directors of 'Zorggroep Noorderboog', a healthcare organisation for the elderly. Duits says there is an extremely fine line between closed youth care facilities and youth detention. This line of separation was made mainly to create a certain image for outsiders, he says. In practice, there is not much difference between JeugdzorgPlus and prison. *'The choice you make for children is a case of hit-and-miss. People assume that if you have been in prison then you are worse off than if you were in JeugdzorgPlus. This is only perception, in the Netherlands. In reality, you can say: it is the same thing.'* The only difference being that children in a closed youth care facility usually do not have a criminal record. The official goal of JeugdzorgPlus is to achieve 'behavioural change to enable a return to society'. But this goal is hardly ever achieved because we start too late, argues a critical Maria de Jong. *'It often fails because the problems of these children are too serious. It is the very last option for children who have nowhere else to go. There is an old categorisation: mad, bad or sad. The bad ones go to JJIs, the mad children are admitted to child psychiatry hospitals, and the sad kids, who nobody knows what to do with, end up in closed youth care. They are the dregs of society.'*

And this last category costs more than EUR 150,000 a year, per child. Lawyer De Jong says that, in closed youth care, a large share of the money does not go to the children but to the things around them: *'A year of JeugdzorgPlus is more expensive*

than a year at Harvard University. It never ceases to amaze me that, when you pump so much money into a child, this is what you spend most of it on: security in the facilities, in those buildings.'

Juvenile court magistrates issue orders for children to be admitted into the JeugdzorgPlus regime. By default, according to Maria de Jong. *'The by far biggest problem of closed youth care is that there is no alternative. It is a convenient solution. I support the parents who do not agree with an out-of-home placement but are at their wits' end about what else to do. The judge then has to choose the lesser of two evils: either the child will be out on the street, or it will be placed out of home. And this means judges then opt for the latter.'*

According to psychiatrist Peter Dijkshoorn, juvenile court judges are shocked by what they read in the thesis of Maria de Jong-de Kruijf. *'Because they have not realised what they are doing,'* Dijkshoorn explains. Judges grant closed youth care authorisations on the basis of reports from Child Care and Protection services recommending JeugdzorgPlus in certain cases. However, these reports by child protection officers are subject of much criticism, just as those about child supervision orders or out-of-home placements, according to a critical Dijkshoorn. He also says that the child protection officers lack sufficient training. *'The child protection officers all have a higher vocational education. Judges assume that those reports are sound, as they are supposedly written by educated experts. Which is why they then proceed to place children in the care of JeugdzorgPlus.'*

In reality, however, these child protection officers are not sufficiently educated to create these reports; this should be done by university-educated child protection officers, as scientifically trained people have more expertise, take a broader perspective, and therefore may give different advice. They are more likely to weigh up *'What would be the harm of this child staying at home, and what would be the harm of out-of-home placement?'* Dijkshoorn even wrote a blog post about this back in 2016: *'The child protection officers are too poorly educated'*. His opinions were not appreciated. *'The day after my blog post was published, I got a call from the Child Care and Protection Board. They were shocked by what I said and disagreed with me.'*

SHOPLIFTING

Lawyer Reinier Feiner also agrees that, in the Netherlands, innocent children are being locked up in closed youth care facilities rather quickly. His criticism focuses in particular on the steps taken following a report by the child protection officer. To prevent judges from rulings all too quickly, based solely on the opinion of these protection officers, a behavioural expert must also agree to an out-of-home placement. Unfortunately, that does not amount to anything, as Feiner explains. *‘The so-called behavioural sciences statement (“Verklaring gedragswetenschappen”) was included in the law to ensure that children are not being admitted to a closed care facility without proper consideration. But the value of this assurance has been reduced, as all that is needed to put a child in closed youth care is a declaration of consent from a behavioural scientist who has briefly seen the child beforehand. The behavioural scientist has a short conversation with the child and bases the declaration of consent on this 30-minute talk and on documents submitted by the Child Care and Protection Board. This is therefore only a very limited investigation; it does not involve any diagnostics.’*

This is in sharp contrast with what happens in the criminal justice system: when a child is sent to juvenile detention, Reinier Feiner argues, this does require extensive and high-quality investigation. *‘Within three months, a double PO [Personality Examination, eds.] is conducted following a request by the court. This entails a child psychiatrist and a child psychologist independently delivering their good quality report of up to 50 pages to the judge, based on multiple interviews. So that the judge can take the circumstances into account when hearing a case. They are able to ask themselves whether the accused is accountable, but also if perhaps they could be treated.’* There is yet another, logical reason why the investigation by a behavioural scientist that should precede their consent is currently such a low-impact process. After all, the available subsidy is only a few hundred euros, says Reinier Feiner. *‘Peanuts, compared to the EUR 20,000 to 30,000 spent on behavioural investigations in criminal cases.’*

Locking up children in JeugdzorgPlus is done more casually, across the board, than is done under criminal law. Juvenile court judges almost always take the advice of the child protection officers, and almost always issue a closed youth care authorisation. Reinier Feiner submitted a request under the Government Information (Public Access) Act to find out how often judges in Rotterdam agreed with the statements of behavioural scientists. And how often they disagree with them and do not order a child to be committed under JeugdzorgPlus. Feiner’s

suspicions were confirmed. The information obtained showed that judges honoured the requests for closed admission in over 95% of cases; they denied them in less than 5% of cases. Feiner says: *'Often, this did not have a substantive reason. In some instances, the particular adolescent would have been able to remain in a residential institution [an open institution for youth care, eds.] so there would have been no need for them to go to a closed care facility.'*

During the interviews for this book, it was often said that youth care is all about 'protecting' children. That care workers have a 'calling' and how everyone has the best of intentions. Feiner also talks about it, but then to point out that this leads to undesirable situations. In the case of out-of-home placements, as he pointed out earlier, but also when children are locked up in a closed care facility. Feiner explains: *'I am convinced that the vast majority of juvenile court judges, child protection workers, people working in institutions, really do so wholeheartedly.'* But there is also a risk to all this: *'The big problem is that everyone and especially including the courts think that because they have the children's best interests at heart, monitoring and checking is not that important at all. They say they just want to help those children. This is why, in the civil juvenile justice system, the officers and implementers are provided with such a free hand to act, without proper supervision.'*

And so there is a real risk of arbitrariness as well as wrong decisions being made. Feiner mentions another crucial difference from the way things work in criminal law. In civil law, parents and children often lack the opportunity to defend themselves. In criminal law, that possibility is always there. *'If you end up in trouble with the police in the Netherlands, for example for shoplifting, you always will be handed a summons "served in person". That means that there are safeguards under the law of criminal procedure, which ensure that someone who is accused by the state, by the government, must be given at least 10 days' notice via a summons. And if that summons is not demonstrably 'served in person', then a default is granted, which means that a verdict cannot be delivered.'* This is a technical story, but very important, Feiner goes on to say. After all, people have the right to defend themselves before the court. In civil law, however, there is hardly any opportunity for them to do so. The trouble often already starts with the invitation letter to attend a court hearing. *'Such summonses are sent via regular post rather than in registered form.'* This leads to problems, as people regularly see the summons too late or not at all, Feiner knows. *'Many of the children and their parents are often in debt restructuring schemes or under guardianship and, therefore might not receive the invitation until after the hearing date. Furthermore, there is no check whether these letters have actually*

been delivered.' Lawyer Feiner wonders why there is this difference compared to criminal law. It is unfair, he believes. The measure of admitting children to a closed care facility, for example, has a very big impact on them. The same applies to out-of-home placements. Those involved should be informed well ahead of time about the planned implementation of such severe measures, so that they have sufficient time to respond. Feiner: *'We all know that removing three underaged children from their home and moving them to a foster home for the duration of one year is a much more far-reaching legal measure, perhaps the most far-reaching known under the law, than ordering a bout of community service or imposing a fine for shoplifting.'*

NO PUSSYFOOTING AROUND

Criminal and juvenile lawyer Feiner occasionally does see judges trying to exert their influence to ensure that the most severe form of youth care will not be applied: *'In some cases, it is clear that children cannot remain in their parental home, but the judge seriously wonders whether a less invasive alternative to closed youth care could be applied. For example, placing a particular child in a residential home or some other place of care in the city.'* But there is often no alternative. And so, judges are regularly at a loss about what to do. Essentially, when asked to issue an authorisation for placement in closed care for a young person, judges often indeed only have two choices, as Feiner states: *'They very often are faced with the dilemma to either reject or grant. They consider that if they reject the request for a closed care placement, the child will be out on the street.'*

There is some other complicated aspect of JeugdzorgPlus in the fact that, in many cases, 'closed youth care authorisations' are extended after the initial closed care period has ended. A child does not know in advance how long it will have to stay in a closed care facility. Judith's confinement in De Lindenhorst in Zeist was such a 'convenient' solution, as she herself says. Even after all these years, she still feels very indignant about the judges that kept extending her time in closed care. *'I had an authorisation for three or four months. And after those months, there was another court case and another. And every time their argument was, "There is no alternative. And if she is released then she has nowhere to go so things will go wrong again." Youth care simply didn't do its job, as they were responsible for finding an alternative place for me. So I was just staying there without proper reason. I was seventeen, at the time. But my parents wanted me to stay locked up, so that I wouldn't cause any trouble.'*

This comes up in almost all conversations — how court orders for closed youth care can be extended indefinitely. If a criminal court passes sentence on an adolescent, they know ahead of time what their sentence will be (e.g. three, six or twelve months of ‘doing time’). Children in JeugdzorgPlus are effectively at the mercy of the gods. When a court order is extended or renewed chance is a major factor, which was what happened to Judith and to the child I heard crying in the corridor at the Transferium. When such an extension is discussed at a hearing, the outcome depends fully on the juvenile judges — on what they believe is the right thing to do, including about any possibilities or impossibilities. The young people themselves hardly ever really understand why a judge extends their period of detention (sometimes several times). And they are always angry when it happens.

‘It is so sad,’ says Nino Hensen, who worked as a group supervisor in closed care facilities *Transferium* and *De Koppeling* in Amsterdam. It deeply concerns Hensen that children in JeugdzorgPlus are almost without any rights. About extending the closed care stay, he says: *‘Initially, they come in for three months. Suppose that, in those three months, two little things happen. Then those two little things are enough for another three months. At which point these kids become angry and three more things happen and they get yet another three months. And so it goes on. It is very unfair. The injustice makes it unbearable. And it dents their personality. If someone commits a burglary, they will rightly be sent to jail and are released again after three or four months, depending on the sentence. But these adolescents have sometimes done nothing wrong at all.’*

Such was also the case with Vanessa. She was in closed youth care for four years from the age of 13. She also experienced extensions that she felt were very unfair. Because no matter how she behaved, time and again, the judge extended her stay. *‘Oh all those letters and promises. If you do your best and get your diploma while you’re in here, they say, then you will be out again and able to continue your studies. Well, that was not what happened. I studied like hell and I got my diploma. They just wanted to keep me in there until I was eighteen. They kept coming up with new excuses. They would say, ‘She’s evading treatment.’ Don’t even ask — I have no idea what this treatment was all about, anyway. It didn’t matter whether I participated in the day programme, or did well in school. Then they would accuse me of putting on a show while I was really trying my best and trying to cooperate. They always thought of a reason to ask for another extension, regardless of what I did.’*

Transferium director Vrank Post confirms that the continuing extensions of their closed care is difficult for young people to understand, and that they experience it as arbitrary. *'People always think that JeugdzorgPlus is a soft approach, but in actual fact it is terrible. These kids are placed here and will remain here for as long as we say it is necessary. If they get caught nicking a bike, they know they'd be out of prison again in three months. So, judges also like to choose the JeugdzorgPlus solution, as this keeps the children off the streets for longer.'*

It is common practice. During my conversation with Nola and her mother — Nola is on leave from closed care facility the *Transferium*, for the second time — her phone rings. It is her boyfriend, who is also staying at the *Transferium*. He tells her that the juvenile court judge has just extended his time there, again. Nola is unsure about how to respond. She knows how this feels, because she has been through it herself. For Nola, the most painful thing was not the fact of being locked up but rather the extensions, the uncertain future. I spoke with her in May. Her time in closed youth care would officially be over by the end of that July. Later, that turned out not to be the case; Nola was given another three months because she had run away while on leave. Nola experienced closed youth care as very unjust. *'I had done nothing wrong but was given zero clarity. Everything was uncertain. One minute I would hear, "You can leave by then and then." And close to the end date they would say: "You haven't made any progress, so you will be extended again." At a certain point I just ran away; I was done with it all — if they were going to be like this. If I had been able to choose between closed care or prison, I would have chosen prison. Because there you have certainty. Here you have none.'*

Lawyer Maria de Jong understands that children find this unfair; she puts it this way: *'If children do their best, they say: It's better if you stay a bit longer. And when things don't go well with children who are in closed care, they tell them: You see, you need more help.'* This does not motivate them for treatment. *'For these young people it seems like whatever they do, whether they do well or not, they will have to stay anyway. So what do they do, especially if they are a bit older: they wait it out, until they turn eighteen. That's what kids do. And sometimes that can be a long, long wait.'*

There is another pattern. The extensions of their closed care always delivers young people an emotional blow, according to Maria de Jong. *'The moment that a judge issues the ruling to extend for another year, the young person concerned won't be able to hear anything else. They just freak out. It numbs everything. If judges go on to explain about the reason for the extension, the message just doesn't get through anymore.'*

These kids then only want one thing: to crawl into bed and pull the blankets over their heads.'

Sometimes they are in luck and face a judge who is not in favour of JeugdzorgPlus, like juvenile judge Ronny van de Water in Amsterdam. De Jong considers him a shining example. *'He is very headstrong and outspoken, really an activist juvenile judge. And I do believe a good juvenile judge has to be rather activist in this area. This man is like: "Incarceration? In first instance: no."* But, as De Jong knows, not everyone is always happy with this crusading judge. *'People used to be really disheartened knowing that if they'd get that judge, then they'd have to worry about where else to put a particular child.'* Unfortunately, Ronny van de Water does not talk about his work as a juvenile judge. He is now working as a criminal court judge and does not wish to comment on his previous job. He did, however, subtly point to the possibility of quoting old statements of his. Some searching on www.rechtspraak.nl revealed that Van de Water indeed cooperated as little as possible when it came to locking up children in JeugdzorgPlus. Partly because this would discourage children to seek treatment.

Two of his rulings, both from 2013, illustrate this point. A quote from the first ruling: *'There is every reason in this case to ask critical questions regarding the need for placement in closed youth care. The primary purpose of placement in closed youth care would be to encourage behavioural change. It is common knowledge, however, that coercion rarely leads to increased motivation.'*

In another ruling, he even stated that locking up this particular child, in this case in De Koppeling in Amsterdam, was not permissible under the European Convention on Human Rights (ECHR). Because it should not be a solution out of convenience. Van de Water: *'Issuing an authorisation at this stage is considered by the juvenile court to be contrary to Article 5(1)(d) of the ECHR. After all, the purpose of an authorisation for closed youth care should be that a child receives the treatment it needs. Especially when previous placements have not produced the desired result, determining the right institution that will meet the minor's needs should be given careful consideration.'* In most cases, however, and as all interviewees indicated, judges appear to go along with the Child Care and Protection Board's official request for placement in a JeugdzorgPlus facility.

TICKING THE BOXES

‘Arbitrary’ is another word that lawyer Maria de Jong regularly uses when talking about Jeugd zorgPlus. As she discovered during her research, very few details had been laid down in the 2008 Closed Youth Care Act. Partly because the law came about rather hastily, and partly because it was not clear what the new Jeugd zorgPlus would look like, in practice. Where arbitrariness is concerned, Jeugd zorgPlus compares negatively with the treatment of children in juvenile detention centres and child psychiatry. In case of these last two, all things are regulated in detail, the lawyer argues. In closed youth care institutions, this is by no means the case. The people who care for the adolescents in these closed care facilities — the supervisors, behavioural scientists and other educational staff — therefore, have a large amount of freedom and are likely to use or overuse ‘coercive measures’ as a result.

This is also the conclusion of researcher and behavioural scientist Sophie de Valk, who obtained her PhD in early 2019 with the thesis *Under pressure*. In it, De Valk argues that repression in Jeugd zorgPlus is a ‘structural problem’ that interferes with young people’s treatment in closed care facilities. De Valk speaks from experience. In the past, she worked as a behavioural scientist in Horizon’s closed care institution De Vaart. She knows, for example, how easily a child can end up in solitary confinement. During a study day about closed youth care in Leiden, she explained the undesirable situations to which the far-reaching freedoms of care providers in Jeugd zorgPlus often lead. *‘Very often, when a young person arrives, all the available coercive measures are ticked on the list [which means they can be applied, ed.]. Because you don’t know the young person at all yet, anything and everything is actually allowed in those first weeks, and is therefore also applied, with staff justifying their actions by referring to the treatment plan that allows anything up to and including solitary confinement. If it is available, it will be used.’*

In prisons and psychiatric hospitals, everything must be accurately recorded and reported to the management or the Inspectorate. In Jeugd zorgPlus, only very few things are required to be reported, which means that even the justification for a coercive measure cannot be checked. For the staff, this is often a licence to be unnecessarily harsh towards young people. All wards of state who have been in a closed youth care facility experienced this first hand. Jason stayed in Jeugd zorgPlus facilities multiple times, as well as in a psychiatric clinic. This enables him to compare between the application of coercive measures in

closed youth care and psychiatry. He requested copies of daily reports from all the facilities, which show whether punitive and other measures had been imposed. According to Jason, there is a huge contrast between the reports from the psychiatric clinic, *De Bascule*, to which he was involuntarily committed into closed care, twice, and the reports from the closed youth care facility Harreveld. *'The reports from the Bascule recount everything that happened, on every day, in great detail. At Harreveld, they reported on very few things, and badly. My dossier from them is 28 pages, which cover four months. That is ridiculous. For some days, there is only one to a few sentences. It doesn't even say how long I was locked in my room every day, or how many times I was in solitary or in the chill-out. These things are not in there at all!'*

'CHUCKED OVER THE FENCE'

There is yet another reason why JeugdzorgPlus is like a 'catch-all'. Children who should actually be in psychiatric care often end up in a closed care JeugdzorgPlus facility. Jason was carted around, from one to the other. Vrank Post of the *Transferium* makes no bones about it: closed youth care is indeed regularly a 'solution of convenience'. There are children for whom, for example, there is no place elsewhere in psychiatry, or who are unmanageable there. *'We get the children who are too unruly to be treated in youth mental health services (GGZ). We have a separate group of young people here who need psychiatric treatment. They are often deemed unmanageable and extremely aggressive. Which is when they come to us.'*

There has been an increase in admissions, in recent years. Since the decentralisation of youth care, closed youth care facilities are being flooded by these children with complex psychiatric problems. As several directors of JeugdzorgPlus facilities say in so many words: psychiatry is simply 'chucking them over the fence'. The *Transferium* in Heerhugowaard, however, does not refuse to take any of them. On principle, as Vrank Post puts it. *'We are like the fire department. If there is a fire, you want the fire fighters to come. We have a combination of psychiatric, intellectually challenged and addicted children here. Most have attachment disorders. But we will never consider these children too dangerous to take in. We feel it is our moral duty to help each child.'*

The fact that children with complex psychiatric disorders are placed in JeugdzorgPlus facilities is increasingly criticised. Such as by Professor Arne Popma, child and adolescent psychiatrist at Amsterdam UMC. Despite all good

intentions, a closed institution for youth care is not the right place for children with severe psychiatric problems. Popma is against any confinement of children, as he explains, irrespective of whether this is in psychiatry or in closed youth care facilities. *‘JeugdzorgPlus contains the most complicated group of adolescents in the Netherlands. The annoying thing is that these young people end up in closed youth care from the idea that this will prevent them from getting any worse. Because people are at their wit’s end about what to do with them. But these young people have psychiatric problems — and, for years now, psychiatry has been working from the thought that closed care is counterproductive. So it’s a catch-22 situation.’*

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***‘He had only
one therapy
session:
fishing!’***
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Many of the children who have ended up in a closed care facility should have received some other type of help, earlier on. This is what Popma’s colleague Peter Dijkshoorn (child and adolescent psychiatrist) believes. He is therefore not sorry that Pluyn, the large umbrella organisation [at the time of writing, already on the verge of financial collapse, ed.] has shut down. De Hoenderloo Groep with its closed wards was one of those last resorts where children whose parents no longer know what to do with them would end up, he says. Dijkshoorn, himself an executive at Accare, blames the large youth care organisations that run these facilities. They take in all children, because it is good business. *‘JeugdzorgPlus and all youth care institutions — us, too, for that matter — are faced with the problem of empty beds costing money. And this is their weakness.’* Those beds need to be filled... and so they are.

NO EFFECT

Closed youth care has the opposite effect of what it aims to achieve. This is again evident from a study about learning from the impact of JeugdzorgPlus (*“Leren van herhaald beroep JeugdzorgPlus”*), conducted by consultancy JSO at the request of the scientific organisation ZonMW that funds research in the field of health. The main conclusion of the report, which was published in December 2019, is that repeated incarceration in a youth care facility, serves no purpose at all. And this while more than a quarter of the children are committed to a closed care facility more than once. The ZonMW report features young people who have been staying at JeugdzorgPlus facilities on two or even three separate occasions. Almost all of them conclude that ‘nothing happens’. They experience being

locked up as punishment rather than treatment. Their resistance is expressed through aggression, running away and drug use. The cases in the report closely correspond with the stories about the wards of state in this book: the children's parents having problems, most of them divorced, the children themselves having been abused, neglected, which resulted in them becoming aggressive, using drugs, running away, and ultimately being placed out of home, often at a young age. Many of these children have already been in many different places before coming to a JeugdzorgPlus facility. Most times, they would end up in a closed care facility because there simply was no alternative. In addition, as there is nothing for them to do in the institutions, these young people do get bored to death. As one girl put it: *'My life is on hold. I am standing still.'*

Notably, between 2011 and 2020, ZonMW allocated EUR 2 million for a study (*'Longitudinale Effectmonitor JeugdzorgPlus'*) to *'outline what the JeugdzorgPlus institutions have yielded'* with the aim to stimulate the quality of JeugdzorgPlus. The resulting report about learning from the impact of repeated JeugdzorgPlus detention (*'Leren van herhaald beroep'*) cost over EUR 57,000. The question of how many more studies on JeugdzorgPlus will be needed seems justified. After all, basically all studies on closed youth care show that this is not the right type of care. Nevertheless, the number of studies continues to increase. On the ZonMW website alone, several more are announced for the coming years. This scientific research also has an legitimising impact on large youth care organisations, such as Horizon.

Marianne is also highly critical of what the involuntary admission to the closed care facility De Lindenhorst has brought her grandson Tibo. She says nothing was done for him after he was forcibly removed from her home. De Lindenhorst had 'forgotten' about treatment for Tibo, Marianne claims. *'He had only one therapy session. Fishing! That's this picture* [she shows a photograph of her fishing grandson (eds.)]. *He had one fishing lesson. This was the first and the last time he ever had therapy. They don't do anything! I know of someone who has worked there that there are children who never have any visitors, and nothing is done even with these children either. How can this be — in a country like the Netherlands — that should be downright impossible.'* Because Marianne could not stand to see Tibo locked up while not receiving any treatment, she wrote an email to his guardian, six months after Tibo was admitted to the facility in Zeist, asking: *'What has been achieved? There has been no treatment, no therapy. Why did he go to De Lindenhorst, what has that*

brought him? (...) Why do people expect a child with behavioural problems to suddenly start to behave, without any therapy?’

AUTISM

There is another major concern with closed care institutions. Nowadays, an increasing number of children with autism spectrum disorder (ASD) also end up in a closed youth care facility due to a lack of appropriate care. These facilities are often not the right place for them. The Inspectorate conducted an analysis of 26 young people who had committed suicide while in care institutions, both open and closed, in 2017. This showed that 10 of them had an ADS disorder, amongst other problems, and that they had committed suicide partly because they had not received the right kind of support or treatment. A considerable share of adolescents with autistic disorders, ultimately, become unmanageable because they are handled too severely. Very often, these youngsters also move from care home to care home, without ever getting the guidance they need. Things go wrong in each of the homes. These children feel misunderstood — quite rightly so — and therefore become angry and aggressive. This route takes them, more or less as a matter of course, to Jeugd zorgPlus.

For example, autistic Jan Knetsch, who ended up at The Hoenderloo Groep in Deelen. His parents tried to help and support him at home, for years, but their efforts were not effective enough. Jan first went to Curium at LUMC, an organisation that specialises in autism. But Jan also had behavioural problems, which became the dominant issue. The situation, therefore, became untenable at Curium, so Jan had to leave there again. Eventually, he ended up in a closed care group at DHG in Deelen, where yet again very little was done for Jan, says father Knetsch. *‘My son was there, in closed care, from October 2018 to July 2019. And ‘closed’ means that they are just maintaining the status quo and provide a bit of daily structure. In terms of treatment, nothing happens at all. The first six weeks, which they call the observation period, children must stay within sight of the group supervisors and are not allowed to do anything at all. They have to sit down on a couch or, if they want to go outside, they have to stay within three metres of the group supervisor. And that for six weeks. The worst thing is that a boy like my son doesn’t really belong there.’*

Indeed, young people with autism do not belong in a closed youth care facility, which is also the opinion of Transferium director Vrank Post. Because they are

not suffering from something that could be cured in a few months of treatment at a closed care facility, as he explains. Children with autism, and those with other lifelong disorders, need completely different care. *‘The children with chronic afflictions, they won’t get better here. At best, we can teach them how to deal with things a little better. If you are autistic, this will be with you for the rest of your life. There is little you can do about that. So if you are an aggressive autistic person, the best thing to hope for is that we can teach you to recognise what makes you aggressive and provide you with some kind of manual that will tell you how to deal with it when it happens.’*

THE UNDER-TWELVES

At a certain point, I came across something I could not imagine being possible in a civilised country such as the Netherlands. However, in this country even children younger than 12 are locked away in closed care facilities. This is legal to do, because the Closed Youth Care Act does not stipulate a minimum age, amongst other things. The number of children this concerns is considerable. Around 5% of all children in closed care facilities is under the age of 12 — often, well under 12. In 2017, there were as many as 51 children in this age group staying in a JeugdzorgPlus facility. In 2016, there were 45 and in 2018 the total was 39. These are the little wards of state. The NJI makes no secret of the situation; it provides neat overviews on its website, listing the placement and outflow data in JeugdzorgPlus on such very young children. At first, I could not believe that we are locking up small, innocent children in the Netherlands. But we do — and it is facilitated by juvenile judges. You can find countless rulings by these judges issuing a closed youth care authorisation for children under the age of 12.

One of such cases concerns a 5-year-old girl. In 2013, this very young child was placed against her mother’s will in Horizon’s Berge Bos, a closed care facility in the city of Rotterdam. Her mother opposed this placement order, fearing her little daughter would be raped while there. According to the judge, however, JeugdzorgPlus was the only solution for this girl — who was aggressive and had an attachment disorder. His opinion was not uncontroversial. Indeed, the psychiatrist who had observed the girl for months believed that there was still a less drastic solution and suggested putting the child on medication instead of locking her up in a closed care facility. The judge disagreed with the medication option, however, *‘because such treatment is not without risks, given the very young age*

of the minor.' No medication for this child because of her age, but incarcerating her for half a year apparently did not pose a risk, according to this judge. Lawyer Maria de Jong is highly critical of this closed youth care for the 'under-twelves', as these children are called. Particularly because they are placed amongst older children. In her thesis, she still diplomatically calls this 'undesirable'. In an analysis on her personal blog, on the website of the legal faculty of Leiden University (her former employer), De Jong strikes a different tone. There, she is downright sceptical about locking up non-criminal, young children and about the fact that this is made possible under the law. *'Considering that this is apparently believed to be a last resort for all these "under-twelves", I can't help but wonder whether this legal option of locking up such young children has not introduced a supply-and-demand mechanism. Are some or all of these very young children locked up simply because they are allowed to be?'*

8 INCREASING REPRESSION

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'I get angry and then I see all those people coming [towards me, ed.] and I get even angrier. And so I attack the group supervisors. Then they throw you to the ground, grab you by your arms, by your legs and by your head. Or they pull your arms to the side and twist them like this, at which point I try to break free. Then they sit on the back of your knees so that you're really in a lot of pain and can't do anything anymore. Then they ask you: 'Are you calm?' Then they pull you up, first onto your knees and then all the way until your standing up. Then they hold you by your arms and your head, very tightly, and take you to solitary.' Nola tells how she used to be taken to solitary confinement, repeatedly, while she was staying at the Transferium. Her story echoes that of other wards of state; things are rough in the institutions, especially in closed youth care. The adolescents are all already damaged when they get there and are even more traumatised once they leave again. And there is really no one to protect them against the violence that is inflicted on them by the 'educational staff', as the supervisors are called. Almost all children experience being overpowered by several adults at once, with brutal force — usually to be taken away to a locked separation room (i.e. solitary confinement). The amount of force used is far greater than would be necessary, as is evident from all the stories the interviewees recounted for this book.

Experts say that the situation in closed youth care institutions has continued to deteriorate, in recent years. Many of these facilities are on the precipice of bankruptcy. *'This is why things are going very badly,'* lecturer Peer van der Helm says. *'Institutions are close to toppling.'* Budget cuts have resulted in staff shortages. There are many temporary staff working in residential groups who are too young or even inexperienced. And because the staff is unable to cope with the undesirable situation of having to look after too many adolescents with too complex problems, repression and aggression are on the increase. Youth care institutions regularly call in the help of expert Peer van der Helm. For example, he was approached by closed care facility De Koppeling because they had certain problems. *'Spirit (i.e. the parent organisation of De Koppeling [eds.]) asked for my help, because the institute's social environment was worsening again. They asked whether I had any good ideas to remedy the situation.'* The Hoenderloo Groep also

contacted him. *'They asked me to, please, come over. There I spoke with the head of treatment and a few other people. And do you know what their particular point of concern was? The increasing repression.'*

'CRAZY IN MY HEAD'

The most powerful weapon to prevent a situation from escalating in a social group is that of locking children in solitary confinement. Nola describes the degree of force that this involves: *'When you go into solitary, there is a blanket on a mattress in which you are wrapped very tightly, so you can't move or do anything. Then everyone leaves, and then you don't know whether you will get out quickly or not. But I can't stand that, being wrapped so tightly. I get all crazy in my head; I start crying and shaking. The first time I really couldn't cope, it took me a few minutes to free myself; it takes your breath away. Then I get angry and start banging on the walls.'* While Nola tells all this in such detail, her mother Jacqueline sits quietly. *'This really shocks me. It is the first time I am hearing these stories.'* To me, however, these stories of violence are not new at all. The 'button' that the staff presses, the alarm or the pager, and what follows, a group of men who rush in, almost invariably leading to solitary confinement and the blanket, are recurring stories. In this respect, nothing seems to have changed in recent years. There are even instructional videos on the internet about how to restrain young people in a closed care institution. *Horizon*, a large youth care organisation, has several videos on Vimeo showing both male and female staff being taught the art of overpowering an extremely upset adolescent. Topics covered in these videos include *'Stranglehold technique'* (where they grab adolescents by the throat), *'holding or pinning techniques'* (where staff members wrap their arms around the adolescents and push them to the ground, pinning them there by sitting on their legs), and *'Then we try to wind down, come to an agreement,'* as the instruction video says.

In a gym room, staff are shown practising how to handle a young distraught person. This has nothing much to do with *de-escalation*, a term often used in closed youth care, which means that supervisors explicitly should try NOT to use violence. *Horizon's* people on the sports mat, however, appear fully in character and shout loudly while they are overpowering a 'young person'. Apparently, making these intimidating loud noises is a standard part of the procedure.

Judging by their stories, it makes no difference whether the adolescents were in closed youth care only recently or a long time ago — their experiences appear the same. More than 15 years ago, Vanessa also experienced repression at the closed care facility in Harreveld. She can still vividly remember what happened. *'When they press the button, twelve men come running in and jump on a young girl, for example. They just work her to the ground as if in a fist fight. I think all that is far too brutal.'* Judith describes how the alarm would go off each day she was at De Lindenhorst. *'Emergency buttons were everywhere. If someone would lose it, supervisors would press one of these buttons and a whole security team would come rushing in. They would then throw the 'prisoner' on the ground and handcuff them and take them into solitary confinement.'* Judith talks about prisoners because she felt treated like a prisoner, and also because she was put amongst criminal youths, even though this is not in line with the intentions of the intensive care that should be provided within the JeugdzorgPlus regime.

Violence does not occur solely in closed care facilities. The same is true for open institutions. Staff are aggressive, and very often the adolescents themselves are as well. Tim knows all about this. After having been removed from his home, he stayed in quite a few places. Amongst them a crisis shelter and a foster family. Tim ended up at *De Hoenderloo Groep* (DHG) in Deelen in 2004, where he was in 'open care', as he says. However, during the interview, because of his horrifying stories, the question arose if perhaps he had not been in a closed care regime after all. *'It was very much like a military compound, like juvenile detention. They put me in the toughest group, where I was watched like I was a criminal.'* That may have been a correct observation, as later turned out. Tim's dossier, which we requested, states that he was in a 'secure' social group, which is an intermediate form between open and closed care, where he had to be 'always in sight of the group supervisors'. Records show that Tim was indeed treated like a criminal there. He himself gives another example of this: *'We were not allowed to use the Internet and when making phone calls, someone was always listening in.'* According to Tim, the supervisors at DHG can be divided into two categories: 'simpletons and softies' and 'barbarians'. *'My group supervisors were barbarians. Veterans. They were all former military; commandos, air force, navy. My mentor was a powerlifter. He used to drag the boys around the room, chair and all.'* That his peers, the young people themselves, were also aggressive, Tim experienced from the very first day he was at DHG. Recounting what happened to him, he says: *'I like classical music. I was whistling happily in the corridor when there was a boy, Abdel, I will never forget his name, a Moroccan boy, a lot older than me, who said: "Oh, be quiet", just out of*

the blue. I replied: "Why? I can just whistle, can't I?" But then he came up to me and really, like this, he banged his head against me: "What the hell! Are you going to have a big mouth? Just you dare to open your mouth again.'" When Tim had been at DHG for some time, he even prevented a stabbing there: 'One boy was so out of control that the group supervisors couldn't handle him. Together with some other boys, I had to overpower him to take away his knife.'

'JUST SWEARING, THREATENING, HITTING'

It seems that no youth care facility is free from aggression or violence. Judith was first confronted with it in the Meisa crisis shelter in Amsterdam, where the other adolescents would rudely wake her up each morning, and they were always fighting. *'There were 15 girls in that house. They would wake me up every day by banging pots and pans together. There was always fighting and shouting. We shared the living room and daily life together. All those girls had problems. Now, I think: How can that be? So many girls with problems in one house?'* But that is how it was, and then Judith experienced that things could be even worse. She then had to go to De Lindenhorst in Zeist, as she was not in the best of shape. She had been using a lot of drugs for a while, would not sleep for nights on end and was all skin and bones when she arrived there. *'There were a lot of Moroccan girls. One of them was a bit of an 'alpha', had a screaming attitude and was bossing the group around. And the other was like her 'partner in crime'. When they put me into the group, they all stared at me. One of the first things that girl said was* (Judith mimics a Moroccan accent [eds.]): *"Wieo, you really are a skeleton, iuuw, are you being abused or something? Didn't you get any food? Did they keep you in a basement? Forever a junkie! You probably use a tonne of drugs, don't you?"'* In this closed care facility, the tone had been set, immediately, on the first day, Judith recalls: *'When they had finished with me, another girl came down who had cut herself. And then those girls said: "Look at her. She's fucking fat. Bloody filthy attention seeker. That's why she probably was such a whore offering herself sitting behind a window. Always needing attention and recognition. And that's why you won't eat now because you think we give you attention. Look, she's fucking stupid. I'm going to stab her."'* Comments like that still baffled Judith. *'That girl was a victim of a loverboy and had a real eating disorder, she had anorexia.'*

Often, group dynamics in youth care facilities are indeed not very good. All those interviewed — experts, the adolescents themselves, supervisors and even the directors and administrators — say this is so. Vanessa tells how tough the

adolescents were in Alexandra, the closed care facility in Harreveld, and in OHG in Zetten: *'It's either very friendly, or you're picked on constantly and they won't leave you alone. Swearing at you, threatening, hitting. I was a kid, I was really scared there. I didn't want to leave my room anymore.'* Jason has particularly traumatic memories of the staff being rough, including the group supervisors. This was especially the case at the infamous closed care facility in Harreveld. And, like the rest, Jason also talks about the 'alarm'. When the alarm sounds, men storm in and overpower the child in question, which is totally defenceless. *'You can't do anything. The moment group supervisors are there, it's too late. You can no longer say: "I want to cooperate" or "Don't do this, I'll do anything you want." Once they are right in front of you, they will say: "No, you're going into solitary, right now!"'*

Talking about their intense experiences still upsets these wards of state, even years after the fact. Judith, too. Throughout the interview she speaks in an indignant tone. She walks to the open window of her flat to smoke a cigarette and unwind a bit. While sitting in the windowsill, she keeps talking, drawing conclusions about her past in JeugdzorgPlus and the violence she encountered there. *'I was unfairly put amongst girls who had tried to kill their own families. They were suicidal and had to be in the same room as girls who were trying to stab each other. All those girls there had bleeding knuckles. I asked them why, but they just laughed and said, "You'll find out." I started banging on the walls, too. All the girls would be cutting themselves. You can't do anything else.'* Judith emerged hardened from JeugdzorgPlus: *'Being aggressive is your only chance of survival. I really learned that in the closed care facility. As long as you give as good as you get and threaten people, they'll leave you alone.'*

SHIT ON A TOOTHBRUSH

When the adolescents are aggressive and staff use force to correct them, the social climate in the facility is not good, as they say in youth care jargon. At a conference on youth care, in November 2018, Dorien Graas, lecturer in Youth at Windesheim University of Applied Sciences, openly denounced the violence used against the adolescents in youth care institutions. *'When parents push their children to the ground, isolate them, lock them in a cupboard, or beat them, half the country is in an uproar — while this is going on, on a daily basis, in residential youth care. And we should really put a stop to that.'* An emotional Graas called on the Dutch Cabinet to intervene. *'Simply don't allow it, just as you don't allow parents to do it.'*

Juvenile lawyer Maria de Jong also states that such violence, which is reflected in a poor social environment, is a substantial problem, especially in Jeugd zorg Plus. She points out that this aggression is both by the staff and the adolescents themselves. *'Somehow, the aggressive behaviour is really being triggered. These institutions often are at a loss about how to maintain order. When the Schakenbosch facility had just opened, the police were there every week. And, going by the information in criminal court rulings, many of the crimes are committed in closed youth care.'* Schakenbosch, a closed care facility in Leidschendam, has been brought in disrepute more often. For example, in 2016. At that time, 38 children were detained there supposedly on a 'voluntary basis', without a judge having issued the required 'closed youth care authorisation'. This fact was revealed by the NRC daily newspaper, and greatly troubled the Inspectorate.

Iboya, the girl mentioned before, is one of the youngsters who was supposed to be there 'voluntarily'. However, at the time, Iboya did not realise she was being locked up. *'My parents had taken me there, and the institution gave me a form I had to sign. And then this meant that I was going to stay there. Eventually, it turned out that I was not allowed to be there on a voluntary basis; at which point, a judge became involved. That was after I had already been there for a year.'* Iboya's sister, Darcy Lazar, is a vlogger and — together with her grandmother Jose van der Helm and her boyfriend — Darcy sounded the alarm on YouTube in 2017 about what was happening to her sister in Schakenbosch. On a video, the three of them are sitting on a bench, describing the abuses. Darcy begins: *'This time I'm not talking about vegetable gardens, but about a serious problem, a serious subject.'* Her boyfriend adds: *'In the Netherlands, we have rather a big problem. Children who are difficult to raise and are having problems at home are being brought into contact with organisations such as Jeugd zorg and other youth shelters. The only problem is that those businesses often make things worse, because they do not provide appropriate care and, of course, there is less and less money available. As a result, they can't hire specialised people.'* Darcy continues: *'We all used to really look up to Jeugd zorg, but that was when we didn't know the truth. Now more and more information is coming out. And with my sister too, unfortunately, it has become a problem.'* Then Darcy talks about how her sister ended up at Schakenbosch: *'My parents decided to put her in a closed care facility.'* The grandmother interjected: *'On the assumption that this would help her to do better and this would bring peace for everyone.'* Darcy adds: *'The website said she could be helped there and it promised she would be treated and protected in a safe environment. My sister did not want this at all. They gave her a contract which she was told to sign quickly without actually allowing her to read it first. She complied, signed it and now she is still locked up today.'*

By the time this video denouncing Schakenbosch appeared on YouTube, her sister had been staying there for three quarters of a year. And, as Darcy claimed in a bid to make all this known to the world, things were not safe at all in this closed care facility. *'My sister is being harassed, threatened and bullied. And she is not the only one. I know that this is also happening to a lot of other children in her group.'* Then the grandmother says: *'I heard a girl scream. To my surprise, I saw five men lying on the floor, The icy screams were coming from a girl lying somewhere beneath those five men. This went on for a very long time. In the end, the girl was squealing and grasping for air.'* Darcy says: *'In that world, this is called fixating them. My sister is very scared of being fixated. When she is being threatened or bullied, or when her diary is snatched from her and read out loud to the group, she is simply too afraid to do anything about it because of her fear of being fixated.'* The boyfriend concludes: *'This bullying goes pretty far. She has been strangled, people shitting in her room and wiping their bum with her toothbrush.'* The grandmother later confirms the toothbrush story in an interview, saying: *'That one kid was really deranged. I filed complaints, talked about it, all to no avail. That girl was able to defecate in Iboya's room because the door could not be locked.'*

Schakenbosch was not happy with the vlog, as grandmother Jose van der Helm revealed. *'A few of Schakenbosch's staff tried to forced me to take the video off YouTube. But I said: "I can't take it down, I didn't make it. Darcy made it and she's a YouTuber. But even if I could, I would not want to take it down!"'* About the social climate in the institution, she said: *'The way they are bullying each other over there, well, that's not normal. Iboya was harassed and bullied. People were stealing stuff. I had bought nice clothes for my granddaughter, nice branded clothing. That sort of stuff is gone in a second, there.'* She gives another example: *'I had to wait three months before I could visit her. They always check your bag. Well, that doesn't bother me too much. But you are sitting there, in an empty little room, at one of those little Formica tables with three chairs. I always brought some goodies, home-baked biscuits and a smoothie, fresh, with nice cups or a straw. I would put a cloth on the table, and a napkin. And then one of those grumpy guys would sit there. I would ask: "Would you also like a nice biscuit or smoothie?" as I thought "Does it really have to be like this?" That grumpiness. My goodness, be nice to those kids. They're not here for fun, are they?'* Three years later, Iboya herself is still negative about Schakenbosch. *'I really hated it in the girls' group. I couldn't believe where I had ended up. The bullying, you're with all those girls. There's not much to do, so people start irritating each other, getting on each other's nerves. You're all in a small room together, there is hardly any privacy.'* She confirms the constant bullying going on in closed care institutions, but also even worse:

'Death threats or being beaten to shreds, or all of them going against one person.' And the supervisors do nothing to intervene, according to Iboya. *'I did have a shampoo bottle thrown at my head. And all the time, there were threats like: "I'm going to kill you." They knew what was happening to me, but they always turned a blind eye, pretending not to know what was happening. To me they said that it would make me strong and would prepare me for the future.'*

CHOKING GAME

Certain closed youth care facilities have a downright terrible reputation. Schakenbosch, for example, has often been in the news very negatively. In early January 2020, for instance, following the death of a 15-year-old boy, Davey. The *Algemeen Dagblad* newspaper reported: *'At youth care institution Schakenbosch in Leidschendam, it is not safe for all of the young people who are involuntarily committed there. This is what those involved tell this newspaper after yet another client of theirs took his own life at the weekend. He was 15 years old.'* It was the second suicide in a year, the AD article said. *'According to a parent of another child in the same ward where the incident took place, supervision was "negligent" on Saturday. How else can you overlook something like this in the middle of the day?'* This parent — who does not want to be named because it could have adverse consequences for his child who is still at Schakenbosch — wants it to be known how unsafe things are over there. About his son he says: *'Every time he has to go back, he locks himself in his room there. "At least then I'm safe", he says. On my visits, I can sometimes smell the weed emanating from groups of youngsters walking by.'* An employee of Schakenbosch, who wishes to stay anonymous, states that the situation there is not good: *'Due to poor internal communication and a shortage of suitable staff, Schakenbosch is currently unable to offer a safe environment for the children placed there, if I'm honest.'*

Schakenbosch declined to comment in the newspaper on Davey's death. His mother Tiffany does. Her son was not suicidal, she claims. Because if he had been, Schakenbosch would have taken precautions. She is convinced of that. Like Iboya's parents, she also wanted her son to go to Schakenbosch. He had ADHD and ODD, a behavioural disorder that manifests itself in rebellion. At home he was unmanageable, and in an open institution for youth care things also went wrong. Schakenbosch was supposed to offer structure to Davey, and would let him go back to school again. According to her, her son's death there was not a suicide but a 'tragic accident'. Davey was found dead in his room, with a belt

lying next to him. Tiffany is sure her son was NOT suicidal. He died as a result of the choking 'game' involving a belt tied tightly around the neck. Tiffany: *'This stops the blood supply to your brain and brings you into a state of euphoric intoxication. But if you don't pay enough attention and let it go on for too long, it's lethal.'*

This brings up the next point about the 'social environment' in the closed care facilities. The adolescents are not only aggressive towards each other, they also engage in life-threatening games or 'challenges'. Iboya also experienced the sinister games played at Schakenbosch. She did the 'cinnamon challenge': *'I did once take part in a game there in which you had to swallow a ladleful of cinnamon in one bite. You could just choke. That powder is quite dry and it shoots down your throat. The challenge was to not cough, keeping the cinnamon inside. At the time, I didn't realise that it was dangerous.'* These are examples of the challenges that young people hear about on the Internet.

SOCIAL ENVIRONMENT

Davey's mother said that her son's death was being used by opponents of youth care in a campaign to bring Schakenbosch in disrepute. And those 'activists' were given ample attention in the AD newspaper, where it said that Davey's suicide was an act of desperation *'by someone who felt life had become hopeless after having been placed in this boarding school, which has a moat around it and where the bedroom doors are locked at night. Just like in a prison, while the children in Schakenbosch are not criminals, but boys and girls with behavioural disorders so severe that they cannot be taught to comply and behave well in any other way.'*

Jose van der Helm, Iboya's grandmother, is not an activist, but she spoke up again after the news coverage of Davey's death at Schakenbosch. She does not understand why his mother maligns critics and defends Schakenbosch so much. After all, things are simply bad at this Jeugd zorgPlus facility in Leidschendam: *'Not a word of what I've written was exaggerated. I am a very down-to-earth person, I am not looking for sensation. But I had never experienced this before.'* That is also why she then wrote to another newspaper, Voorburgs Dagblad: *'I want to keep stressing that youth care is not always about care. I keep protesting it, because youth care is youth destruction in most cases. Schakenbosch is beating its own drum about how good they are at what they do — they're not good at all! Like my daughter, everyone who takes their child to this facility thinks that it will be fine there and that it will receive treatment. But*

no, the child will only be destroyed in there. I'm not up on the barricades about it, but every time I read about something like this, I do want to respond.' Grandmother Jose wants the outside world to know that a closed youth care facility is not helpful. *'Yes, that's the only thing,'* she says about it. *'It will not help my grandchild anymore. But people may think: Iboya has been at a youth care facility so she got some counselling, right? Well, hell, no! Things there will not make these kids any better.'*

Peer van der Helm is the Dutch expert on the 'social climate' in youth care facilities, mental health institutions, and juvenile detention centres. He investigates the social environment and working climate on behalf of the institutions and advises management about improvements. During an interview, he confirmed that things are unsafe for the young people staying at Schakenbosch: *'I talked to Schakenbosch's company physician, a while back. He was very worried about the number of broken ribs amongst the children there, while this is one of the better institutions.'* Van der Helm and his colleagues from Leiden University of Applied Sciences do not spare the institutions in their reports. A good environment means less aggression. But not all closed care institutions like prying eyes and certainly do not want bad results to be publicised. Van der Helm experienced this, for example, at OGH in Zetten. *'I did research there once and the results were disastrous. After that, I was not allowed to investigate the subject any further. There is a lot of fear in this sector. I was taken to task by the highest boss. How dare I to say anything about his institution? I had reported on things not being good over there. Instead of looking inward to find the problem, they look at others. Everyone is afraid of their reputation.'*

The fact that the closed care institutions refuse to publicise results from the research that they themselves have commissioned on conditions at their facilities is a recurring annoyance for Van der Helm. *'You just can't get the message out — the institutions are not obliged to publish such results.'* In contrast, juvenile detention centres (JJIs) do fully disclose all information, Van der Helm knows. He has investigated the social climate at these centres for a long time. *'At one point, a director of one of those government-run facilities said: "Dear colleagues, why don't we just publicise our reports?"'* Initially, the other directors hesitated to do so, but these days they do, according to Van der Helm. This has also had a positive side effect. *'The reports go to the House of Representatives and this has led to a huge improvement in the climate at JJIs, which is now better than in closed youth care.'*

CRAZY

'I really feel that the children need to be rescued from the clutches of closed youth care. It is too terrible for words, completely insane, totally deranged. Adolescents are being destroyed there.' Sometimes the staff themselves sound the alarm about the violence in youth care institutions. Nino Hensen could well be called a whistleblower. He writes and speaks openly about the abuses in JeugdzorgPlus and spoke to the De Winter Commission, which investigated the violence in youth care, issuing its report in June 2019. Hensen, a Surinamese Dutchman, tall and broad, is wearing a white turtleneck sweater. He has a gold front tooth and a tattoo of a spider on his head. Above all, Nino Hensen is an extremely polite and likeable man. He worked as a group supervisor in the closed care facilities De Koppeling and the Transferium. He is in the middle of cleaning his car when I ask him for an interview. When he hears what I want to talk about, the car is no longer important. He is happy to tell his story. The injustices suffered by young people, especially in JeugdzorgPlus, really bother him. Nino Hensen was himself behind bars, several times, in Amsterdam's juvenile detention centres Amsterbaken and 't Nieuwe Lloyd. *'For street fighting'*. He was abused at home as a child and had, as they say, a difficult childhood. He got into drug and dealing. So Hensen knows from experience what happens when you put young people with serious problems together in a closed group. *'I went into prison a mischief-maker and came out a criminal. You sit there with other young criminals and everyone is focused on survival. You are amongst lions; the last thing you should do is show weakness, because that will make the group turn on you. So you have to be strong, you have to stick up for yourself.'* Detention centre 't Nieuwe Lloyd later became De Koppeling where Nino Hensen eventually came to work. But what he saw there was worse than what he had experienced in detention. *'I was baffled by what I saw — staff members opting to use force. Things like not wanting to put on a coat, having one cigarette too many, not handing over a lighter, not going inside fast enough or putting two slices of cheese on a sandwich instead of one... those are all reasons for punishment. Those are the rules. That's how they keep order.'*

This time, a professional talks about 'pressing the button', common practice in closed youth care, and the panic that breaks out afterwards. Hensen explains how it happens time and again that young people are being manhandled. *'Rule number one is that those kids have to behave as instructed. Makes sense. But if they don't, staff members have to give them a warning. If that warning is ignored, then they can immediately remove the particular adolescent from the group, under the instructions:*

“Go to your room!” If they refuse to do so, then the button is pressed. And once it is, there’s no turning back. Then things happen on “automatic pilot”. Which consists of forcibly taking this young person to solitary confinement.’

As he moves through the living room of his house in the Bijlmer district in Amsterdam, Hensen mimics how the ‘macho Viking warriors’, as he calls the counsellors in youth care, walk: chest out, arms wide and legs bent. He demonstrates how they grab the youngsters. As he sits on the floor, he puts his arms behind his back, makes twisting movements and says: *‘Thirteen-year-old girls have to be taken to solitary confinement like that. And they better not dare to resist.’* Hensen also mentions the blanket in solitary confinement: *‘That is a daily occurrence. A blanket is laid out for them, in which they are then wrapped, after which the supervisors quickly move out of the room and there they are alone, in solitary.’* He demonstrates, kneeling forward on the floor, how this is done, literally twisting and turning. *‘First they struggle to get that blanket off.’*

Nino Hensen only worked relatively briefly in closed youth care institutions, but he nevertheless tells one story after another about injustice and violence. And especially about his disagreements with colleagues about this stuff. Hensen regularly blocked the door of a young person’s bedroom to prevent other staff from dragging the child to solitary confinement. He constantly tried to change his colleagues’ minds so that they would stop acting aggressively. *‘I was almost like a preacher’,* he explains. *‘I had only one mission: get them to stop manhandling them. Don’t do it, because you destroy them.’* However, the rough treatment kept happening, according to Hensen. *‘It is organisation culture. And management is powerless against the staff. As soon as management comes up with new ideas, the staff laugh them away. They just think: “I don’t care about this, I just don’t want a big mouth from the kids.” It is the path of least resistance. The alarm goes “Beep beep beep beep” and, bam, it is reverberated throughout the facility. Ready to make short work of it. Every kid knows what the alarm means: something is happening again. And then you see all the staff running, grabbing the kid, on to solitary, done.’*

Sometimes, police dogs are even used when taking children to a solitary confinement room and, the next day, back to their own room. *‘This happens very, very regularly,’* according to Hensen. Worse things also happen. *‘There was this girl who crashed head-first to the floor and went into solitary with a concussion. A colleague told me about a boy who had gone on a hunger strike. They grabbed him by the throat, pouring water into his mouth — force-feeding him, as it’s called — shouting: “You don’t*

want to eat? Well here: eat!" My colleague quit his job, saying "I can't do this anymore." The people who were doing these things are still working there today.' But not Nino Hensen: 'I was honestly slowly going to pieces, working there. I couldn't take it. I was unable to sleep. I can still hear the screams. Shoulders almost being twisted out of joint, wrists bent all the way backwards, necks being wringed. Although everyone disapproved, they would tell me, "Just keep your mouth shut, because it won't do any good. Just be quiet." At a certain point they started to think: "Just ignore Nino, he won't be here that long."' It is the company culture, according to Hensen. 'They say: "This is how we do things here. And if you don't want to fall in line, you can leave." As a member of the staff, you have a choice: either you stand up for the children, lose your job and have no friends, or you go with the flow, keep your mouth shut and do as little harm as possible yourself. Those are your options. But if you want to bring a stop to evil, prevent it from happening...then you're fired.'

ROY THE GRABBER

Indeed, Nino did get fired, after disagreements with his colleagues. He gives an example of such a disagreement: 'There was a man, two metres tall, nicknamed "Roy the Grabber". All the kids hated him, because everyone knew he would always intervene in the wrong way, squeezing too hard and grabbing children by the throat. We were trained by him in De Koppeling on how to physically intervene. During this training, I noticed that he did not stick to the rules himself. I said: "Roy, aren't we supposed to de-escalate, even after the alarm has sounded?" "No," he answered, "after the alarm, we stop talking. We dive straight in because this kid is strong. We grab him by the throat." I said: 'You're hurting this boy, you're using too much force — you weigh 120 kilos and are two metres tall. He's a 14-year-old kid.' This turned into an argument after which he stormed out of the room.' Nino Hensen could no longer stand the violence, but he also does not understand why this situation is allowed to go on and on at the institutions and no one is held accountable. "These things are unlawful. You are responsible for all your own actions. I have not worked a single shift where children's rights were not being violated. Everyone knows it. But those kids keep their mouths shut. Do you know why? Because they have lost all hope. These kids see these things happening SO often, that they think: No one will do anything about it, management won't stop it, nobody will do anything.'

Even though violence in youth care is increasingly prominent in discussions these days and reports are published about it, Nino Hensen is not optimistic

about the future. Violence is accepted, he says. *'If the government wouldn't want this to happen, it wouldn't. But it does! Society, everyone agrees with this. And nobody is doing anything to change it.'* Hensen is currently self-employed, coaching and lecturing about his experiences in youth care. He has a message, but it is difficult to get it across to colleagues, in Hensen's experience: *'If I say: "Those children need love", they look at me as if I'm proposing brain surgery. That's just not in the cards. Their response often is "What can you do with that New Age stuff; what kind of hippie are you?". I shouldn't have used the word "love". Amongst academics, all those people in the youth care sector, love is a no-go subject. So, now I rather talk about "warmth".'*

'ALL EMOTIONAL MATTERS'

Although Alex de Bokx does not work in a closed youth care facility, but in Dushi's smaller family care homes, he knows the children who have been in closed youth care very well. The children in the Dushi family care homes are all out-of-home placements and before arriving at a Dushi home, they have already been in many different places. Also in JeugdzorgPlus facilities. De Bokx: *'Dushi works well for children who have already been through a lot. They often go from crisis care to foster family, from foster family to family care home, and from family care home to a closed care institution. And after all that, they come to us. Often they have already been in four or five different places. We want to give these children a future.'* These are often the children who could not be handled in closed care institutions or foster families. In fact, there is something wrong with all of them, according to De Bokx. *'Neglect, violence, abuse. Disorder x, y, z',* he summarises.

And yes, precisely these children sometimes become very angry. *'When they stay with us, it's no different. When they come to us, and they've already been at so many locations, well, then they're just angry. Sometimes, a chair goes flying through the room. Such things can happen at your neighbours' too, with temperamental teenagers who don't agree with something. I always say: "You can be angry with us. That's very healthy. Say whatever's on your mind."* Afterwards, there is hugging and crying.' How best to deal with young people who end up in foster care or closed care facilities is not so straightforward, as De Bokx explains. The research on parenting usually applies to parents of children up to the age of 9: *'After which age there is none. The older children actually form the most complicated group. But there is no scientific research about how to deal with them.'* This is why, according to De Bokx, there is so much repression in youth care institutions. *'This obviously leads to care being*

deployed from a position of power, for example: "Don't want to listen? Then just hand over your phone for the next 15 minutes." This is how things go.'

This situation is an abomination in Alex de Bokx' eyes, which is also unacceptable according to the scientifically substantiated Dushi method, of which De Bokx gives an example: *'I once had to deal with a girl who had been everywhere in the system. After numerous placings elsewhere, she came to us. Here, she really went bananas. She couldn't understand it, saying: "I'm used to being punished if I come home too late. But you just tell me good morning. And you don't take my phone." Well, I told her: "I'm not going to play your game; you know very well what you did wrong." So I just bid her a friendly good morning, "would you like a cup of tea?" It's a matter of perseverance, isn't it? Because punishing them would be the easiest thing to do. And of course you have to teach them how to behave and educate them. I think imposing punishment is different from parenting. You have to clearly draw the line: "Up to here, and no further". That would be the right thing to do — but no, oh, all those additional consequences they come up with!'*

Furthermore, Dushi never puts children in solitary confinement, according to De Bokx. *'We never lock them up, there are no locks on the doors. Some children do like to be in their room — because it is a safe space.'* The Dushi method is mainly about loving them and trying to make contact with them, as Nino Hensen also advocates. This is ingrained in the 'methodology training' for Dushi's staff. De Bokx explains: *'That is about reading children and recognising those that are suffering from stress. If they leave their familiar pattern, this may trigger something, which can result in aggression. Eventually such aggression will subside. Sometimes we do need to hold them tight at which point they may struggle a bit, but then we will just sit with them in the corridor for 10 minutes or so. And eventually they will yield and their resistance will subside... there is some crying and cuddling, after which we'll have a cup of tea together.'* In the field of youth care, this is an unorthodox method, says De Bokx.

'The method consists of very soft aspects; it is all about feelings, animals, music, and handcrafts. Just the soft stuff, it's all about really learning things. We have a variety of programmes, all tailor-made. It is part of our social environment. It is, in fact, a bit of treatment. Making music, being creative, having your own little workshop, and we have a horse that we work with. The homes all have pets and other animals to care for, we have all kinds of massages and work with mindfulness.' These are hardly new things, De Bokx adds. *'I was already doing these things 15 years ago. Back then, everyone thought I was nuts. I was close to having to be locked up myself, they said, considering me an*

inch away from being dangerous, because I was doing all these very strange things. And we were also into organic food, which sparked the criticism that we could not afford such food. Nevertheless, we are still following the same path, applying the same elements.’ The problem in youth care lies mainly in the fact that the system is running ‘20, 30, 40 years behind’, according to Alex de Bokx. ‘Which means that those training courses on youth care methods that are supposed to prepare the staff to care for this target group of adolescents are totally out of sync with what today’s children really need.’

And it goes without saying that, also at Dushi, not everything always goes smoothly. But de Bokx would like to see repression in youth care finally coming to an end. *‘All those punishments, at school as well: “Just you go and sit in the corner, go and sit behind the cupboard.” All this setting children apart from the rest — when they are already damaged! We just don’t know how much more damage we are doing by punishing them some more. And once they turn 15, 16, they will be beyond repair, the solutions far out of sight. They will not be able to have a meaningful relationship, they’re going to get into trouble, they will fuck up their lives, what with not being able to get or hold on to a job, and eventually they’ll end up in the gutter.’*

9 VIOLENCE AND COMMITTEES

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'These are the stories that researchers in the Netherlands never expected to hear. About children being abused, bullied or beaten up. Physical, mental and sometimes sexual violence against adolescents who were already in the most vulnerable situation imaginable, who needed help and sought it from youth care services.'

In the NOS news broadcast of 12 June 2019, the Committee investigating violence in youth care (*Commissie Onderzoek naar Geweld in de Jeugdzorg*), led by Micha de Winter, presented its report in 3 volumes and 16 appendices, totalling close to 3000 pages. Its conclusion: 75% of children in youth care have been subjected to physical, mental or sexual violence. It is just one of the reports published in recent years on the abuses in youth care. In 2012, already, there was the Samson Committee report on sexual violence in youth care institutions, and the Deetman Committee, two years before that, reporting about widespread sexual abuse within the Roman Catholic Church, as well as in Catholic boarding schools.

All the reports deal with the same issues — they are about power, abuses and covering up those abuses. Whenever such a report is published, stating how much damage children have suffered in the various care homes, the same thing always seems to happen: there are immediate apologies from the organisations responsible — occasionally a shocked minister shows remorse — followed by a media campaign to ensure that the storm blows over as quickly as possible.

Chair Micha de Winter made no bones about it while presenting his 2019 report on violence in youth care on the NOS news, saying: *'The story the committee tells is not an easy one. We as government, as responsible organisations and as professionals all need to acknowledge that by no means did we provide adequate protection for all children where and when they needed it. And that children's rights have been violated and lives have been damaged. If we acknowledge this wholeheartedly, and take measures to ensure that children and adolescents who are being placed out of home, in the future, will get the safe environment they deserve, we will take a substantial step forward in improving youth care.'* The broadcast goes on with the news anchor saying: *'The government and relevant institutions are deeply troubled and apologise to the victims.'*

To which the Minister of Health is shown saying: *'Apologies are in order for all the young people who were placed under the protection of others, for whom we were unable to guarantee their safety.'* This is followed by Esther Overweter, Director of the branch organisation 'Jeugdzorg Nederland', who added: *'It has become clear that they have been insufficiently protected. This to the regret of the entire branch, but also of me personally, as someone who has worked in youth care for 30 years. I am sorry.'*

'ALL FORMS OF VIOLENCE'

The outcome of his committee investigation do not lie and are more serious than Chair and Professor of Pedagogy, Micha de Winter, had expected. Back in 2017, he already predicted the negative outcome, in a local broadcast by RN7. At the time, he had just started this investigation into the abuses in youth care facilities and disability care institutions. In a response to the sexual abuse and assault against a resident of a Pluryn residential group in the town of Groesbeek, De Winter said: *'If you look at the official data, nothing has ever gone wrong in the intellectual disability care sector. There are almost no published sources or registrations or reports about anything having gone wrong with respect to violent abuse. But the adolescents themselves and their parents have many such stories, which are sometimes also told by the group supervisors. There is therefore a contrast between what is being put on paper and what people say. So, this is the reason for drilling down.'* Micha de Winter works in youth care himself and, thus, knows there is abuse going on, also from the scientific literature, but his work for the committee really opened his eyes. *'When I heard those detailed stories from the people themselves, I could hardly comprehend them, at first. As the stories of violence kept coming, from all parts of the country and from different periods and different sectors, this grim reality unmistakably manifested itself.'*

A sad conclusion is that almost all of the children who end up in these care facilities first become damaged in their early childhood. *'These children and adolescents often already had terrible experiences, such as child abuse, before they were placed out of home. Not infrequently, this increases their vulnerability to violence or leads them to behave aggressively to others.'* The vicious circle of youth care. The common thread in all stories of abuses in youth care, according to the committee, is the sector's lack of funding. It is a breeding ground for violence, says De Winter. *'Groups would be too large, staffing levels too low, group supervisors chronically underpaid, high staff*

turnovers and often underqualified staff.’ Another constant element in the thousand stories recorded by the committee, is: *‘These people are really incredibly traumatised.’*

A certain pattern can also be seen: A report is published, revealing serious abuses in youth care institutions. This is followed by standard apologies — from the youth care facilities themselves and/or from the government. Careful thought is given in advance to how those apologies should be delivered. Branch organisation Jeugdzorg Nederland also had a pre-prepared expression of regret at the ready, in 2012, when the Samson Committee published its report on sexual violence. And there was a ready-made plan. The then Minister of Youth and Family was to develop ‘quality frameworks’. According to Jeugdzorg Nederland, this concerned a *‘structural and progressive approach to the problem of sexual abuse’*. In reality, this was a case of damage control. But it worked; within days, the negative publicity generated by the Samson Committee’s report stopped. A tried and tested tactic, it turns out.

The youth care sector also managed to curb the image damage after the De Winter Committee report was published in June 2019. The media paid only brief attention to the reported violence. The little amount of attention that was being paid was mainly for the stories told by older victims, about long ago. The success of this tactic may have been, once again, due to the immediate and exhaustive apologies by the responsible Ministers of Health and Legal Protection, who stated: *“The report paints a penetrating picture with disconcerting stories of the violence that children have been exposed to. Especially in this day and age, we find it unfathomable that these children, to whom a safe environment particularly should have been offered, did not find safety or security. This violence should not have been. Apologies, recognition, help and support from the government for these victims are in order, here.”* And it went beyond the apologies, as, more than seven months after the report, on 21 February 2020, both the Ministers of Health and Justice came with a ‘policy response’ to the recommendations by the De Winter Committee. Starting from autumn 2020, victims could apply for EUR 5000 in compensation. The media reported mainly about victims finding the financial compensation insufficient and the universal scheme inappropriate, because victims should not all be lumped together. And the amount was regarded as far too low for traumatised people who have sometimes been paying for psychological or psychiatric help themselves for well over a decade.

On 21 February 2020, there was to be a meeting of fellow sufferers in Nieuwegein, with over 250 people attending. However, the meeting was aborted when it became disrupted by shouting people — angry parents in ‘yellow vests’, according to the people who were there. To top it all off, the ‘Violence in Youth Care’ congress, planned to take place in June 2020, was cancelled due to COVID-19.

STRANGULATION

Then there is the current practice. The following story of violence was certainly not known to the De Winter Committee. It is about the closed care group Taurus (part of what was then called Intermetzo, now Pluryn), in the village of Eefde. David (for his protection, his real name is not used) had been locked up there from the summer of 2017 to early 2019. He was very young, just 12, when he arrived at this closed care institution. David, 14 years old when he was interviewed for this book, tells a story about how unsafe he felt at the Taurus group. *‘I was threatened in my room by an 18-year-old boy with a knife who said he wanted to have sex with me. Fortunately, that didn’t happen. That kid did go to another group afterwards. He had abused several other children. He expected me to get him some drugs. But I was only a 12-year-old boy, so where should I have gone to get my hands on drugs?’*

This was not David’s only bad experience. He was severely abused at Intermetzo. His mother shows photographs of the red marks visible on his neck and cheeks, as evidence. They tell the story of David almost having been strangled by a supervisor who was trying to calm him down. This was on 30 September 2017. David still has this date and what happened imprinted on his mind, as he recounts: *‘I was angry. I was throwing stuff but not hurting anyone. I just sat in my room with the door closed. A group supervisor was by himself in the group. He did not have a phone on him and was unable to press the button to set off the alarm. Then he tried to hold me to calm me down with his hands on my neck. He grabbed me by the throat with two hands and pushed me on the ground. Then he pressed harder. Not until he heard other people approaching from downstairs did he stop. He turned me around, holding me on my back with his knees. After which I was taken to solitary again.’* The supervisor did apologise later on, but that was it, according to David. *‘Nothing more was done about it, although he did resign after that.’*

When she noticed the marks on her son when she came to visit him, David’s mother Wilma (also not her real name) took photographs of the red marks,

clearly showing the imprints of fingers. It was a day after the incident, Wilma says: *'I saw hand prints on both sides of his neck. A supervisor explained this by saying that my son had slept with his headphones on, but this would have been impossible as David had only just arrived at Eefde, and had handed in all his belongings. Including his headphones.'* She could not ignore the red marks she saw on David's neck. Wilma was convinced that her son had been abused by a supervisor and took action. *'I spoke to a man who admitted it and said "I kind of freaked out myself, I squeezed his throat. I should never have done it, I did it out of desperation. David was freaking out so much and then I got him to calm down.'* Wilma adds cynically: *'Yes, if a child runs out of breath, and you squeeze its throat, this does slow them down.'*

David confirms that this, and other bad things, happened to him at the Taurus group in Intermetzo. In addition to the knife incident for sex and this near strangulation, the atmosphere was one of constant unsafeness. Especially for a boy of just 12 years old. When he first arrived, the management did recognise that he was still very young, according to David. *'I was taken into the office. Three older boys were called in. They told them: "You have to see David as a little brother. You have to make sure nothing happens to him."'*

But it made little difference. He was treated like a criminal, anyway: *'I had to hand in all my stuff, and take off all my clothes, so they could check if I had any drugs. And I had to go straight into solitary for 24 hours.'* David felt totally lost. *'I was the youngest in the whole compound.'* And he was then forced to do all sorts of things that did not suit his age: *'The adolescents made me smoke cigarettes, do drugs and drink alcohol.'*

RAPE IN THE LAUNDRY ROOM

Sexual violence in youth care facilities has been the subject of several reports, by other committees. Such as the 2022 report by the Samsom Committee (*'Omringd door zorg, toch niet veilig'*, which translates as 'surrounded by care, yet unsafe'), with a subtitle on sexual abuse of children placed out of home by the government. At the time, more and more incidents of sexual abuse were increasingly coming to light. The government had to do something about it. The Samson Committee had had a tough job with its investigation, as shown in the final report, which says: *'The field of research proved extremely difficult for the committee. Sexual abuse, by definition, is difficult to investigate because it is a tricky subject that is not easily talked about. The subject is still surrounded by taboos. Sexual abuse is difficult to 'measure'*

because many children do not talk about it, the signals that children give do not become official reports, and attitudes and practices change over time, while archives contain little information on the subject.' And that is a serious matter. Because children who are placed out of home and put in youth care facilities are twice as likely to be sexually abused, compared to other children. For mentally disabled children this is even three times more likely to happen. The government is failing to protect them.

The Samson Committee reflects on what is happening: *'Children who are removed from their home by order of the government are mainly from the socially weaker groups of Dutch society. And if a child from such a milieu is placed out of home, this means that the government bears special responsibility for ensuring their safety.'* However, the opposite is the case, argues the Samson Committee: *'The stories of victims clearly show that these children often feel displaced, upset, lonely and powerless during the period of out-of-home placement. Relatively many children become victims of sexual abuse in the very situation that should keep them safe.'*

Another shocking story that illustrates this fact — again about the Taurus closed care group at Intermetzo — is that of then 17-year-old Jakko (not his real name), who stayed there until mid 2020. His mother, Manon (not her real name), wants to broadcast the terrible abuses at Intermetzo in general, and those suffered by her son, in particular. Overcome by emotion, Manon weepingly tells how Jakko, in October 2019, was involved in a gang rape. *'The three of them dragged the new and weakest boy in the group into the washroom. Together, they held him down while my son pushed a broomstick up his anus.'* That same night, Manon received a phone call in which the supervisor made Jakko confess to his mother. *'He called me when it had just happened. His personal supervisor, whom I also talked to, was sitting next to him. They had never experienced this before, he said. I was so angry, I found it sickening.'* At that moment, Manon could really only think about the boy who had been raped by her son in the washroom, because that is what she calls it. *'I immediately asked how the victim was doing. At that time, victim support services were still on their way.'*

Her biggest concern, something that worries her literally day and night, is that she does not know how the closed care facility is handling the situation. They hardly keep her informed. Her fear is that Jakko, once he is 18 and out in the world again, will make more victims. Because, as she explains, Jakko has been guilty of sexual abuse before. From the documents she shows, this does indeed appear to be the case in one instance. Jakko has admitted that, years ago, he abused his

half-sister. He denies other accusations about him sexually abusing a friend of his half-brother, which are also described in the dossier. His mother and Jakko's social workers, however, are convinced that he did abuse more children. His first victim was his half-sister, the second victim was that particular boy, according to Manon. *'Jakko allegedly asked the boy to touch his genitals. And lick his butt. The parents and the child then chose not to press charges, so as not to have to go through the whole messy legal process. And they wanted Jakko to get help.'* Such serious allegations need to be verified, of course. I managed to gain access to Jakko. He called me from Eefde, where he had to ask permission to use the telephone and had to lie about me being an aunt of his. He sounded calm, I could hear lots of noise in the background. He readily admitted the abuse of his half-sister, but not that of the other boy, years ago. What happened with the gang rape in the washroom Jakko said was somewhat different from what was claimed — different from what his mother had been told. His version of the story is as follows: *'I was just horsing around on the floor with the youngest of the group, he was 14. Then another boy came in. I had a broom in my hand, and hit him with it on his backside. But he still had his trousers on — I didn't put the handle in.'*

Jakko's case is the story of a 17-year-old boy, who was placed in a closed youth care facility by the juvenile court following the suspected abuse of a total of three children. A boy for whom there seems to be no solution in sight. It all started in a family care home run by youth care provider Entrea in the Dutch village of Elst. At some point, officers from the vice squad came to interrogate Jakko about the rape of a young boy, his alleged second victim. Jakko's dossier states: *'Extensive investigation by the police shows it is highly likely that the sexually offensive behaviour actually took place.'* The dossier also says that there is a 'high risk' of Jakko committing sexual offences. And he has other problems, too. He runs away, is aggressive and continually commits theft. However, his sexually offensive behaviour was the main reason for his urgent transfer to the Intermetzo closed care facility, in March 2019. His mother does not understand how her son was able to yet again rape a boy while in this very institution. Manon wonders about many things. *'Jakko went there because of safety issues, and then this happens? How can boys on a closed ward get into a washroom at all and go about their business unseen? And what are the long-term consequences? I can hardly get the words out of my mouth. My son was punished. But what does that mean? He has been given chores to do, his privileges were revoked. He was not allowed to smoke, nor could he come home for visits. And he was not allowed to go to school for one week. That was it.'* There were no other consequences for him. Manon does not think that this is enough. *'I want a*

police report to be filed. I demanded that, this time, this would be done. Even though I am his mother, I don't think he should be allowed to get away with this, for the sake of the victim.' Which immediately puts her in a diabolical dilemma, Manon explains: *'If he ends up in jail, I am very afraid that something will happen to him there. If they know you're in for a sex crime, you're not safe. I do think he should be punished, but this would also mean putting my own child in danger.'*

The chances of something happening to him are indeed realistic. It is well known that, in youth detention, fellow inmates themselves deal with adolescents who have committed sexual crimes. Jakko, for instance, now also has to go to the school within the Intermetzo complex, for security reasons. *'Because there are rumours that other adolescents on the premises want to take revenge on the perpetrators of the incident,'* according to an email from umbrella organisation Pluryn.

QUIET

Jakko's mother is angry at Pluryn for keeping this incident of sexual abuse away from the public eye. Indeed, it seems Pluryn is doing this deliberately. When asked for a reaction to both incidents at Intermetzo — the strangulation of David and the rape by Jakko — Pluryn's spokeswoman Marian Draaisma promptly sent a dismissive email that read: *'I express my surprise at your insinuating attitude. Your questions and the way you present all these things as facts. In the coming week, you will receive an official response.'* However, this official response never came, despite repeated reminders.

David's mother Wilma is also outraged at the cover-up of her son's abuse. She raised the alarm everywhere after discovering the strangulation marks on David's neck and cheeks. She wanted the abuse and the earlier threat by the boy who wanted sex to be addressed rather than covered up. However, everywhere she went, she was given the cold shoulder. *'I gave the photos to the court [during a closed-care extension hearing, ed.], to the police, to the family guardian. But nothing was done.'* Wilma provides evidence of how she asked all the agencies to look into the near strangulation, sexual abuse and chaos at Intermetzo in Eefde. The contact form, titled 'Contactjournaal', of the responsible Salvation Army's youth protection & probation service, shows that Wilma did indeed call and email the crisis service on 2 October 2017, when she told them that her son had been abused and mistreated in Eefde. Wilma also went to the IGJ Inspectorate. She

spoke several times to a senior inspector. In vain, as the IGJ's response shows: *'You named two incidents that had occurred involving possible threats, sexually offensive behaviour and fixation. Your reported observations resulted in the Inspectorate asking Pluryn-Intermetzo for their response. Pluryn-Intermetzo investigated both incidents and have recently informed the Inspectorate of the results of this investigation. Based on these results, the Inspectorate currently sees no reason to further investigate these matters.'* A case of Pluryn marking its own homework.

Wilma kept a diary that also contains the dossier numbers of her filing complaints to the regular police, the vice squad, and to the complaints officer at Intermetzo in Eefde. She also spoke to the director of the closed care facility, the fourth in a row during David's stay there. All to no avail. Nothing was done.

All incidents of violence and sexual abuse in youth care facilities must be reported to the Inspectorate. When asked about the strangulation and rape in the washroom at Intermetzo, the Inspectorate's spokesperson revealed: *'I have inquired about the incidences you describe. But based on the information available, we have not been able to retrieve anything from our registration system, although this does not mean that they have not been reported.'* She added that institutions have six weeks to file a report. I then sent the IGJ more extensive information, with names, dates of birth, photos of documents about the incidents as evidence. More than six weeks after the rape in the washroom, the Inspectorate replied that there was really nothing in their records about the incident, adding: *'It is possible for parents or legal representatives to still file a report about this incident. This can be done via the national registration office for health care, the "Landelijk Meldpunt Zorg".'*

The incident of David's near strangulation had been reported to the Inspectorate, the spokesperson confirmed. Which is correct. Because after all, his mother did so herself. When asked what exactly happened to these two boys at the closed care facility in Eefde, the IGJ is unable to answer: *'The IGJ does not share the contents of such investigations with any third party because the investigation report was sent to the Inspectorate in confidence. The Inspectorate treats these reports with confidentiality, because organisations should feel safe and confident about sharing information with the Inspectorate. It is the only way that organisations are able to learn and improve.'* The safety of the organisations, the institutions, seems to take precedence over the safety of the children. This is also pointed out by the various committees that investigated sexual and other abuses at youth care facilities.

The parents of the boy who was allegedly raped with a broom handle in the washroom at Taurus did eventually file a complaint with the vice squad. Jakko had to report to the police station in the city of Den Bosch, where he was questioned about the alleged sexual assault. At the time of writing, this case was still before the court.

'NOTHING TO WORRY ABOUT'

Violence and sexual abuse are being swept under the rug. At least that is how the parents and the children themselves feel. And they are not the only ones. Nino Hensen, who worked in the closed care facilities De Koppeling and the Transferium, feels the same way. He also spoke to the De Winter Committee. There, Hensen was particularly keen to say that the institutions consistently downplay incidents and violence in their own reports, or lie about them. 'Putting things into perspective', as Hensen calls it. *'I told them what is happening, and particularly how stories are being 'nuanced' per layer. The first layer is that of the staff, who just flat-out lie in their reports. Then it goes to a treatment coordinator, who also puts things into a convenient perspective again, because they don't want to hear bad stories. Subsequently, the stories are presented gently and with lots of nuancing to the heads of departments. Or they verbally say: "There have been rather a few incidents, lately." Nothing more.'* Nino Hensen knows why they do it this way: *'If they were to write down everything that happens, they would need to close down.'*

The dossiers in institutions are unreliable, and reporting and complaint procedures are wonky. This is according to those involved, and is also the conclusion of the De Winter Committee. The Committee found that adolescents barely knew how to use the complaints procedures, and that the government has been 'negligent in its supervision'. As it says in the report: *'Supervisors, in most cases, failed to adequately protect the youngsters in their care, who experienced violence, and they failed to intervene sufficiently after such violent incidents. Because of their high caseloads, the guardians — who were the ones legally responsible for implementing child protection measures and who had to oversee a child's development and safety — had little contact with the children concerned, in the foster homes and institutions. Over the entire period, the external supervision by the Inspectorate had been inadequate. The government made insufficient efforts to prevent violence.'*

Filing a complaint is pointless, in the experience of the wards of state who were interviewed for this book. Judith, for example, often raised the alarm, but without result. *'I complained a thousand times. Talked to the complaints committee; sat with three men in a small room, who said that they would see to it. However, it took three quarters of a year for them to get back to me; they came to me at the time when I was allowed to leave there. At which point I said: "Jesus, never mind."'* Judith filed her complaint because, when she was at De Lindenhorst in Zeist, she was not allowed to go to school, could not play sports and was punished for the slightest thing. The staff and other adolescents there were aggressive towards her. But the Inspectorate did nothing. She experienced their visit as something they did for the sake of appearances. *'The shitty thing is that there was only one inspection visit during the whole time I stayed there, when everything was presented in a favourable light: "Nobody in solitary and nothing to worry about here." Three men came, who approved everything. And when they had left again, there was blood everywhere and people were stabbing each other again.'*

Jason had the same experience. While he was still at ZIKOS in Harreveld, he also filed a complaint about the lack of education at the organisation. But it is complicated to file an official complaint, according to Jason. *'The barrier to do so is high, when you are dependent on the facility you are complaining about. I noticed that my supervisor at the group did not appreciate it.'* Jason, however, remained combative. He also called the Inspectorate himself to report on the violence at ZIKOS. But this resulted in disillusion. *'They came by only once. And were treated to biscuits and tea. That was all, as I heard it.'*

It is a well-known fact that people often feel let down by the IGJ Inspectorate. Children's Ombudsman Margrite Kalverboer is very critical about this. She wrote that it is difficult for children to draw attention to the abuses, which means that those abuses do not become known. *'I recognise the conclusions by the De Winter Committee. Over the past two years, the Children's Ombudsman received only few indications of complaints about violence by or done to children in foster families and institutions. The reason why this is so is not clear, but it is quite conceivable that this is an indication of how difficult it can be for children to report violence within the youth care system.'* Kalverboer recently visited several closed care facilities, where she also noticed that conditions have deteriorated. *'The adolescents talked about feeling unsafe in the group. An unsafe social environment goes hand in hand with unsafe situations amongst the adolescents themselves. Insecurity can lead to stress and violence. Current problems in youth care contribute to insecurity, about which I informed the*

Minister of Health, Welfare and Sport in my letter of concern, dated 26 March 2019. One of the adolescents had stayed at the same facility several years earlier. He indicated that it had since become more unsafe. Fewer treatments were on offer. The unsafeness is in the interaction between the adolescents themselves, but also from the group leadership. The adolescents indicated that they, for instance, often had to stay in their rooms and that the alarm was raised a lot.'

The Children's Ombudsman has more criticism: *'There are many different group supervisors, each with their own interpretation of the rules. The adolescents do not make the effort of building a relationship with their supervisors, as they expect them to leave again, soon.'* Kalverboer draws a harsh conclusion: *'The developmental interests of the children are not paramount in youth care.'* Because, according to her: *'other interests come first, such as those of institutions, parents, municipalities, and those related to rules and regulations and the availability of care.'*

ALL-POWERFUL

A government that removes children from their homes for safety reasons, and orders them to be taken into care, appears unable to then prevent these children from becoming victims of abuse or violence once they are in the care institutions. And there is actually no one to stand up for the abused children in the care homes. Parents are often far away, the children are rarely allowed visitors. Fathers and mothers have major problems themselves, or no longer have parental rights over their own children. The guardians, who have custody over those children, are too busy to keep an eye on them and barely visit the institutions; due to a far too heavy caseload which everyone talks about. For many years, juvenile lawyer Reinier Feiner has marvelled at the fact that while we worry about poor conditions in care homes, we do not worry about children being placed out of home.

We have a long conversation. Feiner, friendly, hip shirt, unruly hair and wearing glasses, keeps modest offices in an old building in the centre of Rotterdam. As a result of this absence of parents and usually also guardians, and the lack of supervision by the Inspectorate, youth care has become all-powerful, he believes.

'Those children are often in the situation where they no longer have parental protection. Or not enough of it. That task is taken over by those institutions. And then a problem arises: there is insufficient monitoring and supervision. And in recent years, the Inspectorate has become increasingly remote. As a result, the youth protection chain has become omnipotent.'

The De Winter Committee also talks about 'remote inspection'. The IGJ did not even really contribute to the Committee's report. Investigation at the Inspectorate was a rather laborious process: *'The Committee was not able to obtain a proper overview of the Inspectorate's archives. The Committee was not provided free access and was unable to determine which archives would be relevant for its investigation.'* This has certain consequences, as the Committee stated. *'The lack of access to the Inspectorate's archives has meant that examination of the role of the government, particularly with respect to its oversight, remained only rudimentary.'* Rudimentary, here, is diplomatic language for 'amounted to nothing'. The level of obstruction, committed by the same Inspectorate, went even further, as the report showed: *'When requesting records from the Health and Youth Care Inspectorate, the Committee had no other option than to agree to provide the dossiers with aliases. This cost a lot of time and money and led to a less clear view of the topic under investigation than would have been desirable.'* Simply put, the Committee members could hardly access the Inspectorate's archives, and if they were given any documents at all, relevant passages were often blue-pencilled (made illegible).

When asked, the Ministry of Health's spokesperson responded that a large number of dossiers had to be anonymised because of medical confidentiality. Chairman Micha de Winter provided this diplomatic response by e-mail: *'The investigation at the Healthcare and Youth Care Inspectorate was laborious. This is described in the report on p. 21. It is up to the Cabinet and the House of Representatives to pass judgement on this.'*

CRIMINALS AND NETFLIX

Violence is not the only problem at closed care facilities. They face another big problem: children running away. In fact, everyone also mentions this problem. Directors say it is just par for the course. When the end of their stay in Jeugd zorgPlus is coming into view for adolescents who are staying in a closed care facility, they are awarded more freedom to practise 'normal life'. Such as

being allowed to go on leave. Very often, however, they do not return to the facility from such a period of leave. Furthermore, also those who are not yet working towards 'a life on the outside' are also continually trying to escape, sometimes with success.

David, for example, also constantly ran away from the facility in Eefde, according to mother Wilma. *'They were not keeping an eye on the children, at all. At one o'clock in the morning, David would turn up at my door. He had cycled from Eefde to Velp. My son ran away countless times while in a closed care facility! At one point he was gone for a week. And once they even ran away with 17 boys at the same time. They went into the village to shoplift and do drugs.'* Jakko was also a runaway. During a visit to a McDonald's, he suddenly sprinted away, while the rest of the group was already in the van to go back to the institution. Later, he ran away again with a large group of boys. Then they robbed a cafeteria in the village. Jakko said: *'We wanted to empty the till, but there was nothing in it.'* They then decided to break into a few cars. *'We took out the TomTom navigation.'* This earned Jakko another community service sentence.

Drug use and drug trafficking are the next big problem in closed youth care facilities. The adolescents interviewed as well as their parents all talk about this. Jakko confirms that he uses drugs every day at Intermetzo. *'It's being sold right outside the gate. And hash gets in very easily. I get free hash, when others come back from leave. All you need is good friends.'*

And then there is crime. Mother Wilma could not believe her eyes when she saw what went on at Intermetzo: *'Those youngsters had firearms, knives that they hid in the woods. I heard about a guy who wanted to kill a staff member. I know of one from another group who had stolen a tractor.'* Their sons are amongst the criminals in Eefde, both mothers said. There are gang members 'locked up' at Intermetzo, as Manon explains. *'Jason hangs out with guys from gangs in Rotterdam and Tilburg. They are at war, they are real weirdos who make their own drills — 'Drill Music' are rap songs with dark and violent lyrics and images — which has already caused a kid to be stabbed to death.'* At Intermetzo's social groups, there are not many activities for the adolescents, says Manon, who sketches how things are in the Taurus group. *'They are just gaming, slumped on the couches all day. At all times of the day, all those kids are just lying around. It's boredom. They slouch around watching Netflix all day. Nothing else happens. They go for a smoke, and then lie down again. There is no life in them. I see my child going further and further downhill. He was an active outdoor kid.'*

He did free-running, I used to go crazy when I had him around me for three hours. If you see him now; he walks around looking like a zombie. Like they are all heavily medicated.'

Wilma also wants to say something about the Taurus group at Intermetzo, about how the staff behave. *'The way staff treat the children; it's not acceptable. Twelve-year-old children are locked in solitary for more than 24 hours, with no-one checking on them, they are left to their own devices.'* In the end, her son David became depressed there. He tried to commit suicide several times, Wilma says. *'Purely out of desperation. At one point, he went so crazy that he tried to hang himself in his bedroom using the television cord. Twice they got there in time. Once they found him already unconscious.'*

'THIS SYSTEM IS ROTTEN TO THE CORE'

All those critical reports by committees that so painfully expose the violence in youth care institutions have unfortunately had little effect. The gigantically thick report in several volumes by the De Winter Committee did not lead to change for the better, either. For four years, the members of this Committee investigated violence in youth care. The stories they heard were so bad, they could hardly believe them. The Committee came up with very detailed recommendations to improve the situation at the various facilities. But, according to Committee member Jan Hendriks, nothing was done with the report. He is professor of forensic remedial education diagnostics and treatment at the University of Amsterdam and professor of forensic psychiatry and psychology at the VU Amsterdam. He argues that the responsible ministers remained 'scrupulously quiet' once the report was published. Not by accident, Hendriks fears. *'I suspect they think that it's nice that it's all written down, but that they've heard it all before and know what the problems are. I think they ignore it in the hope that it will blow over.'* The recommended measures to improve youth care will not be implemented, he fears. *'Because nobody really feels responsible. The national government thinks that the municipalities should act, while the municipalities look at the national government, saying they need more money, otherwise they can't change.'* Jan Hendriks has practical experience. *'I know these facilities inside and out,'* he explains. *'I've been around them for more than 30 years.'* He knows the types of children who end up there, and has also seen that their problems have become increasingly more serious, in recent years. As a result, the atmosphere in youth care institutions continues to harden: *'The children who are now being placed out of home are suffering from greater behavioural problems than those in the past. Back then, you could be placed out of home*

because your mother was ill for a while, or the family was too big, or because they could no longer cope at home.'

That is different now. And precisely because children today have such severe behavioural problems, they are sent from one place to another. When, after all that, they finally arrive at a closed care facility, they have become considerably damaged. First they will go to a foster family. *'But there are too few foster families available, and there is a great risk of these families not being able to cope with children with such difficult issues, because they are often not well prepared for that,'* says Hendriks. *'Those children have had a number of disappointing experiences; for a start, things fail at home, then a foster family fails, the next foster family also fails, and so on. So when they arrive at the institution they are filled with distrust, and are exhibiting considerable behavioural problems.'*

This is all the more reason for creating the right conditions under which these facilities must operate. Current closed care institutions are not meeting such conditions. Three basic things are wrong at the same time, according to Hendriks. *'It is the combination of groups being too large, very high staff turnover (i.e. there is no continuity in care), and insufficient funding — which represents a very unfortunate correlation of problems.'* Hendriks sees how the situation in closed care facilities has deteriorated in recent years, and he also attributes this largely to the transfer of responsibilities and funding of youth care from the national government to the municipalities in 2015. *'That transfer is not the only reason for the problems of today, there were other problems before 2015. But because of the decentralisation, the question now is who is going to do something about it?'*

The national government considers youth care the problem of the municipalities, but, because the decentralisation of youth care originally started as an austerity measure, the government failed to ensure sufficient funding to provide such care. So, municipalities say they need more money to solve it. Jan Hendriks: *'People are all pointing to each other when it comes to who should take action, and in practice this means that no-one does.'* The De Winter committee did make all kinds of recommendations to improve the situation in youth care institutions, according to Hendriks. One such recommendation is that of ensuring better-trained staff. *'The unfavourable combination of difficult children and group supervisors with a workload that is too heavy, which is why they subsequently leave again, makes it impossible to provide those children with what they need: continuity and safety.'*

According to Hendriks, the educational staff are often and unjustifiably the target of criticism. *'These are people working with heart and soul for these children, but who are put in an impossible situation. And that is particularly distressing. It's like with the special investigating officers ['boas', in Dutch, ed.]. They have to do the most terrible jobs in police work and get their asses kicked. But they, too, are inadequately trained and equipped. So, it's not just about those youth care group supervisors, it's about the whole system. It is rotten. In our committee, we wanted to pay a lot of attention to this aspect.'* However, the members of the De Winter Committee fear that a significant part of their recommendations will not be adopted. To them, their report feels like a fig leaf for the ministers involved, Hendriks says: *'It is quite ironic to think that our type of committee is being used so that they can say, "Well guys, we did our best. We set up a committee with all kinds of working groups, aren't we doing a good job!" It is possible that the Committee serves as legitimisation for a retreating government,'* Hendriks says diplomatically. But the fact that nothing is happening is not right. *'This is precisely what we feared would happen. It's just shameful. A Committee investigation involving so many millions of euros.'*

A year after the report was presented, there was still no sign that the responsible ministers was taking the advice to heart and implementing measures so that the abuses and violence in youth care institutions would come to an end. Two committee members, Jan Hendriks and Mariëlle Bruning, Professor of juvenile law in Leiden, turned to the NRC newspaper to express their displeasure at this fact. In the NRC newspaper, Hendriks also concludes that many recommendations by the De Winter Committee are almost identical to those expressed by the Samson Committee, which dealt particularly with sexual abuse in foster families and institutions. Concluding that nothing has improved in all these years: *'Back then we wrote: reduce group sizes, invest in measures against high staff turnover. Seven years later, I see that the situation is still exactly the same. And yes, this does tend to make you rather cynical.'* The De Winter Committee members, therefore, feel it as their duty to once again sound the alarm about the grave situation in youth care institutions. *'We do so',* says Jan Hendriks, *'because we have major concerns. If we say nothing, it will all fizzle out, I fear. The conclusions will be available on paper, but everything will be buried under a thick layer of sand. We feel a moral obligation, as committee members, to keep shouting: 'People, pay attention: this hasn't been solved, yet.' Otherwise, at some point in the future, yet another committee will be set up to do the same thing — which would make no sense.'*

10 TRAUMAS

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'I still have strong mood swings. Some days I cry all the time. I have post-traumatic stress disorder, I've been depressed and had mood swings for most of my life. At times, suddenly I'll get aggressive, and I have insomnia, I can't sleep for nights on end. It's not surprising that I'm not doing too well after everything I've been through.' Judith outlines how much her nine-month stay at the closed youth care facility De Lindenhorst in Zeist has traumatised her. It is almost a regular occurrence for children who end up in such institutions; everyone has been traumatised once they leave. Usually, these children suffer a threefold impact; they are often already traumatised when they arrive at a foster family or care institution after years of abuse, violence or neglect within their own environment. Then they are damaged further during their stay at a youth care institution. And when they are adults and 'out of youth care' as it is called, the trauma continues, as trauma therapy is often unsuccessful or lacking all together. This means they are unable to get on with their lives, in many different ways.

Judith also has traumas. When she returned for the first time to De Lindenhorst, six years after she left there, to pick up her dossier in person, it becomes clear why her stay at this JeugdzorgPlus facility damaged her to such a degree. Judith felt nervous. De Lindenhorst is located in the posh Lyceumkwartier district of Zeist; when we drove into the street, memories surfaced immediately: *'In that house over there, the boys who lived there would shout at us and invite us to parties. And here we walked along the road to the supermarket.'* Judith spoke in a rushed voice, noting that nothing had changed. She pointed to the gate: *'There I was pulled out of the van. I was begging for a cigarette the whole time because I hadn't had a smoke for two days. They took me inside, where I was searched. I had to take off my clothes and made to stand naked in front of a group of people. After that, I had to shower and wash my hair with lice shampoo.'*

Judith smoked a cigarette before we entered the building. The birds were chirping in this wooded area. *'There are cameras everywhere here,'* Judith remarked dryly, then coughed. We rang the bell and sat on one of the brightly coloured benches — green, yellow, orange, grey — while we waited. A girl stood in front of the security-glass counter, holding a suitcase. Next to her a woman — her lawyer or

perhaps her guardian? Formalities were being dealt with, and shortly after that, the girl went through the door by herself and disappeared into the corridors of De Lindenhorst, pulling her suitcase behind her. Then, finally, a secretary came to collect us. We went through doors, walked along corridors and had to climb some stairs. Judith said: *'I was here with my parents, a few times.'*

We were greeted by Christa Schrodeur, director or, as she called herself, site manager of De Lindenhorst. A huge woman with long dark hair and a very low voice with what sounded like a German accent. She introduced herself to Judith. *'Hello, I'm Christa Schrodeur. How long has it been since you stayed here?'* Judith said that she was 17 when she first arrived here and almost 18 when she left again, which was in mid 2013. From her chair, she pointed through the window to somewhere outside: *'I was over there. My small room was on the corner.'* *'Ah, you were in blue,'* Schrodeur responded. Those colours again. At De Lindenhorst, the buildings have colours that indicate the 'regime' (i.e. strict or with more freedom) to which the residents are submitted. In an attempt to put Judith at ease, Schrodeur asked: *'Did you have a good stay here?'* *'No, of course I didn't,'* Judith snapped. *'There was nothing good about it.'* And she burst out: *'I wasn't even allowed to go to school for three months, which was ridiculous! That's simply a human right. How can you do that to someone? There was anti-Semitism. A supervisor attacking me physically — he was from the army. And I was put in solitary confinement because I was 10 minutes late coming home, and my leave was cancelled because I forgot my books. Those are just things you really can't do. I asked them thousands of times: "Why are you doing this to me? I've been through enough, I need help, I need support." and I would burst out crying. But they would just kick me in the gut and made things even worse. I wonder if that's all in my dossier, too?'*

Judith then wanted to know what things at De Lindenhorst were like now, so we asked whether they were still applying solitary confinement. *'We are no longer working with solitary confinement,'* Schrodeur answered rather technically. *'The rooms are still there. But, for a long time now, our work method has been: "you shouldn't lock up a child, you should help a child."'* Judith was sceptical: *'All I can say is that I cannot believe things are going well, these days.'* To which director Schrodeur responded: *'I understand that you have lost confidence. I'm very sorry about that. Let me explain. When you were here, there was a transition phase going on; De Lindenhorst first was a youth detention centre (JJI). We had problems with aggression, it was "pressure and coercion". If there was an issue with certain children we would say, "They need to be protected from themselves." That's why you had so many negative experiences.'*

But Judith was not there during this transition phase. The new JeugdzorgPlus Act had already come into force four years before she got there, and, therefore, De Lindenhorst should already have been transformed from a youth detention centre into a 'regular' closed youth care facility. But according to Judith, although she had not been convicted of any crime, she was nevertheless placed amongst juvenile criminals. A situation from which she is still suffering the consequences today. *'I was here with kids who wanted to kill their own family, in one group with a girl who wanted to kill her mother. When I got out, all I could think about were knives. Putting all sorts of problem children together in one group only makes them sicker and sicker. This is a rotten concept. It has to stop.'*

That Judith felt so upset while we were in Zeist is saying something. By the looks of it, she had never really come to terms with her stay at the closed care facility. However, she was working hard to realise her dreams for the future. Judith is a street artist. Using scaffolding and an aerial work platform, she spray-paints wonderful works of art on buildings and immense canvases. Judith's paintings have become internationally renowned, such as in France, Italy and the United States. Amongst her work also a wall-sized, intense portrait of the late Amy Winehouse on the side of a building in Amsterdam, which has since been removed. See also her website.¹ Singer Amy Winehouse and street artist Judith share certain similarities: not only do they look alike, they are also both very talented, of Jewish descent, and both have lived on the seamy side of society. Both were expelled from school — Amy because she only wanted to sing, Judith because she wanted nothing more than to draw, anytime, anywhere. Here the similarities end; the British singer died when she was 27 due to her addiction to alcohol and drugs. Judith is working on her career. She has also created the artwork on the cover of this book.

'BETTER PUT ON YOUR CRASH HELMET'

'It may be that I'll start talking gibberish. Or that I switch to English. And what also may happen is that I fall over. If that happens, will you please put a pillow under my head?' Tim is still young, but he walks with a cane. He is not thinking about the future, he is just surviving. For our interview, Tim warned me that memories of his past in youth care could trigger violent reactions in him. It was a good

1 <https://jdlstreetart.com/>

thing that he had warned me about that, because, during the marathon interview in his flat, all of these things did happen. He was talking gibberish right from the beginning, and after half an hour, he suddenly started speaking in English. After an hour and a half, he suddenly fell over on the sofa. I did not have to put a pillow under his head, as he fell with his head right on top of one. Although I was warned, it still startled me and I asked *'Are you okay?'* When there was no answer I turned off the recording device. We had been talking about the more than three years that he spent at the De Hoenderloo Groep (DHG) institution in Deelen. Tim ended up there after having previously spent time at a crisis shelter and in a foster family. DHG was not a juvenile detention centre; no court had convicted him to be locked up. But, going by Tim's own story, he did end up in a 'closed regime'. Tim said: *'It was like a military institution, where you were being treated like a criminal. They put me in the toughest group, people were always fighting.'* A few months after our conversation, Tim was leafing through his dossier, which we had obtained. The documents showed that he had been in an intermediate form of closed care: his had been a 'closed ward' where children were deprived of their rights, but without this requiring a court order for 'closed youth care'. This information was new to Tim. He was also unsure about being able to handle this new information in his file. He looked anyway and said: *'I want you to read something. We had to play football. I couldn't because I had fluid in my hip joint. But they threatened me that, if I refused, there would be a physical conflict. I am still fucking walking with a stick because of my hip! I have an allergy, I can't peel potatoes and I have an intolerance to nuts. It doesn't kill me, but I get eczema. If I eat apples, I get short of breath. But they also made me eat and do all those things.'*

The so-called 'daily reports' about the group where he was staying further describe how Tim 'was no longer allowed to mumble' and that he had to 'stop whistling', and that he should take better care of himself and not be so demanding. At the time of our interview, more than a decade later, as we were talking about the strict regime at DHG, this became too much for Tim and he just fainted. At our next meeting, he could not even remember having fainted during the interview. He tried to explain what was wrong with him. He said he suffers from a conversion disorder: *'My vision sometimes fails, and I am unable to speak for half the day. I fall down a lot and have epileptic seizures. First, I thought I had something wrong with my brain, some neurological damage. I used to fall a lot and my father used to smack me in the head a lot. During the worst period, I had 15 to 20 fits a day. My GP told me I should wear a crash helmet. I visited the neurologist every six months, but I*

wasn't getting any better. Finally, they gave me an MRI scan, but this showed nothing, which meant I had to accept that it was all psychological.'

He has been traumatised by his past and now understands why he keeps fainting: *'They explained to me that this can happen when you have been under stress for so long. It's like what happens to sheep. They also fall half dead just like that. It is a way of protecting your mind from becoming overloaded.'* Before he came to the facility in Deelen, Tim had been mentally and physically abused by his mother and stepfather. There were all sorts of problems in this family. Tim was removed from the parental home when he was 11 years old and subsequently went to many different places. Tim had five guardians, one of whom he never saw.

He had a nasty childhood. But, according to Tim, most damage was done during his three-year stay — from 2004 to 2007 — at The Hoenderloo Groep. He received a 'supervision order' and a guardian was appointed to him (someone he did not know) who decided to have him placed out of home. Tim has had five guardians in total, according to his own recollection. Amongst them a guardian of foreign origins. *'She took me to Hoenderloo. Sarina. She just did as she was told, which was to take a boy to an institution.'* This guardian met with Tim only twice: *'Sarina came back just once. This woman signed me up and then I saw her only one more time. After that, I never spoke to her again. At one point, my little brother and I had a joint guardian. I never saw that one at all. Although she did call me once.'*

At DHG, Tim said, he ended up in hell. Other adolescents felt the same way, and some even took their own lives there. *'In my first week, there were two suicides. Oh, so many young people committed suicide during that time. Really very bad. A girl too. There was a youth club, I used to hang out with that girl. I had known her for two or three months when she jumped in front of a train. It made me feel like shit.'* Tim was very keen to disclose all that had happened at 'Hoenderloo'. Because, according to him, hardly anyone dares to talk about these abuses. *'There is such a culture of fear. When someone new arrives, it is made immediately clear: You don't talk about this to anyone after you leave.'* But now Tim was talking about it. And he too, like the other adolescents, recounted about counsellors who were army veterans or powerlifters, and about punishments being handed out, about fights and intimidations. *'Between boys themselves and with the group supervisors who run things and do real harm. And the worse you behaved towards kids, the greater your chances of having an easy time yourself.'* Tim became very traumatised living in such an unsafe environment. About DHG, he regularly thinks: *'I should blow the*

place up, myself included.’ Tim numbs his feelings of misery with ‘substance abuse’ as he calls his addictions. ‘I used to drink heavily, smoking weed, self-medicated on Ritalin and morphine. Just to get rid of those nasty thoughts. A thousand therapies don’t help. Neither does a banana or a cup of coffee. Drugs do.’

Sometimes, Tim manages to see the positive side. *‘I consider myself lucky that I don’t walk around like a drug dealer with a gun, or a gangster. At least I have a home and people around me.’* But for him, instead of getting better, life is getting more complicated. Tim describes how he is feeling: *‘I no longer have any hope of having a family of my own or having a job,’* his voice sounding sad. *‘That has really become impossible for me. And because of the way I react, the problems keep piling up. A few weeks ago, I was so freaked out that I told the police, “Please come and shoot me.”’*

Tim is tired of living, he said in a subsequent interview. Ideally, he would want to ‘fall asleep peacefully’. It is all becoming too much for him. The Hoenderloo Groep is the main cause. *‘I really want to scream at the world: Look what’s happening!! How they are destroying people there, harming them! I am not a millionaire, so I can’t afford an expensive lawyer. But if I could, I would take every group supervisor to court. I sometimes look up my old group supervisors on Facebook. They are well off, they have children of their own. They don’t realise what they have done. These people need to be stopped! They have to be prosecuted for their actions, because this is just not acceptable. It’s just too terrible for words!’*

FOSTER FAMILY

Vanessa, in her mid thirties, is the oldest of the former wards of state whom I interviewed. She wanted to talk to me about the traumas she suffered while in youth care. *‘I found out that there’s a lot I haven’t dealt with from my past. That I am constantly under treatment, either for addiction or psychiatric help. That I am suffering from depression. The psychological problems remain. I keep needing help.’* It was not until recently, however, that she realised she had these traumas. I spoke with Vanessa in her small and dark working-class home. During our conversation, she regularly went for a smoke, standing in the open door of the self-constructed annex, which also contained the dining table.

Vanessa about how she was doing: *‘Over the last two years, I’ve become addicted to gambling. I go to the casino and gamble online. I gamble in combination with taking*

Ritalin. I just buy those pills from someone who gets them prescribed but doesn't take them. With Ritalin, you can stay put for longer. I can gamble for hours on end, when I'm like that, sometimes eight to nine hours at a time.' Vanessa had to leave her parental home when she was eight. Her parents were always fighting. Her mother was an alcoholic. Her father was snorting coke, gambled too and worked as a subcontractor. Vanessa's sister previously had already been sent to a foster home because they felt she was too unruly. Then Vanessa's parents got divorced. After that, Vanessa lived briefly with her father and stepmother. But she soon ended up with the same foster family as her sister, the Voermans family (not their real name, ed.), in a small village somewhere in Gelderland. It was run by the grandmother, her son and his wife. Vanessa suffered hefty emotional scars while she was there. *'Those people were terrible,'* she said. And this she also explicitly wanted to say in this book: *'I want to expose them. It's really something that gnaws at me. A number of times, I have stood in front of that house, sometimes thinking about setting it on fire. That's how much anger those people unleash in me.'* In actual fact, everything was wrong there, according to Vanessa, giving a few examples: *'The oldest kids always had to take care of the younger ones.'* The foster children had to cook for themselves in a separate kitchen. The foster children were kept strictly separated from the family. With separate living rooms and a separate terrace. *'They had two living rooms. Theirs was very posh. They had a big garden. But we were not allowed there. We had a patio at the back and they had a nice terrace on the side of the house. Outrageous, really.'*

Traumatised Vanessa continues to be very preoccupied with her former foster family. She still occasionally drives past the stately home, and searches the internet to see if she can find information about the grandmother, the son Jean and his wife Sandra, and about their children. Vanessa talked about her foster family in the present tense: *'I have pictures of the house on my phone. It was for sale. I saved it all. What our living room looks like, and what their living room looks like. It's a world of difference. I don't understand how a family guardian can't see that! I can't understand it. Surely that's already wrong? Then something is not right, isn't it? That it's clear that we don't belong to the family — and if this is so, then why are we there?'*

The foster children were disadvantaged compared to the family's own children, at least that is how Vanessa experienced it. She gave an example of something that touched her deeply: *'My mother gave me these Mattel dolls. Those are pricey, and I had a lot of them. The daughter would steal them from me, but I would take them back. And then I was the one that got punished. It didn't make any sense. I had to hand*

things over to that daughter because they believed her when she said they were hers.' And Vanessa was lied to in a horrible way. Her father, who was in the criminal world, was murdered at one point. But she was not told the truth about his. Vanessa recounted: 'My father died, while I was living there. They then took me on to their lap to comfort me, telling me some story that he was in hospital. Well the story didn't make any sense, because someone had just hanged him!' So, later, Vanessa found out the truth. The grandmother's son was the worst, according to Vanessa: 'The son was a monster. He pulled me down the stairs by my hair. When my father was alive, he was still nice to me. My father always gave him extra money. After my father died, he was no longer nice at all.' Vanessa regularly ran away to escape what she felt was an untenable situation. This made things only worse. 'I was still young, eight years old, and only wanted to go home. Then, when they found me again, or the police brought me back, they would curse me out. I told everything to my guardian, but I was not taken out of there. I don't understand why child protection allowed this to carry on. I told them SO many times what it was like over there. Nobody believed me. I used to be so sad about that, and it still eats away at me today.'

Feelings run deep for Vanessa. *'Very strange that it is still eating away at me so much. I really can't understand why they were a foster family. They should never have been. But I couldn't do anything. Nobody listened to me.'* Then I discovered that another person I was speaking with had also stayed with the same foster family: Tim — who also told me that he had a terrible time staying with this foster family. He was initially looking forward to going there, as he explained. *'I was allowed to go to a foster family. The Voermans. My guardian took me there. I really thought "wow, finally!" But I just ended up at an orphanage! We were in a shack full of kids, aged 11 to 18. I ran away from there. I thought it was really terrible.'*

Tim painted a picture of how this foster family had been run by a married couple and a grandmother who was called 'omi'. He talked about three living rooms: *'One for the boys, one for the girls and one for the foster parents. We were not allowed to be with the girls. I should be grateful to be with a foster family at all. But this was like a children's home, exploitation! The children had to do chores, housework and mow the lawns. The Voermans' had a huge mansion with a ridiculously big garden and we were kind of the slaves there. We were the housekeepers. There was a professional kitchen where we had to cook. Sometimes the parents were there to tell us what to do, sometimes one of their children. The parents had their own room, and they ate separately. The foster family had a separate terrace.'*

Tim talked about the foster family's own children and grandchildren. *'They all had it very good, thanks to us. For us, it was anything but nice. I didn't fit in there. I was so tremendously lonely. I got completely depressed there.'* The grandmother was like the empress, the way she was treated, according to Tim. And there was virtually no empathy for the foster children: *'They were not the type of people you were comfortable to go to, there was just no connection at all.'* Tim was angry. He felt he had been tricked. His younger brother did end up in a 'real' foster family, though. *'My little brother had a foster sister, and he got a dog, a puppy. He had friends, he had everything. And I ended up at an orphanage.'* Tim indicated several times to his guardian that he did not like staying with the Voermans family. Without success. *'That guardian only made contact once, during all that time. He only came to see me once.'* Tim's 'adventure' with the Voermans family came to an end after two months. *'I ran away on foot, to my mother's house. I rang the bell there and said: "I ran away, I don't want to go back there and I won't go back".'* What Vanessa cannot understand is that, despite the bad stories they heard about this foster family, the Child Care and Protection Board, the guardians, kept placing new children there, nor does she understand why this continued for so many years, until 2013. She wondered: *'I don't think it's normal that they were allowed to be a foster family. How is that possible?'*

The names of family members have been anonymised but several sources refer to this particular foster family. And serious efforts were made to offer them the opportunity to tell their side of the story, without any intention to damage this family. The Voermans family wanted to respond to the allegations by the traumatised children. Apart from hearing both sides of the story, the statements by the various foster family members are also important because they are indicative of the flaws in how youth welfare services act. Foster families, like children's homes, may be motivated by profits and how is this risk factor being checked and monitored?

The following comments and statements are those of the foster family. The son's wife, Sandra, had been one of the grandmother's foster children herself, after which she got into a relationship with son Jean, as she explained. Sandra then ran the foster home, together with 'omi'. About the former foster children's allegations, she said: *'You know, they can accuse us of all sorts, but I'd rather see this addressed to youth care services. They placed children with us who really shouldn't have stayed with us. They had lots of problems and issues. We worked with children with 'zmlk' [very grave learning disabilities, ed.], with 'mlk' [learning disabilities, ed.], children who*

were victims of incest, or of alcoholic parents. We did our best to provide loving support, to always make sure they went to a good school, and to create a warm welcoming environment at home.' She admitted that there were indeed separate living rooms, as the former foster children complained about. But according to her, things were not quite as described. *'One day a week, we would eat with only our own family, so that we could have a chat with our own kids. The foster kids would then eat in the other room, while my mother [-in-law, ed] was there with them.'*

According to Sandra: *'It wasn't really a foster family, ours was more like a family home.'* She talked about going surfing with the children, going on outings, about a two-week holiday on the Dutch island of Texel — with all the children together. And with respect to the accusations about the foster children being afraid of Jean, Sandra curtly said: *'Well, they may say that, but he was only being transparent. If something was unacceptable, it was just that.'* What about the kids saying they were pulled by their hair? *'I have to object, that really didn't happen.'* And that they were beaten? Sandra: *'No, that didn't happen.'* Sandra stressed again that they had to take care of all those damaged children. She gave an example about a child who was really too traumatised for this foster family: *'We once had a boy in our home who jumped, and afterwards you thought: what was that? Youth care services made a mistake there, he should never have been placed with us.'* This boy accused Jean of sexual abuse. Sandra: *'But he never did anything, you know. Never. That's not true. He spoke to this boy one evening, because he couldn't keep his hands off the girls. And that was something that should have been investigated, but it never was.'*

And the damaged children kept coming, according to Sandra, giving the next example: *'We took in two little boys. At one point we thought: What is this? They were defecating in the wardrobe. You name it, they were doing it. They suffering from trauma before they came to us. We tried to deal with them as best we could. But, afterwards, youth care always said "Sorry this happened". At one point, we just became the dumping ground. If something couldn't be solved they used to say "Oh, just send them to Voermans". That's how it went.'* Sandra therefore concluded her defence of the allegations, saying: *'I have always acted from the heart. I don't see the bad stuff.'*

THREATEN

Jean and Sandra's daughter, Cindy, who is about the same age as Vanessa, told how she always considered and treated the foster children as siblings. When she

heard about the accusations that children felt like slaves because, for example, they always had to cook for themselves, she laughed. 'The kids were always allowed to cook together. It was purely to make them independent, to support them.' That they were eating separately did indeed happen, on occasion, according to Cindy. *'But they got the same food as us. It's not that with a foster family you always have to sit at a table all together. Sometimes you have quality time with your own children. We sometimes wanted attention from just our parents.'* That the children had to help with cleaning was also true, she said. *'Everyone had to do a bit of cleaning, at some point, I had to, as well.'* And there were separate living rooms for a reason. *'These were television rooms. The boys wanted to watch football, the girls didn't.'*

To the allegation that the children in their home became traumatised, she vehemently disagreed. Most of the children had a host of problems, according to Cindy. *'Those children were sometimes already very traumatised before they came to us. They were simply living in a delusional world. Some children should never have been placed with us. In those days, we had kids who had been severely abused. They were so damaged that, for example, leaving a peanut butter sandwich on the kitchen table was enough to send them into a panic. The girlfriend of their father used to hit them with a whip. They had been put inside the washing machine and locked in their room.'* Cindy had been in therapy herself because of the things she experienced with her foster sisters and foster brothers. She gave an example: *'They would lay down in the middle of the road, saying, "Just kill me, I don't want to go on."'*

Finally, Jean Voermans also commented. He talked to me on the phone, after the earlier conversation I had with his wife. All the children were traumatised, he said. *'If a child was not damaged, they would not come to us. We were a foster family for problem cases.'* Jean was a prominent presence in the foster family, in addition to having a regular job. Every time I confronted him with the painful issues that the foster children claimed to have experienced, he laughed. He said that youth care practices contributed to this, giving an example: *'Social workers would visit us and, in front of one of the foster children, they would say "If you behave well then you can go and live with mummy again, in a year's time." While to us they'd say: "That will never happen". Which makes you wonder who's fooling who? So, these kids would do their best, thinking they'd be able to go back home to mummy — which is where they belong. Mothers don't bring their children into the world for nothing. If it is impossible because of alcohol or drugs, well, that's another story. But ideally, children want to live with their parents.'* Jean's stories also showed that things could indeed get pretty rough in the foster family home. He also mentioned the boy who jumped. *'There*

was this guy with the foster service, he dropped a boy off at our place in his fat Range Rover. That boy jumped off the roof that evening — from 8 metres high. He landed full in a privet hedge, which saved his life. That boy was completely off the rails. He was 15 or 16 years old.’ For the Voermans family, running a foster home was tough, Jean emphasised, and that there was no appreciation for what they were doing. *‘We did say to each other, my wife and I, that we would like to write a book ourselves about that period of our lives. About what happened to us, good and bad. What we did to do good. Something that, in retrospect, was received as a demolition method.’*

After asking if it was true that he pulled children by the hair, he laughed out loud. *‘Dear, deary me, what an imagination. But I am not amused by libel or slander. In that case, I will take action, let that be clear. I have a lawyer standing by and we will take action.’* The tone of our conversation was taking a turn for the worse. Jean Voermans threatened to take whoever would publish ‘this nonsense’ to court. He stated: *‘It also has to be true. These kids are gossiping with each other, making up the same story. That’s all fine. But I won’t be put through the wringer. I have nothing to do with those weird things. I was acting in good faith, including for those kids. And we had a job to parent them, and we tried to do that to the best of our ability.’* Angrily, he ended the conversation, saying: *‘As long as we understand each other clearly, I don’t want to be bad-mouthed. I feel threatened because my reputation is being damaged by things that are untrue. I won’t just be backed into a corner.’*

When asked for their reaction about the Voermans foster family, Child Care and Protection Board Gelderland, southern region, did not respond to either emails or phone calls. However, the stories of these two children who had stayed with this foster family are no isolated incidences. All sorts of things were often wrong in foster homes, as reported by the De Winter Committee. Victims told of physical abuse in one particular foster home, such as being hit, kicked, pushed, shaken, pulled by the hair, forced to take cold showers, having food stuffed down their throats, and even having being electrocuted or strangled. Often this happened as punishment or during conflicts with the foster parents, according to the Committee report. It also noted on the subject: *‘Whereby the punishment would sometimes be excessively disproportionate to the “crime”. Sometimes the physical violence was a retaliation. Often it came out of the blue.’* Victims also reported sexual abuse in foster homes. One woman told Committee members that a foster father had made her pregnant. However, this type of sexual violence and mental abuse hardly became known, because the victimised children felt powerless, according to the De Winter Committee. *‘They had nowhere to go and had no-one to tell their*

problems to, partly because they were being threatened not to say anything by the perpetrators. Threats included that they would be sent away or separated from a sibling if they told anyone. This powerlessness made them furious towards their foster parents. Some children tried to run away to family or friends or they just left without having anywhere to go — anything to escape the violence. When they were being returned to their foster home, the violence would escalate even more.'

The exploitation that Tim and Vanessa talked about, was also mentioned by the Committee. It was still happening that children had to work in the household of a foster family. The lack of supervision was particularly notable, according to the Committee. The high workload of the guardians meant that they could not visit the foster families often enough. The Committee was highly critical at this point: *'The family guardian is a relatively distant and largely unknown figure to foster children and their parents.'* This is in keeping with the distraught feelings of Vanessa and Tim.

‘WHAT A LIFE’

The foster family was not the only thing that left Vanessa with a major trauma. She suffered another trauma in the four years that she stayed in closed youth care; first, she was six months in OGH in Zetten and then three and a half years in Huize Alexandra in Almelo. Of all the institutions, this last one was the worst. At the Alexandra facility, Vanessa was amongst girls who had committed crimes. One girl had even raped a baby. Vanessa has gotten hold of her own youth care dossier. An exception. It is a metre-high pile of documents. *'I won't read it,'* she said. *'I think it would only make me even angrier.'* But then she started leafing through a thick, red file folder anyway, saying: *'Look at this: Welcome to 't Groote Huys.'* She showed the booklet with all the rules of this building at the closed care facility in Zetten. There were quite a few of them, such as: *'Visits to the dentist will be postponed until after you leave here. Upon entering 't Groote Huys, we will check your belongings and you will be body-searched. We have an active and preventive policy to combat alcohol and drug addiction. To verify this, we have the authority to check for traces of alcohol and/or drugs via a urine sample (i.e. your own pee).'* The list of rules under the heading 'Security' was even longer. It is indicative of the repressive regime at this closed care institution. But even that was not enough for Vanessa. The evaluation report states that *'Vanessa needs so much structure, boundaries and checking that she will need to be in a maximum security regime, for the time being'.* This became the detention centre for girls, *'Sector Alexandra van Jongerenhuis Harreveld'*

in Almelo. At 'Harreveld', as Huize Alexandra is often called because it belonged to another institution in that town, Vanessa definitively suffered a major trauma. Several pleas to the juvenile court in her dossier show how terrible Vanessa found it there. Time and again, she asked to go home. In December 2003, she wrote:

'I don't really know how to begin. Because this is already the umpteenth letter I've written. But I don't think I'm getting through. I've been locked up for nearly two years straight and haven't celebrated Christmas and New Year's Eve at home for three years. And no birthdays for two years. I turn 16 in May and I'm already praying every night that I will be able to celebrate that birthday at home. And that I will be able to do things again that girls my age can do. Go shopping together, or to the cinema, and do fun things with my mum. I don't understand why I'm so bad that you are taking all that away from me. You act like I'm some big criminal.' The dossier also says that Vanessa had to stay in her room for 24 hours as punishment for not waking up on time and therefore arriving too late at breakfast. And there is a letter from Vanessa to the judge, which reads: *'I am amongst girls who have attempted or committed murder. This is not good for me. Girls who are continually attempting suicide, asking me what's the best thing for them to do, slit their wrists or drink a cup of chlorine? I have to deal with that day in and day out. There is no peace and quiet here. All around you there is loud music. When you go to your room too, the noise is everywhere. And banging on doors all the time when girls are angry, from morning to night.'* Also amongst all the papers are some emotional poems she wrote, such as this one:

*'I can't take it anymore, I want to cut myself.
I don't want to feel anything anymore, not to suffer.
So much pain and sorrow every day.
Goddammit I don't want this.'*

It aptly captures just how desperate Vanessa was in this closed care facility. The many letters from the guardians reveal that everything was indeed geared towards holding Vanessa there for as long as possible, for fear that she would go and smoke dope excessively, steal or even end up in prostitution. Nowhere it says that Vanessa received any serious therapy. At 17 she escaped from Alexandra, after which she was on the run for a long time. She had fond memories of only some of the girls at the institute; she was holding up a booklet with a purple plush cover and said endearingly: *'These girls at Alexandra made it for me. It has pictures and names.'* Over a year ago, Vanessa entered addiction treatment because of gambling. Only then did it become clear how traumatised she was by her childhood past. Vanessa: *'My therapist said: "What a life. You need to go further*

back in time.” And that’s what Vanessa is doing now. Amongst other things, she is going back, literally, to the places where she has been, in foster care and institutions. But this does not mean that she has dealt with her traumas, Vanessa said: ‘I keep rushing around. I have no peace at all. I have been locked up so often. I want to get out. I am running. Everyone says that too. Running, doing things. Hectic. Everything fast, fast, fast. I am never calm. Never. I always have to be in control and I don’t trust anyone. I was in a very deep depression, I couldn’t get out of bed. It was terrible, I didn’t want to live anymore. I have mood swings, I’m SO chaotic. There must be something wrong with my brain, caused by all this stuff.’

‘I NEED TO LET GO’

Almost all young people end up traumatised when they are in youth care, particularly in closed youth care. Iboya became traumatised in the Jeugd zorgPlus facility of Schakenbosch, although she tried not to be too resentful about it. But the stay did not do her any good. She also no longer has any contact with her parents who voluntarily placed her in ‘closed care’, and today she is living with her grandmother. Iboya explained what happened: *‘My parents and I had grown apart to such an extent that it clashed very badly. There was absolutely no communication between me and my father and mother. At Schakenbosch, I received therapy to restore the bond somewhat. That went in fits and starts. Sometimes it was good again, other times the contact was completely back to square one. But it didn’t work out with my parents. I don’t see them anymore.’*

In retrospect, Iboya does not understand why she had been locked up: *‘I don’t think it was necessary. They could have first looked at where and what the problem was, at what was going wrong in this family and how to best help with that, instead of ‘hop’ sending me straight to a closed care institution under the pretence of a lie.’* Jeugd zorgPlus was a far too extreme remedy, Iboya believes: *‘I had a very mild form of PDD-NOS [Pervasive developmental disorder not otherwise specified, ed.], a form of autism, but they said it was hardly noticeable in me. Schakenbosch was for retarded children.’*

After all she experienced, Iboya is now principally against Jeugd zorgPlus: *‘I think it is important for youth care services to look at how they can really help a child instead of always locking them up. Because that just makes young people bored and even more chaotic. If you lock all problem kids in one room, a lot of things don’t go right.’*

When asked if she was traumatised by her stay in the closed care facility, Iboya said: *'At the time, I did feel that way a lot. Now, I think that staying this angry won't achieve anything. I have to let it go.'* Above all, she wants to get on with her life. But that, it seems, will consist mostly of running. *'I now work at McDonald's and am saving up to go abroad in a year's time. Backpacking in Australia. I have family there and it seems a good idea to go there, after everything that has happened, after the whole rollercoaster of the past few years, and to be on my own for a while.'* Talking about her past in youth care is something she does not like to do. She wants nothing more to do with it, she says. *'I have developed an aversion to youth care. I don't want any more help, I've had it for so long now. I don't need it anymore.'*

TOO COMPLEX

Jason was so traumatised by closed youth care that now he is beyond help. *'I won't make it to 25. I don't think that trauma treatment is going to happen, any more. I'm being rejected everywhere. My problems are too complex.'* Jason made this known when I bumped into him again, a long time after the interview, during a study day on closed youth care in Leiden. Jason tweeted about it: *'There is a study day on youth care but there are no young people participating.'* This led to him being invited after all, as the only 'experience expert'. Jason was welcomed as a hero, at the venue in Leiden. He was wearing a black jumper that read 'I am a problem child'. All afternoon he kept his grey cap on. He had a ventriloquist doll with him. *'And there is a stuffed toy in my bag,'* he revealed. As always, Jason spoke in eloquent sentences. Seated in the wooden benches of the law school's monumental lecture hall, the people, academics, youth protection officers, juvenile court judges, juvenile and children's lawyers, teaching assistants, all were hanging on his every word. Afterwards, they crowded around Jason to talk to him.

This performance felt wrong somehow; it had all the hallmarks of a fig leaf for the professionals. The feelings of guilt over a failing youth care system seemed to be 'bought off' in this way. Jason is the personification of a child who did not get the help he needed, anywhere. He had become the poster boy for everything that is wrong in youth care, said tv presenter Jeroen Pauw, who hosted Jason on his talk show several times and was also visibly impressed by him. It is painful to see all this. In fact, his strong appearance is deceptive. Jason is in fact extremely vulnerable. When I called him again shortly after this conference, I was shocked even more. Jason was doing far worse than I already thought. *'I'm extremely*

destructive. About two weeks ago, I was in a 24-hour facility. As a time-out. I had hung myself there, and later I was discharged again.'

Subsequently, he told me about yet another recent suicide attempt, involving a helium tank. It was painful to see him like this, the assertive Jason, who was appearing everywhere in the media, often on television. Jason, who bravely fought against closed care institutions, solitary confinement measures and waiting lists in youth care, this same Jason is in dramatically bad shape himself. During the same period, Jason appeared at length on a TV show titled 'Tygo in psychiatry'. There, a highly traumatised Jason made his appearance. The programme showed how he locks himself in the bathroom and struggles with himself lying on the floor, under the coloured light of a disco ball. He has suffered too much damage. Jason is so traumatised that during our last phone conversation, he started talking about *'demons, a girl in a blue dress with blonde hair, who were shooting into his body'*. About keeping himself awake for days on end using large amounts of drugs. About forced admissions to a psychiatric hospital. And about being detained at the police station.

'I SHOULD BLOW UP THE PLACE, MYSELF INCLUDED'

The closed care institution in Harreveld (today officially called 't Anker) left Jason with his biggest traumas, as he explained. He spent three months at ZIKOS, Horizon's Very Intensive Short-term Observation and Stabilisation Unit. But there was hardly any observation, according to Jason. *'How can you say you specialise in observation when all the children are locked in rooms all the time?'* Almost all children talk about this aspect: in the institution, they are endlessly 'in their room'. A young person may not be in solitary confinement, which is subject of much debate, but this being locked in a bedroom is also extremely traumatising. Jason (who at the time was still known as the girl Latisha) resisted this confinement. In Harreveld, they 'rotated' groups, he explained. Meaning that they would divide the group into two. Mainly because of staff shortages, according to Jason. While some of the adolescents needed to stay in the living room, the others were locked in their rooms. His dossier shows that the stories about this fact are true: *'Because three groups are being rotated, Latisha [Jason, ed.] is in her room a lot.'* And: *'Latisha is defiant in the conversations. She refuses to accept that we rotate in 2 groups.'*

At Harreveld, Jason often ended up in solitary or in the chill-out, the clean, empty room with only pillows everywhere. He told about group members sometimes spending weeks in solitary confinement. He himself was usually 'only' there for a few hours, never longer. And especially at night. His ZIKOS dossier, which looks more like a report on a military operation than a youth care file, shows that putting him in solitary was done with the use of brute force: *'Latisha finds it difficult when she is being put in solitary. Eventually, she will come along by herself, but in solitary she will put up a fight and has to be pushed to the ground according to the MFT method [Mental Physical Training method, ed.]. She then continues to resist, which forces staff members to continue holding her down while undressing her. This then happens under fierce protest, as she does not think what is happening is necessary.'* And what should have happened did not happen, the dossier also shows. Jason received a great deal of punishment, but no treatment. Thus, he became increasingly frustrated as well as aggressive, as records show. Below, one of the supervisors describes one of the many escalations at ZIKOS to which Jason fell victim: *'She kept rambling on, stopped following instructions and started swearing at supervisors. Told Latisha that she could go to her room for a while to think about her behaviour and how she could change it. Once in her room, she went berserk, kicking the door, kept on shouting and cursing at the supervisors. When this was bothering the other kids, the supervisors decided to take her to the chill-out.'* After that, things only got worse. Cameras were even deployed. In the handover, a behavioural expert wrote: *'I have added a measure to the room 4 plan. Solitary with camera surveillance during the night. There is no clear view through the hatch in the door, so when the risk increases, camera surveillance may be needed.'*

Jason said that he holds the board of Horizon, the organisation to which Harreveld/ZIKOS belongs, responsible for the traumas he suffered in this JeugdzorgPlus facility. And he is vindictive, as it turns out. Jason did not hide his vengefulness: *'When I came out of youth care, I had really bad PTSD symptoms from my stay at Harreveld. I had nightmares that I had to go back. I thought about walking in there with a bomb. I thought about blowing the place up and myself with it. That's the bonus. If I would have been able to drive a car, I would have driven it into Harreveld.'*

When I saw Jason again in his container home in autumn 2019, it was a hot day and he was wearing shorts and a short-sleeved shirt. He was no longer hiding the fact that his legs and arms were covered in scars, some even very fresh. The result of him cutting himself. Jason, at the time, had just started an HBO

study (higher vocational education, ed.) in Social Work at the Hogeschool van Amsterdam (HvA). This is a pattern; very many adolescents who have stayed in youth care institutions or have otherwise come into contact with youth care later become experience experts or even social workers. Jason was doing both. He is an experience expert with the ExpEx foundation (*Experienced Experts*), and wants to do professional social work. Preferably after first completing a university study. However, his HBO degree is already taking a lot out of him, with all his traumas and disorders. He has abandoned his search for trauma therapy, Jason says. He is now focusing on his studies.

However, an article in the HBO college's magazine, for which he was interviewed, showed that Jason was doing really badly. He gave a list of the things that he was carrying around with him: *'assistance dog Lennon (for mental support), very tangi pieces of candy (to bring me back to reality), a stress ball, a crisis card, a sharp object (to poke in my hand when I'm not in the moment) and medication.'* Jason said: *'Without these things, I don't dare leave the house.'* Jason also gave some examples of the more than 13 diagnoses he had received, over time: *'Post-traumatic stress disorder, gender dysphoria, mood disorders, depressive episodes with psychotic features, severe conduct disorder and emotion regulation disorder with risk of suicide.'* In the interview, Jason also said that he did not think he would make it to 25, and that his back was against the wall. Because, in his condition, he was not eligible for trauma therapy. This is due to the system. He had more than 10 labels, according to social workers/counsellors, which is why he was too much of a risk to treat. In the article, Jason said: *'To start trauma therapy, for example, I cannot be suicidal, but as soon as I go back to my trauma, I could become suicidal. So I am stuck.'*

However, there are also positive points: in November 2019, Jason won the Shaking Tree Award (!) of the Ministry of Health, Welfare and Sport. The jury explained why Jason received the award: *'Disarmingly and, at the same time, with sharp observations and reflections, he shakes up youth care, and closed youth care in particular. He is a welcome guest in the media and thus manages to draw the attention of politicians and policymakers to what could be done better in youth care.'*

Then, as icing on the cake, he was invited to the King and Queen's New Year's reception. But Jason did not go. As he said in a Volkskrant newspaper interview in February 2020, he had felt too traumatised to go to a gathering with police officers present. During the interview, Jason was not in a bathroom with a disco

ball, but in a small tent covered with stars on the outside. Jason explains why:
'I like to be in my spaceship. The universe is my new obsession; it represents ultimate freedom. Having been in closed care, I am very keen on freedom.'

11 FROM ONE GENERATION TO THE NEXT

'Most of them have had a baby, either in the closed care facility or after they leave. I saw a stabbing the other day. To me, they don't seem to have changed one bit.' Statement by Judith. Of all the wards of state interviewed for this book, she is doing the best, relatively speaking. But having been locked up in De Lindenhorst nevertheless still dominates her life. On Facebook, she is still following other girls who had been locked up in Zeist at the time that she was there. And she can see that all of them are actually leading a rotten life. As is the case with most young people who have stayed in such institutions, and particularly in JeugdzorgPlus facilities. A justifiable question is that of what being locked up ultimately had done for them. And the answer almost invariably is *little to nothing*. They have often gone off the rails and have been traumatised by violence or abuse by their parents (who themselves had major problems) to such a extent that institutions are never able to save them. Because any treatment there is failing or is not even started at all, these adolescents very often cannot cope with 'normal' life after they leave the institution. As a result, they often end up in the same misery as their parents. They are aggressive, become addicted, depressed, suicidal or criminal. They are regularly homeless. Girls end up in prostitution or become pregnant at a very young age. The children of these young people, in turn, are often also placed out of home. In this way, history is repeating itself and this negative spiral can hardly ever be broken. The problems are passed from one generation to the next.

The stories told by the wards of state themselves illustrate this fact. Judith said that most of the girls who were at De Lindenhorst while she was there, had a baby either already while in the institution, or soon after they left. Nola, only 14 years old, also told about young girls who were pregnant while at the closed youth care facility in Heerhugowaard, during the time she was there. Talking matter-of-factly, Nola said: *'Two good friends of mine have both been pregnant. One before she came to the Transferium and one while she was there — that first one was 13 and pregnant when she came in. They both had an abortion.'* These two girls never gave birth, but Vanessa did; she had a son when she was 17. She had run away from the Alexandra closed care facility and got pregnant immediately afterwards. She desperately wanted to have the baby, as this meant she had something of her

own that no one would take away from her, as she said. *'Oh, I wanted him SO badly. He was SO wanted.'* Babs also had a child, already. In May 2019, she gave birth to a daughter. Babs was just 19, at the time. *'I never meant to get pregnant, we only found out very late.'*

The arrival of her daughter did mean another problem, right away. When Babs told her workplace, a supermarket, that she was pregnant, she was fired that same day. At the time of our interview, Babs was taking care of her little daughter, every day. She was living with her boyfriend, the baby's father, and still wanted to get her secondary school (VMBO) diploma, via home studies, with a focus on 'the economy'. According to Babs, things were going 'super well': *'I mainly focus on my daughter, because that is the most important thing.'* The birth of her baby daughter brought another beautiful thing, in the way of family, as she keenly emphasised: *'I am proud of my mother. We are in contact again. She tries incredibly hard to be a good grandmother.'*

SCIENCE

Scientists are studying the effects on young people of being locked up in youth care facilities. Amongst them Anne Krabbendam, a child and juvenile psychiatrist at Curium of Leiden University Medical Centre, who has also worked in closed care institutions. In 2016, she obtained her PhD with a thesis titled 'Troubled girls, troubled futures'. Krabbendam wanted to know how young women were doing several years after leaving a closed care institution. The answer was not good. Of the girls interviewed, 90% had severe traumas. A large proportion had psychiatric disorders. Once outside the institution, the girls often exhibited aggressive behaviour — aimed at themselves (cutting or burning), or at their environment. Many young women were suicidal. A few had even died by the time the thesis was published. The research also showed that children, when they entered JeugdzorgPlus, were already so traumatised that there was almost no saving them. Psychiatrist Krabbendam put it this way, during an interview: *'When they enter closed youth care, we are already 16 years too late.'* Furthermore, she also saw something very worrying. Many girls who came out of JeugdzorgPlus would get pregnant at a young age and problems with their children soon followed. Krabbendam: *'At the time of our study, a third of the girls who had been in closed youth care already had another child. If the study had been five years later, this might have been 50%. And of those children, a large percentage had*

already been placed in care or under the supervision of a family guardian. Then you can say: 'In another ten years' time, best reserve a place in a closed care facility for this child'.

Anne Krabbendam therefore raised the question of whether some young people who come out of closed youth care should not be prevented from having a child — in a bid to prevent passing on the misery from generation to generation. Krabbendam's promotional research attracted a great deal of publicity, but rather surprisingly, this particular, delicate subject did not receive any attention. She explained that she is in favour of contraception, to prevent girls with major problems from having children at a young age. But that would not be easy. *'The law does allow prohibiting someone from having a baby if they are truly not capable of caring for that child. But this does not apply to all girls in closed youth care. Would sterilisation be an option? I don't think so. Good commitment to contraception would be though. Some of them very consciously choose to have a child at a very young age, but many simply fall pregnant because they forgot to take the pill five times. It would be better to give them injectable birth control rather than a daily pill they can forget to take.'* What should also happen, according to Krabbendam, is to offer a large amount of support to the girls who do have a child, even after they leave closed care facilities. So that they can take care of their children themselves. *'You should tell them that you will help them, even before they are ready to give birth, so that they will be able to keep their child. These teenage mothers need intensive counselling.'*

Good care, according to Krabbendam, consists of enabling teenage mothers and their children to be together. *'Out-of-home placement often benefits neither child nor mother. Because if this child is subsequently moved from institution to institution, there is no point in doing so.'* But young mothers are traumatised by youth care, and, therefore, invariably refuse all help, in the opinion of Krabbendam. *'These mothers are very weary of any such help, because of their own bad experiences.'*

'TREATING PARENTS'

Child and adolescent psychiatrist Peter Dijkshoorn believes we need to do things differently. He argues that more attention should be paid to the parents. They usually damage their children unintentionally, because they themselves have been damaged and traumatised. When damaged people have children themselves, they fall into the same trap as their parents; they will start abusing or neglecting their children, mentally or physically, which in turn causes those children to

develop very big behavioural problems. These problems are, thus, passed on from generation to generation, as Dijkshoorn also makes clear. *‘This means that it is the traumatised parents who need to be helped — then they will be able to parent better, there will be no negative situation at home and, therefore, their child won’t have to leave.’*

Peter Dijkshoorn concludes that much more attention needs to be paid to this aspect. In his mental health care organisation Accare, they have started doing so. They are analysing 75 complex youth care cases. This concerns children who are either in Jeugd zorgPlus, in the mental health care system, or in a juvenile detention centre, or they are children with mental disabilities who are receiving care. *‘We then plot the entire life history of these children, their treatment history, and social circumstances. What we look for is patterns. One of the outcomes that researchers expect to find is trauma in their parents.’* Assuming that it is indeed true that many parents of the children in institutions have trauma themselves, care staff need to be trained more extensively on this aspect. And this does not have to be at all complicated, according to Dijkshoorn. After all, much progress has been made in the field of trauma therapy in recent years. *‘Ten years ago, we couldn’t do much with that. But fortunately, in recent years, great progress has been made in trauma treatment. We need to treat those parents so that they are better equipped to raise their children. We now know that good help is simply available and does not take long to take effect. And that it relieves a lot of the pain in those affected. Such help prevents them from becoming a weak parent. A loving, yet weak parent.’*

Psychiatrist Dijkshoorn shows a surprising amount of understanding for the parents whose children have been placed out of home. He does not condemn them. He speaks of parents being ‘clumsy’ and ‘powerlessness’. In the medical world, a great deal of research is being done to find better treatments, Dijkshoorn says. *‘In the past, 95% of children with leukaemia used to die, and now 95% survive. This has been due to just hard work.’* The same work method — scientific and tenacious — should also be done in youth care. *‘We have placed 46,000 children out of home. The question is, should we have? We need to find out what could have been done differently, earlier in the lives of these children. What caused all that has happened to them?’* This calls for proper analysis and preventive work in youth care. The problems of the many children who become damaged while staying in closed care facilities can only be prevented if those children are no longer placed in those institutions to begin with, Dijkshoorn remarks resolutely. *‘This means that you have to ensure that the inflow into Jeugd zorgPlus simply dries up. We must do better, to make sure that those children do not end up there.’*

Babs

Babs, who tried to hang herself at the closed care facility in Zetten, and, barely 19 years old, became a mother herself, had a miserable childhood. She described the problems as follows: *'It was not safe for me at home. After my father died, my mother started abusing me. I was always the black sheep, always blamed and was the one who had to take the hits. She threw things at me, and I don't mean a shoe or slipper once in a while, but an entire table.'*

Babs' parents divorced when she was two years old. She was seven when her father, who was her 'best friend' as she said, suddenly died of cancer. Babs recounted: *'My father meant everything to me. And then all at once he was gone. I didn't talk for a month. And I was very aggressive towards everyone. My mother had called in youth care services. I got a lot of tests and therapies, and went and did part-time treatment.'*

Things went wrong, nevertheless. *'My mother hit me once when I had a friend over, she hit me so hard that my friend could hear it upstairs in the attic. She told about it when she was at her home. The next day I went to school with a black eye, bruises and a broken arm. My mother had twisted my arm so badly that it had cracked my bone. The school called in some help.'* This friend's parents then cared for Babs, taking her in for a while. After a short time, Babs went back to her mother anyway. which is when she entered the mental health care circuit.

Babs explained what happened to her next. *'You have to take a taxi there, after school, to see if you are mentally disturbed. They give you labels telling you that you have ADHD or autism. I did that for a year, until I was 11. Then I went completely down the wrong path. I was suicidal, cut myself, started drinking and smoking. I was also nicking money from my mother — like 100 or 200 euros.'* Babs also started dealing drugs. And she became increasingly aggressive. *'A 16-year-old boy ended up in hospital with broken bones because of me, I was 12. It was about money he still owed me. I was super mad at him. It was the second time someone ended up in hospital because of me. The time before that was when my father had just died. A girl in primary school had the nerve to say to me: "Nice for you that your father is dead." I took her by the hair and bashed her head onto a point of the fence.'* Babs laughingly said: *'She still has a bald spot there now.'*

Babs ended up at various youth care facilities, where things were tough, yet again. *'I couldn't care less about my supervisors. I threw liquor bottles at their heads. I*

demolished everything, I attacked girls for no reason. You know, I was “too heavy” for that shit.’ And so Babs was either sent away from each of those places or she ran away herself, like the time she was kidnapped. ‘I was held by some fucking crazy guy for four days. I was walking in the centre of Nijmegen. It was evening and there weren’t many people about. I was grabbed by three people. Kidnapped. They raped me, abused me, gave me GHB, made me do the craziest things. I was only allowed to walk in my thong and a crop top. I had to deal for them.’ After a fight over some bad hash (“it was clay”) that she had to sell for these people, Babs also got a knife on her throat from the man holding her. She was terrified: ‘On the fourth day, I managed to get hold of my phone, so I called 112 and said, “I’m here somewhere but I have no idea where.” Then they went looking for me and found me. They found me covered in bruises and blood, my skin full of cigarette burns made by joints. The man escaped via the balcony. The police broke down the door and got me out.’ After this experience, Babs arrived at the OGH closed care facility in Zetten. Where treatment, or ‘re-education’, could begin.

Tim

‘My mother worked in a café. At one point, the doorbell rang, very late at night. It was a taxi driver. He said “Your mother has pissed all over my taxi.” So I went out to help her get out of the car. The inside of the taxi was indeed covered in piss and she was dead drunk. I wanted to help her into the house, as she could no longer walk on her own. I tried to take her bag. But she went crazy, completely out of control. Totally aggressive.’ Yet another story of the total misery that children live under, at home. This time it is Tim’s story, who explained how he tried to prevent his mother from entering the living room that fateful night: ‘I was terrified. I had wanted to help her up the stairs. She pushed me away and scratched me. I got scared and ran into the living room. Then she suddenly slammed her bare fist through the pane of glass next to the living room door, “Wham!”. She opened the door and came into the room. We had a little bar. My mother grabbed a beer glass and smashed it saying: “I’ll kill you, I’ll kill you. Now give me back my bag.” I dropped the bag on the floor and ran upstairs. I barricaded my bedroom door and called my sister. “What should I do?” I asked her. She said “Just call the police.” They came. I climbed out of my bedroom window at one point, because I was SO scared. I heard my mother crying out. It was such a bizarre situation. I was now the guilty party and the police wouldn’t let me back into the house.’

Tim’s story is again about a very complex childhood. Tim and his little brother grew up with their mother. She was no longer with their biological father, and

she had three more children from a previous marriage. They moved house frequently. He remembered them 'trading down' from a large house in a green environment, owned by his stepfather, to a small social housing place in one of the suburbs. They also lived in a caravan on a nudist camping site in Spain for a year. The mood was never positive. Therefore, shortly after this incident with the taxi, suddenly something snapped in Tim. He was 'completely fed up' with the chaos and with being abused by his stepfather. *'I started throwing chairs around. I kicked down all thirteen doors in the house. I threw down half of all the furniture and other stuff from the first floor. I went completely berserk. This is how that goes, yes. It was eight years of accumulated stress. I was aggressive, because that's what I had become.'* Tim, like so many, ended up in crisis care, then on to a youth care facility in Deelen, part of De Hoenderloo Groep. He entered the place being traumatised, scarred by the unsafe situation at home. And three years later he left there, he was even more traumatised than when he had arrived there.

THE PARENTS

Then something extraordinary happened. Tim's mother, Anneke, heard about this book, *Wards of State*, and wanted to tell her story. So I travelled to a village in Overijssel, tourists everywhere, I had to squeeze through a crowd of Chinese walking the streets. There Anneke was living, then 60, with Tim's stepfather Bart, then 86 (these are not their real names).

Anneke and Bart were living in a holiday cottage, full of stuff and not very clean. Under the glass plate of the coffee table medicine boxes were lying in plain sight. Tim's mother rolled a cigarette and asked if I would mind if she smoked. The air in the small living room soon turned blue with smoke. Skinny, hair in a ponytail and wearing red glasses, she sat at the table against the wall of the small living room, right next to the fridge. Tim's stepfather was sitting in an easy chair. For the first fifteen minutes he said nothing. Anneke was delighted that her son was collaborating on the book and that now she was, as well: *'I can totally relate to it. With love and pleasure.'* She first elaborated on her own background. Her father and mother's marriage was harmonious. Her father got stomach cancer when she was 8 years old, which they never told her Overijssel until she was 16. She speaks fondly of him: *'He was often ill, but did everything he could to give us a happy childhood. I still miss that man every day. We had such a strong bond.'* She spoke in a light-hearted tone.

Anneke and Bart seemed unaware about the amount of damage they had caused their children, and that this is why we were now sitting together talking. She casually talked about the complicated relationships she had, the unusual family compositions. Anneke had three children with her first husband. *'He got a girlfriend'*, she said about the reason for their divorce. Her ex-father-in-law was a married man with five children, who then became her new partner and fathered her fourth and fifth child — Tim and his younger brother. He was of course also the grandfather of Anneke's eldest three children. Laughingly, she talked about this unusual and unclear situation: *'All those kids thought they were each other's cousins until they found out they were half-brothers and half-sisters. That's how it went, in those days, we were sneaking around.'* Then Anneke's third husband, Bart, arrived on the scene, 26 years her senior. Again, this was also no ordinary relationship. Anneke married and divorced Bart twice. Now they were together for the third time, not remarried this time. When she met Bart, he was a man of stature. This can still be heard in the way Bart speaks. He was the director of an institution for the mentally handicapped and lived on a large farm with dogs and horses. Bart 'legitimised' Tim and his little brother, as he called it; giving them his surname. But those same children were also the reason for both of Bart and Anneke's divorces. Bart was used to a very luxurious life without children. And then, suddenly, he had five of them. Especially the two smallest boys, Tim and his little brother, he found 'difficult', he said.

They told their side of what had happened when Tim suddenly 'lost it'. Anneke began to explain: *'We were sitting downstairs when we heard a lot of noise. We thought one of them had fallen down the stairs. Then all kinds of toys came flying down and boxes and so on.'* She turned to Bart: *'And then you called the police.'* 'Right,' Bart confirmed. *'I did. Because he was unmanageable. You don't know what to do. You're just sitting in the living room and then this happens.'* Anneke said she remembered it as if it happened yesterday: *'The police came in a couple of cars, with loaded guns. They thought Tim was an 18-year-old boy, but he was only 11.'* When asked if they wanted to hear what Tim told me about this, they said yes. So I said: *'Tim says that he was beaten so many times by Bart, with a belt, with his trousers down, and that there was constant drunkenness at home, that something snapped in him. He just went crazy from all the violence, you were beating each other too, that this time HE was the one who smashed things up.'* There was a silence. Then Bart said firmly: *'I have never beaten them with a belt.'* Anneke: *'You did slap them, once in a while. But that was because they had really infuriated you.'* Bart about Tim: *'I did slap him. A slap around the ears, I think. Anneke and I often disagreed about raising the children. They were*

aggressive towards her. I wanted to protect her.' But being drunk and peeing inside a taxi, as Tim claims? Sloshed on the sofa, also during the day? Anneke did not remember any of that. She said: *'That's slightly exaggerated. Sure, we did drink — a glass of wine before dinner and with dinner. Well, when you've had one glass, the second and the third go down easily. But there is 'drinking' and 'drinking'.* At a certain point, her daughter became seriously ill. Anneke: *'After that happened, just to forget, I did start drinking.'* The conversation becomes increasingly painful. Anneke said: *'We were advised to have Tim tested. This showed he had ADHD and PDD-NOS. I think everyone suffers from that these days.'*

The relationship with youth care services was not very good, according to Anneke. *'It was never really that terrific. You ask them for help, a helping hand.'* It started with the 'Family First' method: *'Two men came, with neat lists and stickers. We didn't really see any improvement. They thought it was better for Tim to be moved out of the house. Looking back, we definitely didn't get any adequate help. I think someone, or two people taking turns, should have come into the home. To help the whole family. I think there would have been a much better outcome then.'* So, things went the wrong way, said Anneke. *'It's like a whirlpool, in a downward spiral that only gets worse. You get into a situation where you lose control over everything.'*

However, Tim was not the only one where things went wrong in this family. Child welfare services regularly visited Anneke and her children for years, for several reasons. Then it became clear how big the problems were with the other sons, as well. Two boys had already been placed out of home and were assigned a guardian. Tim's youngest brother was jailed for nine months because he had seriously abused someone during an argument at the shelter where he was staying. The incidents, one after another, formed a string of misery. I also said to Tim's mother and stepfather that Tim had told me about the time that his eldest half-brother, Robin, had been so angry that he had beaten up Bart. Right in his face. And that it had been a horrible, bloody fight. This was one of the incidences for which Tim has had trauma therapy. And he told me: *'I still see the images before me. Night and day.'* Anneke, however, reacted dismissively to this story about the fight: *'No, no, it wasn't as bad as that,'* turning to Bart: *'But you and Robin did have a scuffle once, after which you said: and now get out and don't come back.'* Bart remained silent. Anneke continued to put the abuse of the children into perspective: *'This I find very tricky. One person says he is being abused when you just point a finger at them, another will only say this after the whip comes out.'* After almost two hours of talking, I left. Sad and shocked about the fact that all this could happen, and

about parents not seeming to realise or refusing to admit to the damage they have done or are doing to their children. And that it is the children rather than the parents who are 'punished for life', as a result.

THE GUARDIAN

It is not often that all sides of a complicated story come to the surface, but with Tim, this was the case. By chance. Because of his dossier. When his dossier from Youth Protection Services Gelderland seemed too difficult to obtain and because Tim really wanted to have it, partly to help him deal with his past, we turned to the Youth Protection office in Nijmegen. Tim did not feel up to doing this himself. We discovered that one of Tim's guardians was still working there, after all of these years. She was in the office and was happy to talk to me. About the dossier as well as about Tim and his family. She gave me permission to quote her, on condition that her real name would not be revealed. Therefore, here, I have called her 'Sarina'. Sarina remembered Tim well. It was she who personally delivered him to the closed care facility: *'I took Tim to Hoenderloo to help him. Tim was placed in a group that specialised in behavioural problems. He had ODD [oppositional defiant disorder, i.e. extreme rebellious behaviour, ed.]. He isolated himself very often.'*

Many of the children in closed care institutions, such as the wards of state interviewed for this book, have this diagnosis in their dossiers. ODD, however, is often not necessarily a psychiatric disorder. These children's extremely defiant behaviour can mainly be understood as them being 'very, very angry'. Sarina also clearly remembered Tim's family. She was very critical of his parents. *'The father and the mother, this was very peculiar, they blamed Tim for everything. They didn't look at themselves at all. Their house was too full and too crowded and not clean. Tim spent a lot of time in his room, on the computer. His mother was smothering him, it was attraction and rejection.'* She confirmed that 'the mother and the partner' had no faith in youth protection services Gelderland and therefore cooperation eventually broke down. Sarina, diplomatically, said: *'As a family guardian, we have to support and guide the child. Towards parents, we have an advisory role. But most parents disregard such advice.'*

Then this friendly guardian started talking, unprompted, about how many children were ending up in institutions mostly for the wrong reasons. That they are almost never the root of the problem themselves, but that they are in

a 'problematic home situation'. In other words, they are in a closed youth care facility because the parents are not functioning properly. Sarina also spoke of the ongoing misery in some families: *'Things are passed on from generation to generation. I hope, when I help, that we can break that pattern. But, very often, I really worry.'* When a situation is getting out of hand, very often the solution is an out-of-home placement. Guardian Sarina never likes to do that, she said: *'Removing a child from its parental home is very difficult. Sometimes, you would rather remove the parents from the home, but as that is not possible, you then choose the lesser of two evils.'*

She went on to explain that, unfortunately, parents cannot be forced to do things differently, to do better. There is no legal basis for doing so. Youth protection can therefore only take measures on behalf of the children. And these measures are often rigorous, such as taking children away from those parents. The real purpose of this meeting with the guardian, which was to obtain Tim's dossier, failed. For many years, the contact between Tim's parents and youth protection services Gelderland had been extremely strained, which is why, in the end, someone from the Salvation Army's youth protection became Tim's new guardian. She was also already the foster mother of Tim's younger brother. Tim's entire dossier was then handed over to the Salvation Army. Tim claims that he has never met this Salvation Army guardian.

VANESSA

If there is anyone who has experienced first-hand how misery can be passed on from one generation to the next, it is Vanessa. Her father was a labour subcontractor and a violent man, her mother was an alcoholic. *'My father beat my mother a lot. And my mother was drunk, always drunk.'* Vanessa came from a blended family. *'I have another half-sister, she is seven years older. My father got another wife and I stayed with my mother. She wanted to turn her life around, as she so often does, and got herself admitted to a clinic. Then I was supposed to go live with dad. He had a criminal life, he snorted a lot. He couldn't handle me and I had the feeling that my stepmother would rather I wasn't there. Within six weeks, he took me to that terrible foster home, where my eldest sister was already staying.'*

Her father died horribly, later on. Vanessa said: *'He was hanged. Just criminal. He 'arranged' subcontracts and then he just wouldn't pay up. It was inevitable that something like this would happen.'* This was Vanessa's early childhood — an accumulation of neglect and violence. And Vanessa too, scarred by misery, began a long life in

youth care. She went from place to place. *'I went to foster families, to crisis shelters. I can't remember in which order. I was all over the country. Wezep, Vriezenveen, Groningen, Zetten, Ressen and Den Bosch.'* Finally, Vanessa ended up in closed care, in Huize Alexandra, where she arrived with a suitcase full of traumas. But for her too, being locked up in a youth care facility as a way of preparing her for an independent life did not have the desired outcome. Vanessa eventually ran away from this institution, and then became pregnant almost immediately: *'When I was 17 years old. Then you have something that is all yours, don't you? Something they won't take away from you. That's how it works.'* She was still leading a 'wild' life at the time: *'I was doing lots of pills at that time, just partying, going out. But when I was pregnant, I stopped everything — I did anything for the baby. It gave my life purpose!'* After she had escaped from the closed care facility, Vanessa no longer trusted anyone: *'Youth welfare services or whatever organisation; I wanted nothing more to do with them.'*

At 17, Vanessa was all alone bringing up her son. Six years later, she had a second son, by another man. At this point, our conversation became rather heated. *'I need a smoke,'* she said. Standing in the open doorway, Vanessa continued talking. *'I didn't actually want the second child. After an infection on my uterus, my IUD had to be removed. My doctor immediately put me on the pill. But he hadn't told me that it wasn't safe the first month. So I became pregnant right away.'* For nine months, Vanessa lived 'in hell'. She didn't want to have this child. She explained: *'The child's father wanted to keep it, but I actually already knew we wouldn't stay together. I thought: Raising a child on my own again? I didn't want to do that. I went to see an abortionist. He kept talking to me like: "But you already have a child, don't you?" In the end, I was over 20 weeks pregnant and abortion was no longer an option at that point.'* So time made the decision for her and her child. While she lived extremely healthy in the first pregnancy, this time Vanessa did the complete opposite: *'I continued drinking, snorting. You know, I just didn't care.'*

DOMESTIC VIOLENCE

Vanessa, like her parents, eventually became an addict, had violent partners, was violent herself, and, like her mother, entered into prostitution. *'I did it for a short time only, for my boyfriend,'* as she explained this choice. *'It was an emergency situation. I had three partners, and all three were wrong. One used drugs, the other beat me to a pulp, it was always wrong.'* Her last boyfriend was the worst, she said.

Vanessa cupped her hands over her face to show how she often looked during her relationship with this man, after he had beaten her. *'My eyes were swollen this much. The policy was here every weekend. We did stay together, yes. I loved him too much. I don't understand that now either, do I? Now I can't understand it.'*

Vanessa, impacted by all the aggression and physical violence, eventually also snapped. After he had abused her for the umpteenth time, she went on the attack. Fortunately, the children were not at home at the time. *'I stabbed him with a potato peeler. Five times. In his hand and in his leg and in one very dangerous spot here [she points to her neck, the carotid artery, ed.]. But it hit his collarbone. He was standing here in the stairwell: "Don't! don't do it!" he said, but I kept chopping away. He had hit me in the face by then, very badly. I had called 112 and told the police: "If you don't come now, I'll stick him with a knife." I already had it in my hands, and by the time they arrived, it had already happened.'* Vanessa has no regrets: *'I'm glad I did it. I felt good when I finally had the guts to stab him. I was SO done with him. He deserved it. For three years, I let him beat me to a pulp. I filed 13 police reports against him and he was never detained even once. While I looked terrible.'*

Vanessa did spend four days in jail, but she ended up getting only community service, cleaning work in a care home. The sentence was relatively low because the police had been able to establish, by listening to her 112 call, that Vanessa had indeed been beaten by her boyfriend before she stabbed him. The stabbing did mark a turning point in her life, according to Vanessa. The social workers told her she had to choose. *'They said to me: 'Either you go for your children now, or for him.' And then I chose my children.'* But that was not so easy. After the arrival of her second child, Vanessa went into a postnatal depression. It was all far heavier than expected: *'Every reason for not having the child had come true.'* Her second son is still a real handful, she said. *'It is SO tough, I can't handle it at times.'* Also this son has ODD and ADHD, she explained. *'That little one has completely turned my life upside down. He goes to a special school, cluster four. This is as low as you can go. He's been on Ritalin from the age of two. The psychiatrist said: "I have never given a child Ritalin at such an early age." Well, that says it all, doesn't it. But you know, I love him.'*

Her son still lives at home, but the problems have been piling up, over the years. And youth care organisations had Vanessa in their sights again, too: *'I've had to deal with visits from the AMK [child abuse advice and registration desk, ed.] often enough. But they always left again. They inquired at the school and so on, and this always led to the same conclusion: "She takes really good care of those children. So, there has*

never been a reason to place them out of home.” Although Vanessa herself sometimes did consider putting the children into care. These were always fleeting thoughts, and she always immediately decided against it. ‘That’s quite something for me, isn’t it? I’ve been all over the place, I’m really very much against it. So that will never happen. Not even if it kills me. I can’t do that to my children. If my kids have to leave home, then I’m done.’

Jason, the well-known ward of state, is another example of a child who was already too traumatised by the time help finally arrived, and who these days, as an adult, is so damaged that effective help is no longer available to him under the current care system. The story of his earliest childhood goes as follows: Jason was born at a women’s shelter. His father was an aggressive alcoholic. He abused Jason’s mother and the children. Child protection services were already involved in the family when Jason was only 2 years old. His father ended up in jail for aggravated assault. One of Jasons older brothers ended up in jail after stabbing someone and another brother is psychotic. Because of all this misery at home, there wasn’t much attention being paid to Jason, who became increasingly depressed and would often lock himself in his bedroom, for long periods of time. When Jason was 16, he entered psychiatry. Currently, he has an eating disorder, is cutting himself and is suicidal. The police regularly picks Jason up from home because he is too ‘explosive’ and then they take him to a crisis shelter or a closed psychiatric institution.

In Jason’s case, as in others, it turns out that damage done in childhood causes even bigger problems later on. This fact is not sufficiently taken into account in youth care, says child and adolescent psychiatrist Arne Popma. He also has experience with adolescents in closed youth care institutions. ‘The earlier the better’ should also be the guiding principle for youth assistance, according to Popma, rather than offering it later or provide only the short-term (i.e. cheap) care which is usually done for financial reasons. Some children simply need years of help if anything is to come of their lives, says Popma. Especially when they come from families with complicated problems. He makes an urgent appeal to this effect: *‘Make sure that, in the beginning, youth assistance is as solid as possible. Don’t skimp on that! And recognise that there are children who are damaged to such an extent, either because of their home situation or because the right help did not get going in the first few years, that you have to say: “Our position is that you are entitled to receive our support until you are eighteen years old”.*

Popma strongly criticises current attempts to cut back youth care-related costs. In the current situation, the focus is on providing only very basic or short-term help, wherever possible. Providing timely, and if needed long-term, proper support when children are still in their parental home will likely prevent having to place them in a closed care institution later on, expert Popma argues. That is a better youth care result and one that is, ultimately, also cheaper. Arne Popma elaborates: *'I believe that, before placement into closed care is considered at all, there is a lot to be gained from really intensive outpatient care that is provided jointly by youth care and mental health care services. This would be a much more expensive care than is currently provided by ambulant teams. I am talking about teams that can visit a family every day, so to speak. However, that would still be much cheaper than any closed care placement. And, of course, it would also be much better from a moral point of view.'*

12 BLACK BOX

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'We have to piece the information together ourselves, from 100-odd puzzle pieces in that black box. Nobody really knows what's going on. That is not only unworkable, but also incomprehensible. The minister is not taking the lead in really getting a grip on the situation. So, we are now requesting the necessary information ourselves.'

Maaïke van der Aar, director of FNV Zorg & Welzijn (Dutch trade union for the health care sector), uses this quote to pithily indicate that the realm of youth care has been a chaos since the decentralisation in 2015, when tasks and responsibilities were transferred from the central government to the municipalities. But nobody knows absolutely everything that is going wrong. FNV thinks it is very important to know what is going on, or what is going wrong in the field of youth care, and therefore submitted a request for information to the Health Minister in July 2019, under the Government Information (Public Access) Act (WOB).

The trade union is not the only party that is in the dark. Researchers, scientists, journalists, politicians — all notice that most of the factual information on youth care is impossible to obtain. The main reason for this is that the decentralisation of youth care has also created a lot of ambiguity when it comes to registration. Meanwhile, very serious things are happening in the sector, about which so little is known, such as on the number of suicides. In 2018, there were 51 suicides amongst young people under the age of 20 (Statistics Netherlands (CBS)). But then, in 2019, in all residential youth care institutions (i.e. youth homes) together, 18 adolescents committed suicide. Four of those took place in a closed youth care facility. These figures are not readily available. Finding out the latter figure took some real detective work. Because, until recently, nothing was known about suicide rates in JeugdzorgPlus, because there is no central registration process. The supervising authority itself, the Health and Youth Care Inspectorate (IGJ), also has to hunt down all the figures on incidences of suicide in closed youth care around the country.

This is but an example of the nebulous youth care figures. Another elusive figure is that of out-of-home placements. There is no organisation that can provide the

data, because no one is keeping track of these placements. The Child Care and Protection Board, which is almost always involved, does not have figures on the number of children placed out of home, their spokesperson indicated when asked. She wrote: *'We have figures on the number of requested court orders for out-of-home placements, but none on the actual number of those granted.'* The bureaucratic activities related to the court are kept up to date, it seems, but what subsequently happens to the children involved remains unknown. Anyone looking for more substantive information has to find workarounds to get their hands on the right data. The Ministry of Justice did just that, because it wanted to have exact figures on these out-of-home placements. And so, in July 2019, the Ministry asked Statistics Netherlands (CBS) to come up with a figure. CBS calculated that a total of 19,200 children were placed out of home in the Netherlands in 2018. This still does not provide full transparency, however, as any change of residence of these children is subsequently not being recorded in the Personal Records Database (BRP), from which CBS drew its information. In other words, we have a certain figure, but no one knows where these children have gone. An example of yet more nebulosity.

In October, Zembla, a Dutch investigative tv programme, revealed that an autistic girl with life-threatening anorexia has been kept tied to a bed, day and night, for a year and a half, in a hospital in the Province of North Brabant — because there was no one to treat her. The logical next question is how many other children are also being kept in such a lousy situation? How many children with very serious problems are not provided adequate help? The answer is simply unknown.

PING-PONG

People who deal with youth care, from whatever discipline, fail to understand that there is so little concrete information about so many different issues. They also regularly point out to the Ministry of Health, Welfare and Sport that this lack of information is unacceptable, as does the FNV trade union that wants clarity on what is going on in the youth care sector. The trade union also asked detailed questions; they wanted to know, for example, how the EUR 3.5 billion available annually for youth care were being spent. The questions were posed to the minister and, at the same time, to each of the then 355 municipalities. Simply asking those questions was already not easy. Even for a well-informed FNV, it proved difficult to find out who to turn to for what type of information

on youth care, as Maaïke van der Aar of the FNV explained. And the reason for this is, again, the 2015 decentralisation of youth care and the constant shifting of responsibility.

Van der Aar outlined what the FNV is up against: *'We see that when we raise an issue with municipalities, they are quick to point the finger at others. There is a lot of ping-pong going on between municipalities and the Ministry of VWS, the national government. When we would say to the national government: "There is not enough budget", they say "You need to go to the municipalities"; the municipalities say "Well, yes, but the government is not giving it to us", after which the government says: "The municipalities have freedom of policy. They can decide for themselves how to spend it, and a great deal of money is already going their way", then I ask: "How much money are we talking about then?", and when they tell me how much and I ask where all that money is going to, then nobody knows.'*

FNV has been trying for more than three years to gather all relevant information about youth care. An impossible task. According to the FNV, instead of providing concrete information, including about the allocation of funds, the Minister of Health keeps bombarding everyone with new studies and action plans, without including any financial foundation. It is a much-heard complaint about this Minister of VWS [Hugo de Jonge, ed.], whom critics refer to as the 'minister of fancy shoes and vlogs'. He has been posting cheerful videos on his weblog and has done plenty of talking, making lots of promises, but it remains unclear what he actually plans on doing to improve youth care.

GroenLinks MP Lisa Westerveld is also critical of this minister. Westerveld is celebrated in the world of youth care. Because she is really focused on the subject. However, her unbridled commitment as a parliamentarian and desire to know all there is to know is not always appreciated by the Ministry of VWS, she says as diplomatically as possible. *'The ministry is not so happy with our [her political party, ed.] commitment to youth care. I have already heard comments from people at the ministry: "You do ask a lot of questions" and: "Know that, behind the scenes, we are doing everything we can, and are trying to free up a lot more money and arrange things."* Westerveld is cynical about this. *'Yes, nice that this is happening behind the scenes. But of course I am an elected representative of the people. I want to know what happens next, I want to be informed.'*

Van der Aar of the FNV trade union tells a similar story: *‘The spokesperson for the Minister of Health told us: “We have done more on youth care than on anything else, over the past year.” Then I said to Tom [Kummel, the spokesperson, ed.]: “I don’t know what with. We can’t see it. You are investigating the issues, but there are just no noticeable improvements in practice. And the moment you start investigating something, the very questions we have, the things we want to know, are not being answered. Then you do another study, and questions come up again and you do another study, and so on, and so on.”’*

There is a high level of irritation amongst information seekers. But irritations are also running high at the Ministry of VWS itself, about outsiders who are looking for information. Journalists are not allowed to ask many questions either. What then is the way that the Ministry of Health, Welfare and Sport does things?

When looking for information, the FNV gets stonewalled and this is also happening to members of the House of Representatives. And even journalists for whom investigations are their core business are told by the Ministry that they ask too many questions about youth care.

OBSTRUCTION

This was a pattern throughout the research for the *Wards of State* book. Anger and irritability, delays or even obstruction by spokespersons from ministries, municipalities and youth care organisations or institutions when they were asked to provide concrete information. It is the way the Ministry works, which is also something that the FNV trade union and even MPs complain about; youth care is a black box and the level of willingness to be transparent about it is extremely low. Those who ask for detailed information are told that the time officials spend on trying to answer their questions could be better spent caring for ‘vulnerable children’. Even municipalities or youth care institutions regularly use the term ‘vulnerable children’ when questioned about publicity-sensitive issues. This seems to be their mutually agreed format. And no one is apparently allowed to know exactly what happens to those most vulnerable children in the Netherlands.

The trade union’s request for information under the Government Information (Public Access) Act (WOB) regarding the spending of the EUR 3.5 billion on youth care also yielded little result. The Minister of Health wrote a letter to

director Van der Aar more than a month after FNV's request. In it, he stated that, in his opinion, the FNV's questions were not in accordance with the Government Information (Public Access) Act. However, he added, he and the Minister for Legal Protection would be addressing the questions as much as possible.

Then what everyone is complaining about happened again: vague answers end up being given. And again, the minister referred to all his 'action plans' for youth care. The minister could not provide more insight into how the youth care funding provided by the government to the municipalities was being spent. He stated : *'the study "Verdiepend Onderzoek Jeugd" (an in-depth study on youth), which I presented to the House of Representatives on 24 April 2019, led to follow-up questions from both the municipalities and myself. In a supplementary study, VNG and I therefore want to gain more insight into the patterns of expenditure development at municipalities with regard to care, implementation costs, access and administrative burdens, as well as insight into how funds are distributed across the various types of care and how this has developed in recent years.'* No real answer, therefore. Instead and yet again, the promise of further research.

SOLITARY CONFINEMENT

Even on the most dramatic cases, no figures are known, or, if they are known, they are not being disclosed. Another one of such unexplored areas concerns the information on how often children are being locked in solitary confinement in closed youth care facilities.

All the interviewees had many unpleasant and poignant stories about this subject — such as Babs' story: *'So there you are, in a small solitary confinement room. In only your underwear. Covered by that thing, that dress. There's a mattress on the floor, covered in thick plastic. There's a steel toilet fixed in position. After you've peed, you have to press the intercom button for them to flush. Apart from this, the room is empty; no table or chair. Food is provided through a hatch in the door. You have to eat it sitting on the mattress.'*

Babs found herself in solitary quite regularly, where she also had to wear the anti-tear clothing — these garments are made of tough fabric that cannot be ripped or torn into strips with which someone could hang or strangle themselves while in solitary.

Nola also ended up in solitary confinement rather frequently. She hated it. *'I ended up in solitary so very often. The first month I was there, I triggered the alarm almost every day. This would make me angry and when I would see all these people rushing towards me I'd get even angrier at them. And then I'd lash out at the supervisors.'* All these stories about solitary confinement are reasons to delve deeper into the matter, as all these adolescents tell their harrowing stories about how often, and usually forcibly, they would be thrown into solitary confinement. Figures on the number of times children in Jeugd zorgPlus institutions end up in solitary confinement should therefore be easy to cough up. But they are not. For some strange reason, the Child and Youth Act does not require separations to be registered. And so there are no national figures on this subject. They are known about the mental health care sector, however, as registration of such solitary confinements there is mandatory.

Because solitary confinement of children in youth care institutions is such a drastic measure, children's rights organisation Defence for Children has also tried to gain insight into the extent to which this measure is being applied. But the institutions refuse to provide information on this subject, because 'they see no legal basis for providing such figures', as they replied to Defence for Children. They also considered it 'an impossible effort' because such figures could only be obtained by going through the individual dossiers of all children. The institutions *will* not do this and outsiders *cannot* do this.

Journalist Ilona Dahl tried to find out about the number of solitary confinements in 2017. She managed to calculate the approximate number and published about it in the digital magazine De Correspondent. A national database on solitary confinements in closed youth care was promised by the Minister of Youth and Family but had never materialised. Therefore, Dahl had to file a request again under the Government Information (Public Access) Act (WOB), and then start estimating. She asked all Jeugd zorgPlus institutions to provide their own figures on solitary confinements. According to Dahl's calculations, solitary confinements happen more than a thousand times a year, in this sector. But not all institutions responded to Ilona Dahl's request. Therefore, the actual number of solitary confinements in closed youth care must exceed her estimations. Experts are also convinced of this fact. The question that arises, however, is: what is this figure of a thousand worth when it is also just another rough estimate? And why are closed youth care institutions not obligated to keep records on solitary confinements

and to report these to, for instance, the Inspectorate or to the Ministry of Health, Welfare and Sport — just as in mandatory in mental health care?

Child and adolescent psychiatrist Peter Dijkshoorn — also author of the book *'Jij hebt de sleutel, naar humane jeugdhulp zonder separeren'* [which translates as 'you hold the key to humane youth care without separation'] co-authored by journalist Tilly van Uffelen) — is also unable to find any figures on such separations. He is a staunch opponent of solitary confinements in youth care, to which he includes mental health care. Dijkshoorn wrote that the figures on solitary confinements in the mental health care sector are known, because mental health institutions have to report to the Inspectorate when they apply 'coercive measures', such as separation. Dijkshoorn also believes that keeping records certainly makes sense. Because the most recent figures from the mental health care sector, on the 2010 – 2017 period, show a sharp increase in the incidences of solitary confinement. *'You can always trace the numbers in the mental health care system. You can see patterns.'*

Dijkshoorn, who works on behalf of the Association of Netherlands Municipalities (VNG) on improvements in youth care, thinks that in JeugdzorgPlus, as in the mental health care sector, much more information should be registered. Although a registration system such as that in mental health care is not a foolproof solution either. The mental health care sector itself wants to get rid of solitary confinements. Back in 2016, 14 mental health care institutions promised to abolish solitary confinement by 2020. To this end, they signed the 'Dolhuys Manifesto'. However, this mission did not succeed. It became known because the platform for investigative journalism (Investico), together with newspaper Trouw and magazine De Groene Amsterdammer, investigated the matter. It asked 15 mental health care institutions about the state of affairs regarding solitary confinements, and thus generated recent figures on separation measures. Remarkably, four institutions that co-signed the Dolhuys Manifesto are currently refusing to give journalists information on the subject. Figures from the Dutch Healthcare Authority (NZa), which Investico also analysed, yielded results and showed that a quarter of mental health care institutions had been putting more rather than fewer patients in solitary confinement, between 2014 and 2017. How this compares to youth care institutions is still completely unknown.

'I DON'T WANT TO DIE'

Another worrisome issue in youth care is that of suicide. Figures on suicides in closed care institutions were not available until recently. And there are still no figures on attempted suicides, while these are also very serious cases. A successful suicide in a youth care institution is truly a tragedy, says Vrank Post of the Transferium in Heerhugowaard. For all those involved, he says: *'A suicide changes the mentality of an institution. It is like a deflowering. If I ever stop doing this work, it will be because of a suicide.'* His institution has fortunately not experienced it directly, yet. But former residents have committed suicide, according to Post. *'Many still commit suicide after they have already left here. I've been to the cremations of about six of them in recent years.'*

For parents, a child committing suicide is unbearable. Especially when this happens in a closed care facility, a place where children are staying for safety reasons. Father Gerard tells of his daughter Patricia who committed suicide in 2017 at the age of 15. She came all the way from Zeeland to De Smaragd, a facility of De Hoenderloo Groep/Pluryn in Deelen. After years of waiting for the right therapy, at the Smaragd she was supposed to be able to receive tailor-made intensive treatment. And yet things went wrong. After a month and a half, Patricia strangled herself, using shoelaces. While she was there, in the last weeks of her life, she tried to commit suicide on numerous occasions. *'She made the first attempt on the very first day she was there,'* Gerard says. *'Do you know how often she attempted to do this?'* Lucia, Patricia's mother, asks. *'Three or four times a week.'* Gerard adds: *'Strangulation. Using shoelaces, socks, clothes she tore into strips. She always said, "I don't want to die." She always said that.'* Patricia nevertheless did die. And Gerard made sure she returned home. *'I picked her up. She was at the funeral home, lying naked under a sheet in the cooler. I dressed her with my sister and put her in the coffin. The funeral director and I took her to Zeeland.'*

Back to the associated numbers behind this terrible story, and to the detective work it took to uncover them. Patricia is one of five young people who committed suicide in 2017 while staying in a closed youth care facility. That figure was also unknown, at first. It only became known because I had investigated it for this book, which is how, at some point, the figure eventually also became known to the IGJ Inspectorate.

The Inspectorate initially stated that the only way to find out the correct number was to put the question to all individual closed youth care institutions themselves. A laborious task. Moreover, it was debatable whether the institutions would be willing to provide this information to a journalist. On reflection, Kees Paling, the spokesperson for IGJ at the time, also doubted this. However, he did see the importance of more detailed information on this subject and was kind enough to find out. Some time later, he sent me the figures. Between 2013 and 2017, there were seven suicides in closed youth care. The most recent figure he found was from 2017. Back then, five young people committed suicide in a closed care institution.

Now there were figures, but this also led to a new question: Is five suicides in closed youth care in one year a large number or not? The question remains unanswered, as this figure cannot be compared to anything. Juggling figures seems to be part of the precarious topic of youth suicide. Case in point: Summer 2018, Statistics Netherlands (CBS) reported that the number of suicides amongst young people in general, in the Netherlands, had almost doubled in one year — from 48 (2016) to 81 (2017). Current affairs TV programme *'Nieuwsuur'* subsequently reported that of those 81 young people, 19 committed suicide in some youth care institution. Panic broke out. The Minister of Health, however, then came up with different numbers. He said that not 19 but 'only' 10 young people committed suicide in such institutions in 2017. This juggling of figures was also noticed by MP Lisa Westerveld, she said: *'The answer was vaguely worded. And it turned out there were not 10 at all — the number was actually even much higher: it was 26.'* Yet another number. At which point the minister instructed the Inspectorate to assess whether these 26 — which became the official figure — in youth care institutions had actually been receiving the right type of treatment.

Once the Inspectorate had obtained this information and the outcome was not very positive, the minister then did not actively disclose it. This was vaguely 'made public' in the Inspectorate's report with the veiled title *Exploration of suicide reports at the IGJ: opportunities for prevention?* The data was quietly posted on the Inspectorate's website just before Christmas 2018. Again to the dismay of MP Westerveld, who responded indignantly: *'We asked for it in October and the Inspectorate put a fact sheet online on 21 December, incidentally the first day the House of Representative went into recess. Why wasn't that information sent to the House directly?'* The most likely explanation is that the Inspectorate did not have a positive message. Indeed, the Inspectorate concluded that youth care

had basically failed each of the 26 young people who had ended their life in the institutions. And the IGJ wrote critically about this: *'Many reports mention lack of appropriate care. For 7 suicides it was reported that the adolescents did not feel heard and 16 suicides involved a lack of cooperation. In a large majority of cases, there was a long-term history of care, often many years. In many instances, their outlook was bleak and the adolescents involved felt unheard in the counselling process.'*

SAD EVENTS

Concrete information on suicides in closed youth care institutions has recently become available. Since 2016, all institutions have been obliged to report a young person's suicide to the Inspectorate. However, the IGJ did not distinguish between suicides committed in open institutions and those in Jeugd zorgPlus facilities.

Only because journalists and MPs were asking questions about it, this distinction is now being made. The IGJ publishes the figures on request. And the current overview shows that, in 2016, one young person committed suicide in a closed care institution. In 2017, however, there were suddenly five. In 2018, three young people committed suicide in Jeugd zorgPlus. And in 2019, there were four again. The Inspectorate says it has no explanation for the strong fluctuations of these numbers each year. Suicide amongst young people in institutions is now, partly due to the great deal of publicity about it, the subject of research, on many levels. The Inspectorate IGJ further explains the importance of its investigation into suicides in youth care institutions. In 2018, they wrote: *'Each suicide leads to an investigation. The aim of these investigations is to learn and make improvements at the institutional level to prevent suicides. These sad events can also be used to learn from, nationwide. Last year, investigations into the 26 suicides from 2016 and 2017 were analysed to assess whether there is any information that could contribute to reducing the number of suicides.'*

All this research shows something that critics, such as the FNV, are warning against; namely, that those in charge investigate themselves until they are blue in the face, but often to no avail. This appears to be the case, yet again, regarding the failure of youth care in relation to juvenile suicides. According to the IGJ, this needs further investigation. Again.

For parliamentarians who are working on youth care, things are not going fast enough. During the debate on the subject, in February 2019, Attje Kuiken of the Dutch labour party, PvdA, was very vocal about this.

On suicides in youth care institutions, she said the following: *'We have not been able to adequately help these children, in recent years. In fact, things are only getting worse. Since 2010, the number of successful suicides has only increased.'* Kuiken also wondered about the fact that there was not a single journalist sitting in the public gallery of the House of Representatives for this important debate. She said: *'I don't understand the disinterest. Or maybe I do. Maybe we have immersed youth care in a thesaurus of clichés, filled with certifications, standards, warehouse tenders, complex matters and decentralisations. It is complex. Everyone is responsible, so that, ultimately, no one is.'*

ON FIRE

Another figure is that of attempted suicide in youth care institutions, the unsuccessful ones are still not being registered in one central location. The Inspectorate has to inquire at each of the institutions, separately, about these occurrences. There is no national registration system. However, children who try to end their lives are a widespread phenomenon in closed youth care institutions, in particular. Very many children there attempt suicide, some of them more than once, up to many times. And all those suicide attempts also have a large impact on the institution, explains Transferium director Vrank Post. He sums up what young people in his closed care institution do when they try to end their lives. *'They swallow batteries, eat glass, bang their head against the wall until they bleed. Or they try to drown themselves in the toilet bowl. Whatever crazy thing you can think of, you name it, it happens. They always do the unexpected, something different from what you think they are going to do.'*

Below, some more gruesome real-life examples — the stories behind the suicide attempts.

At the turn of the century, Vanessa witnessed how a girl in the closed care institution, Huize Alexandra, in the city of Almelo, tried to end her life. *'This girl was in solitary. And, when she put on her anti-tear clothes, she hid a lighter under her breasts and set herself on fire. She didn't die, but she did have burns. They threw her straight into a very cold bath.'*

And then there is Babs' more recent story, from 2016: she tried to hang herself with a rope at the Jeugd zorgPlus institution OGH in Zetten. Babs talks a bit laughingly about it: *'In the past, I had learned how to crochet. And I had as much as five metres of string, so I simply crocheted all that together. They have windows open a little bit, and there's a beam on the wall. I tied the crocheted rope to the beam and put it around my neck. We have a stool in our room. You stand on it, kick that thing over and be done.'* Babs' suicide attempt failed because an attentive and concerned guard found her. *'His job was to check every night that all the doors of the room, the cell, were locked. That doesn't always happen properly. He came to check how I was doing because I had been acting a bit weird that day.'* Babs had a dislike for precisely this security guard, she said. *'Because he always wanted to talk, but I didn't feel like it. He came too close. People who get too close and then mean well, it's just not possible. He pulled open that door and saw me hanging. He should have raised the alarm, but he didn't. He took me off there, laid me down and waited until I regained consciousness. When I woke up, the first thing I did was attack him. I tried to kill him. He should have let me hang, he shouldn't have interfered.'* But after that, something beautiful happened. *'At some point, I did accept that he had helped me. And then I started to like him. He told me how shocked he had been. And he regretted not seeing earlier that things were so badly wrong with me. He apologised for that. While that is weird. He hardly knew me. He was just a security guard. Not a social worker who should have seen it coming a long time before that.'* The foiled suicide also marked the turning point in Babs' life. *'When I was saved, the switch flipped for me. And together with him, rather than with my therapist, I made a list of what I wanted to do in my life. He asked: "What are the things you want to achieve later?" and I said "I want a nice boyfriend and a nice house, it doesn't have to be very big, and I want to go to work." He said: "Then we'll just arrange that, that's what we'll do. But you have to do some of the work yourself, too." Then things went really well for me. And within five months I was out.'*

'A LOT TO INVESTIGATE'

Suicide attempts in institutions seem to be part and parcel of closed youth care. Each day there are adolescents who swallow spoons, forks, bra-braces, batteries, chlorine, glass, washing powder or whatever else they can get their hands on. Resulting in a perforated stomach or intestine, a slit throat, poisoning or suffocation. Or they try to hang themselves. Many children also 'scratch' or 'cut' themselves with sharp objects, becoming seriously injured in the process. Regularly they are in urgent need of stitches.

Scientist Peer van der Helm finds all these attempts by children to end their lives in youth care institutions extremely worrying, and he is therefore saddened to see that so little is being registered about these incidents. He believes this is partly because staff do not know what to record, says Van der Helm. *'Problem is: what constitutes a serious suicide attempt? Ingesting paracetamol? A lot of young people make very regular attempts, sometimes twice a day. That makes it all complicated. All fatal incidents have to be reported to the Inspectorate and they are always investigated. My big concern is in the number of attempted suicides — those are not recorded anywhere.'* In fact, everyone in the sector is troubled by this. When it became known that the number of suicides or attempted suicides in youth care was steadily increasing, the Minister of Health, in anticipation of the political debate on the subject, sent a long letter to the House of Representatives. Although this letter provided little clarity. It was merely another letter referring to 'action plans', 'practical experiments' and 'strengthening and further professionalisation'. The minister did not refer to the struggle to get accurate figures on suicides and attempted suicides. This surprised members of the House of Representatives who were dealing with youth care. In February 2019, during the debate on suicides in youth care, Attje Kuiken said: *'The number of suicides has increased, but do we have insight into the number of serious suicide attempts? I'm not talking about self-mutilation, but really about hanging, suffocation, strangulation and attempts involving drugs. Because in my opinion, this is only the tip of the iceberg. Do we really have sufficient insight into the subject?'* The answers by the Minister of Health show that this is not the case. Indeed, registering suicide attempts is a time-consuming affair. The minister had no intention to regulate systematic registration of these suicide attempts in care institutions. He said: *'If you want to organise this type of registration properly, there is a lot to work out.'*

The emergency debate on this sensitive topic got bogged down in a semantic — and embarrassing — discussion about the figures on 'serious' suicide attempts. Kuiken still tried to create an overview of cases of attempted and successful suicides in youth care institutions. *'Just to be clear: You have just read out that we also have figures on "self-inflicted injuries". But "children cutting themselves" is not considered the same as "a serious suicide attempt"?'*, she asked. *'True,'* was the minister's reply. With that, the political debate on juvenile suicide attempts in youth care facilities died down. To date, after the calls for a central registration of suicide attempts at these institutions, nothing further has been heard about it.

13 THE NUMBERS TELL THE TALE

‘The Dutch Ministry of Health, Welfare and Sport (VWS) can investigate and plan actions as much as it likes, but the flow of investigations remains continuous and endless. Which then creates the need for yet other sub-investigations, and so it goes on. The most important information, such as how youth care funding is being spent, is systematically lacking.’ This is yet another statement by Maaïke van der Aar, care and welfare official at the Federation of Dutch Trade Unions (FNV). The youth care system is failing; it is getting bogged down on all sides. Van der Aar even speaks of ‘havoc’. In the daily newspaper Het Parool, she calls the then Minister of Health (i.e. Hugo de Jonge) the ‘most unyielding minister’ the union had ever experienced.

Everyone is sounding the alarm, including the FNV. But the Ministry of Health refuses to take all these worrying signals seriously. And the minister is not able to substantiate his chosen policy line with figures either. The FNV finds this unacceptable. Maaïke van der Aar expresses her displeasure about this in an interview: *‘There is so much information lacking. What then is the basis for this policy?’* She wonders who DOES have the needed figures on youth care. The Association of Netherlands Municipalities (VNG) should have quite a few of them. After all, municipalities are locally responsible for youth care, and youth care is funded from the municipal fund (*Gemeentefonds*). And yet, however, VNG appears unable to provide crucial youth care information.

In its 2019 report on accountability of results for the Ministry of Justice and Security (*‘Resultaten verantwoordingsonderzoek 2019 ministerie Justitie en Veiligheid’*) which is part of its annual report, the Netherlands Court of Audit also expressed its concern about the fact that the money for youth care had not been earmarked — nor was the additional funding of over EUR 1 billion that the government had allocated to the municipalities for the 2019–2021 period, which was intended to counter some of the deficits in youth care. In its conclusions, the Court of Audit found a total lack of oversight: *‘A municipal council is only accountable to its Municipal Executive about how funds have been spent; they are not answerable to the national government. This is why it is impossible for the Ministry of VWS or the Court*

of Audit to determine, afterwards, if the allocated funds were adequate and whether the intended efficiency was achieved.'

Similarly, it is impossible to discover how much money individual youth care institutions have received from the EUR 106 million Transformation Fund for innovative initiatives in youth care. In 2018, the money had been disbursed to the various municipalities, who in turn would then forward it to contracted care providers. However, when for the purpose of this book attempts were made to uncover how many millions went to which youth care providers, these were unsuccessful. The Association of Netherlands Municipalities, once again, referred me on to the individual municipalities. But approaching all 355 individual municipalities was an impossible task, especially for a journalist. Although the VNG did say they understood this point, it finds itself empty-handed as well, as a VNG spokeswoman wrote in an e-mail: *'I am sorry that we are unable to help you any further and wish you success with your research. VNG never keeps track of figures, etc. We do not have the staff capacity for this type of work and are also not set up to perform such tasks.'*

CRISIS

So, no figures from VNG. This main player in the field of youth care — the one who formulate all kinds of plans about the provision of youth care, who also determines the tariffs and sets the rules for the sector — does not consider it its task to collect any specific data on what goes on in this sector. And, truth be told, nor does the Ministry of VWS — because youth care is, after all, a municipal task. And, thus, any detailed information and figures on the subject is like a Swiss cheese.

Even where it concerns extremely important issues, such as on the circumstances under which a child or family would be considered to be in crisis. If a crisis has been determined, very drastic measures are taken: a child may be placed under supervision (OTS) at the order of the court, or, in the worst case scenario, taken from its parental home. Considering how drastic such measures are, one would think that, when social workers determine that a situation is indeed a crisis, the term 'crisis' is clearly defined.

But this assumption turns out to be a misconception. Terms such as ‘crisis’ and ‘safety’ are subjective concepts. Youth care workers decide for themselves what constitutes a crisis or unsafe situation, and subsequently take the measures that are appropriate in their eyes. And because of this subjective perception, it is again impossible to find out how many children end up in a closed care facility because of a ‘crisis placement’. The Ministry of VWS does not have this information either, as the spokesperson said: *‘Youth care institutions and professionals can hold widely differing views about the concept of crisis. What exactly is a crisis? It is a very broad concept, so that is very difficult to specify.’*

Once a situation has been diagnosed as a crisis, adolescents usually first go to a crisis shelter. And very often this leads to them being placed in a closed care facility. The term crisis, thus, describes a very serious situation in the youth care sector. It is therefore even more bizarre to see that so little is known about it. The Netherlands’ Ombudsman for Children, Margrite Kalverboer, thought so, too. Her 2016 report, *‘Mijn belang voorop’* [my interest comes first], already calls it ‘remarkable’ that there is no consensus amongst institutions about what they mean exactly by ‘crisis placement’. The Ombudsman pointed at current events, as in mid 2016 when it slowly became painfully clear that there were growing problems in youth care. Numerous reports appeared in the media about a sizeable increase in ‘crisis placements’.

In an article on youth care, (*‘Een beetje hulp tot het te laat is’*) in the NRC newspaper, this was attributed to a lack of expertise and the dithering of the municipal youth care district teams. The article stated that, for children with serious problems, these teams would try to support them with only minimal (read: cheap) help for too long — often resulting in escalation. After this alarming newspaper report, politicians sprang into action, of course, and wanted the figures on crisis placements, including MP Fleur Agema of the political party PVV. However, the VWS state secretary at the time, Martin van Rijn (PvdA – labour party), could not provide the requested figures, stating: *‘There are no figures available to answer the question of whether acute out-of-home placements (or crisis placements) have increased since the decentralisation of youth care.’*

The Children’s Ombudsman was not satisfied with the state secretary’s answer. She went to further investigate the worrying phenomenon of the many children ending up in closed care via an ‘emergency or crisis placement’. She was shocked by what she found: 8 JeugdzorgPlus institutions reported that

this was the case for 70% of their charges. At one facility, this was even 85%. And the institutions confirmed that this was indeed due to a lack of the right kind of help, as they reported to the Children's Ombudsman. With those facts on the table, the Ombudsman was all the more critical of the increase in crisis placements in JeugdzorgPlus. She therefore stated in her report: *'More and more often, municipalities wait too long to intervene or continue to provide too little support for too long, which may then lead to crisis. In these cases, municipalities then suddenly are faced with having to place a child in closed care and only afterwards ask permission from the court. The Children's Ombudsman does not think this is right.'*

EMERGENCY AUTHORISATION

More reports appeared on these 'crisis or emergency placements' in JeugdzorgPlus, because of widespread worry about the increase in the number of such placements in closed care institutions. Researchers from Argos Advies, including Sophie Hospers, went to investigate emergency placements in JeugdzorgPlus, at the request of the Ministry of VWS. In October 2016, they published their exploratory study on crisis placements in JeugdzorgPlus in 2015. As it turned out, their investigation also got stuck on this point, and they reported the following: *'The overall national picture of the number of crisis situations is diffuse. There is no single definition for the term 'crisis' and existing criteria for determining whether a crisis situation exists are not religiously applied in practice.'* Argos Advies, while fishing for the next assignment, also stated: *'Given the sometimes conflicting media reports (shortage of contracted help, waiting lists, how district teams work) and the findings from this study, additional research into the underlying causes seems useful.'*

VWS and branch organisation Jeugdzorg Nederland did indeed fund further research, and commissioned the same researcher, Sophie Hospers, but this time not at Argos Advies but with her own company: *Sophie Hospers Coaching en Advies*. This second assignment was given to discover whether the rise in crisis placements was indeed the result of poorly functioning district teams. A very delicate subject.

The resulting report — *Crisis in Context* — from April 2017, however, did not provide clarity either, as not all closed youth care institutions provided the required information. They were unable to, because these institutions were still not keeping track of the number of emergency placements. On this point, the

researchers concluded: *'The institutions do not register such information as a matter of course, and therefore would have had to check all their files manually to uncover the requested information. They decided that this would have been too much work, which in their eyes was not worth the effort.'* The issue of 'crisis placements', however, did remain topical.

The closed care institution De Koppeling in Amsterdam wanted to know how many of the adolescents in their care had been admitted with an 'emergency care authorisation'. They investigated the subject in 2019, together with the regional Child Care and Protection Board in Amsterdam. This also yielded a shocking result, as over half (61%) of the young people in their care turned out to have been placed at De Koppeling via such a controversial emergency authorisation. Both parties agreed that it should not be like this. In their report, they stated: *'Placing a young person in a closed care setting is a traumatic experience in itself and when this happens in an emergency situation, the impact is even greater.'*

MERRY-GO-ROUND

A very worrying development is that the adolescents who are placed out of home seem to be moved from place to place. From a crisis shelter to a first foster family, then to another and another, and from one closed care facility to the next. Peer van der Helm kept track of how many different family care homes children are faced with. He arrived at an average of 3.6 addresses per child. But he also estimated that, for some 5,000 children, this is much more frequent. The down side, Van der Helm explained, is that every transfer represents yet another negative experience for a child and leads to even more difficult behaviour. As a result, when the behavioural problems keep mounting, many adolescents end up in a closed care institution, with drastic restrictions on their freedom — which is causing these children to become even angrier and more aggressive.

The fact that there are no figures on such a serious matter as children being placed out of home and how they are then moved around from one place to the next (also known as the 'merry-go-round'), is a surprise to many. Amongst them Alex de Bokx, of the Dushi family homes. He said: *'We are obligated to register how often a child goes to the toilet, but we do not record the important things. This is an indication of a system that is far removed from what it should really be about. Although De Bokx also does not have detailed information at his disposal, he sees with his*

own eyes how children are being shoved around within the youth care sector. *'Children often go from crisis care to foster home, from foster home to family care home, and from family care home to a care facility, at which point to they come to us. By then, they have often already been to four or five places.'*

'64.6 CARE PROFESSIONALS'

Het Vergeten Kind, an organisation that is fighting for better youth care, has also experienced the lack of figures. Which is why they sometimes collect the data themselves, according to Yfke van der Ploeg. 'The more figures we have, the more effective we will be in speaking for the children.' They investigated the many transfers, for example. Van der Ploeg said: 'In the youth council ("*Jongerenraad*"), on the holiday trips that we organise, we hear from adolescents about how often they move from place to place and how many different social workers they meet along the process. We were unable to find solid data on the subject, so we asked the Ministry of VWS whether it could provide a national figure. VWS then forwarded our request to Statistics Netherlands, who informed us that such information is not included in the figures it receives.'

The Forgotten Child Foundation, therefore, conducted its own representative survey of 110 young people. January 2020 saw the publication of their report on how these children are affected by the continual stream of new faces they see [*'Constant nieuwe gezichten, ik crash daarvan'*]. The survey showed that children are transferred six times to other locations, on average. And that those living in a large youth care institution on average will encounter 64.6 care workers, during their stay. According to Van der Ploeg: *'It is of course startling when you sit down with a young person who tells you that they have moved 20 times. Then you look them in the eye and wonder: "Gee, what effect must that have on you?" And there is the added fact of these children also having to tell their story over and over again to all those different care workers. About their childhood, their parents, or how they are doing, etc.'*

The Forgotten Child Foundation presented their report to the Minister of Health, along with a petition that calls for an end to the children continually being moved to other locations and the large numbers of care workers they need to deal with. The petition carried as many as 82,500 signatures. MP Lisa Westerveld asked the minister about this, who replied that this 'merry-go-round' could be stopped by creating smaller family care homes. He also said there is no 'accurate'

information about the numbers of transfers, because CBS has no figures on the subject. All the more important that a national monitoring report is created with figures per region and per organisation, Van der Ploeg believes: *'Without such detailed information and therefore a lack of insight, what else are the Ministry of VWS and municipalities using to implement measures?'* The Forgotten Child Foundation would also like more data on the number of multi-problem families in the Netherlands. *'There are only "estimates" about that,'* says Yfke van der Ploeg. As a result, the 2020 guideline for families with multiple and complex problems [*'Gezinnen met meervoudige en complexe problemen'*], intended for social workers to use, is also based on a rough estimate that says that there are between 75,000 to 116,000 problem families. Apart from the estimate being rough, the figures are also old, from 2012. Van der Ploeg: *'This means that you don't know what has happened in recent years, what effect the decentralisation of youth care has had, and whether there are enough possibilities to help those families with multiple problems.'*

SKIN IN THE GAME

There are also no figures on the long waiting times for youth care, which is another sore point. The Dutch knowledge centre on youth, Nederlands Jeugdinstituut, inventoried and analysed the available figures, but concluded in 2017 that *'it is not possible to generate national information on waiting times and waiting lists. As a result, there is no national overview of the related differences between municipalities.'*

Louis de Mast of the action group *'Lijm de Zorg'* [repair the care] calls it unacceptable that there is no clarity on the waiting lists for youth care and mental health care, and that none seems to be coming in the future. He denounces the Minister of Health's stance on this issue. De Mast: *'There is a Parliament-wide motion submitted by MPs Westerveld of GroenLinks and Kooijman of the SP that there should be insight into those waiting lists in youth care. But he simply refuses to implement measures to obtain this insight. It is a disgrace to the House of Representatives.'* De Mast is referring to a motion from June 2017, which states that municipalities are not sufficiently transparent about those waiting lists, and that the Minister of Health is 'systemically responsible' for this and must therefore ensure that there is insight into waiting times for youth assistance. The minister is holding up the registration of waiting lists with a fallacy, De Mast believes. He describes how the minister responded to Parliament by saying: *'If I ask the institutions to keep track of those waiting lists, this would also create a lot of bureaucracy; something the institutions would not be in favour of.'* According to De Mast, however, this is

nonsense, as waiting lists could be monitored in countless ways. Also without imposing needless bureaucracy on care workers.

I talked to Peer van der Helm in more detail about the fact that clear figures should provide insight into developments in youth care but are so often not available. And that negative issues are being disguised in reports, or presented as ‘small’ as possible, or not at all. Van der Helm believes the explanation for this is simple: *‘The research is partly being manipulated. Not allowing certain things to become known.’* An important element here, he says, is that clients have a big say in the design of any research, as well as in the end result, the conclusions in the related reports. Van der Helm: *‘It starts with a study having to be approved.’* The pressure on researchers and consultancies is large, according to Van der Helm. And they are also sensitive to this fact, because of course they are looking for the next assignment. Pushing research into a certain direction, also in the field of youth care, is the order of the day. This mainly from a strategic point of view, Van der Helm argues; even at the largest client, the Ministry of Health, Welfare and Sport. *‘Because if there is one thing the minister does not want, it is critical Parliamentary questions.’*

Caution is therefore the main thing — even amongst the researchers. They are even cautious in what they say about their investigations, or are suspicious when journalists ask questions about an ongoing assignment. Like Katja Crooijmans of Rebel who was working on a subsequent study into the increase in crisis shelter placements. The Minister of Health had announced to the House of Representatives that this report was in the making. But when I asked her about the status of this report, in June 2018, Crooijmans appeared shocked. *‘May I ask how you learned that we are working on a study for VWS? The research you are referring to has not started yet. Furthermore, I cannot share any information during the research period. It is then up to our client to decide whether and at what point things will be made public.’*

A few months later, the Rebel report on crisis placements was made public — albeit not wholeheartedly. On 5 November 2018, the Health Minister presented the report to the House of Representatives, with the awkward and cryptic title *‘Jeugdhulp met verblijf, anders dan’*, which roughly translates as ‘youth care with stay, other than’. He presented this report together with four other reports on youth care issues. The other reports distracted attention from the Rebel report with its difficult-to-defend message on crisis placements. According to the Rebel report there was indeed an increase in crisis situations and a record 2,725 children were staying in some form of crisis shelter in 2017. However, the way

the report's conclusions were presented was extremely remarkable. Not the researchers themselves, but the unpleasant message about the huge increase in crisis placements was delivered in the form of a quote from an interview with an anonymous care worker: *'2017 was a disastrous crisis year. This also led to clients who were not in real crisis but who needed to go somewhere else for a while nevertheless being placed in crisis care.'* Apparently, the researchers themselves did not dare to communicate this detrimental consequence of the decentralisation of youth care and the related 'disastrous crisis year' in such a bold way.

The minister, in turn, made clever use of this half-hearted presentation. Accordingly, in a letter to the House of Representatives, he stated that there was no hard evidence for this increase in crisis, and wrote: *'Care providers are claiming that crisis situations are occurring more frequently, but this conclusion is not supported by the figures.'* And that was the end of this political matter, as far as the minister was concerned. Which also appeared to be the case for the MPs.

A MYSTERY

In terms of content, far more things are unclear about the youth care sector, such as when it comes to placement in a JeugdzorgPlus institution — the most radical form of youth care. It is often a mystery why a child actually ends up being locked away in a closed care facility. Child and adolescent psychiatrist Dijkshoorn investigated the subject, in collaboration with others. *'We did a pilot project in Flevoland Province. We examined 32 dossiers, together with the therapist, at four organisations. I think that only 5 out of the 32 files contained an analysis that was conducted in what we believed to be the right way. This therefore means that in all other cases, treatment was not based on a sound analysis.'* Dijkshoorn makes a comparison, arguing that this lack of proper clinical examination would be impossible in the medical world: *'Suppose you were suffering from abdominal pain and your GP says, "Oh well, here's a red pill", you wouldn't accept that. You would ask: "But what do you think is causing this abdominal pain?"'*

The Flevoland project yielded more results, as Dijkshoorn recounted: *'We saw that a third of those children were suffering either from ADHD, anxiety or trauma — without ever having been treated for it. Another spectacular outcome was that one third of the children were treated for a problem that had not existed before they were admitted to the closed care institution: aggression. Because of all the hassles, they tend to become aggressive.'*

This pilot project also reached national politics. In February 2019, Labour party MP Attje Kuiken mentioned the study during a parliamentary debate on suicides in youth care. She said: *'Research was done in Flevoland and, for many children who end up in youth care institutions (30%), it is unknown why they were placed at their particular institution. Not because the children didn't know, because they didn't know that either, but because care workers were no longer able to track down or explain why a specific child had been placed in a certain institution.'* She asked: *'Does the minister recognise and acknowledge these figures? If so, wouldn't it be wise to do a national survey to see for how many of these children we could find out why they were placed at their particular institution? Because if we don't know, we are just doing things at random, with these children as the playthings of our systems and institutions, and all the complexities we have rigged up.'* The Health Minister replied: *'I see it says here that I know the study, but in all honesty, although we apparently know the study at the department, I haven't read it myself. If you ask me if I understand it, I would say that, frankly, I don't understand any of it.'* He then promised he would look into the matter.

'DATA COLLECTION IS EXPENSIVE'

Whether the minister really did something with this report and, if so, what, is unknown. But the Flevoland study illustrates that there have been and still remain many questions about the type of youth care that is being provided, also in JeugdzorgPlus, the most serious type of care. Experts suspect that available data on youth care may be kept deliberately low. Amongst them Ton Liefwaard, Professor of Children's Rights at Leiden University. He doubts whether there is a true lack of accurate data: *'Of course there are certain figures, but the question is what are they about, and who wants to make them public?'* Liefwaard thinks it is unacceptable that those responsible for supplying figures and data always point to others. He speaks from experience. He is one of the experts who collaborated a few years ago on the 2016 children's rights Monitoring report, *'Advies Kinderrechtenmonitor 2016'*, which was also commissioned by the Children's Ombudsman. He explains what happened back then. His story is similar to that of the FNV and others. *'We also got the same message from the Ministry of VWS, namely that we should go and see the municipalities for figures. But it is of course practically impossible to go and talk to all three hundred-odd municipalities.'* Liefwaard puts the responsibility for sound youth care data back on the national government. Where it belongs, he says. They should ensure that correct figures are available.

The national government, however, is not taking its responsibility. It considers effective data collection and the creation of reliable databases too expensive, as Liefwaard argues. Although, as a scientist himself, he puts it rather diplomatically: *'Figure collection costs time and money. And I do not know to what extent the Ministry of Health is ready to prioritise it.'* Professor Liefwaard also finds it downright curious that the Ministry can operate with no strings attached when it comes to figures on closed youth care. This concerns heavily guarded institutions where children can only be placed with a court order — surely VWS should at least have a good overview of what happens there? But it does not. Liefwaard also points out that the Ministry of Justice and Security has much better data on juvenile prisons — by necessity, as he argues: *'There they use a very tight planning-and-control cycle, and this is literally what it is called. Institutions have to cough up all kinds of figures. Youth detention centres all have to report on a variety of issues, including: how many adolescents they have coming in; how long they will be staying there; on what pretext; how often problems occur; how frequently people are put in solitary confinement; how often complaints are lodged and how these have been dealt with.'*

Which is not to say that the Ministry of Health or the institutions themselves do not investigate anything at all to do with youth care. On the contrary. A great deal of research is done, just not always with the desired results. And those who would like to know more about the studies that are being done often come up against a wall of unwillingness. Also with regard to financial matters, such as the costs involved in making these reports. Many millions go into all these investigations on youth care. That much is clear. But exactly how much money are we talking about? Quite a large amount of research on youth care is either done or set out and coordinated by ZonMW. This is the institute that used to do 'purely medical scientific research'. For the most part by far, ZonMW works on behalf of the Ministry of Health, Welfare and Sport, and thus receives large amounts of money from the Ministry. For research into the closed care institutions, for example, the organisation received and reserved a sum of EUR 2 million, over the 2011–2020 period, as part of the longitudinal study on JeugdzorgPlus [*Longitudinale Effectmonitor JeugdzorgPlus*]. The study 'provides an overview of the benefits of JeugdzorgPlus institutions and stimulates the quality of JeugdzorgPlus', according to the ZonMW website. At which point it becomes guesswork again. Nowhere on the website it shows the costs involved in, for instance, the 2019 report [*Leren van herhaald beroep*] on learning from past experience in locking up adolescents, which showed that placement in JeugdzorgPlus institutions harms them even further rather than helps them. When asked, ZonMW revealed

that EUR 57,230 had been granted for this project, *'based on a budget calculation, which also included the research and publication of the report.'* Nearly EUR 60,000 had been paid for a study of which basically everyone knew the results beforehand: JeugdzorgPlus does not work, it mainly traumatises children.

VANS

Another topic that calls for figures is the special (police or justice) vans that are used for transporting children to JeugdzorgPlus institutions. All children talk about vans that are fitted with a special 'cell' on the inside, and about 'blackened windows'. Reason enough to check with the Transport & Support Unit (DV&O) of the Ministry of Justice and Security, to see whether it is true that police vans are indeed used. And to find out how often they use such vans to pick up adolescents and take them to a JeugdzorgPlus institution. The answer given by the Ministry is astonishing: *'We are unable to provide figures on the number of young people transported to a closed youth care institution'*, said the e-mail from the spokesperson, *'as we do not register whether a person is taken to an open or closed facility.'* Yet again, the most basic data are lacking. Their answer to a subsequent question on how often DV&O transports children in the context of youth care, in general, is even more remarkable: *'I have no idea about total numbers. There are several parties that carry out this type of transport. So, I'm afraid I cannot help you any further.'*

To the final question about who those transporting parties are, the spokesperson replied: *'Mostly these are private transport companies. Perhaps the institutions can help you with this.'* But enquiring at all individual youth care institutions about the use of vans is, of course, far too large a task.

Occasionally, certain information does surface via another route. In this case, from the aforementioned report on emergency placements from the closed institution De Koppeling and Child Care and Protection Services in the Amsterdam region. This report shows that the children are indeed brought to De Koppeling in DV&O vans, transported as 'criminals' and 'in handcuffs'. It does not provide national figures, but it is clear that DV&O vans are widely used to take children to closed care institutions. It is also clear that, for young people, the experience of being picked up in a police van is 'traumatic and shameful' and 'stigmatising in the neighbourhood'.

Concerns about the lack of data within the youth care sector are very widely shared. This was once again evident during a study day on youth care held in Ulft, in the eastern part of the country, with the theme 'Doing what is really necessary', organised by the *Stichting Beroepseer* (foundation on 'professional ethics'). This foundation, which 'stands up for the importance of professionalism' and therefore also for youth care workers, published a written account of the study day, in November 2018, under the same title.

Dorien Graas, Lecturer on Youth at Windesheim University of Applied Sciences in Zwolle, kicked off this meeting in Ulft. However, she presented a completely different view, an outright opposite one, about the alleged chronic lack of accurate information and figures on the youth care sector. According to Graas, everyone is in fact drowning in reports and plans. And everyone keeps collecting more figures. But according to her, none of this leads to better support or help for children. Four years after the 2015 decentralisation of youth care, the patience of this scholar in the field of youth care has pretty much run out. Graas explains this as follows: *'If you google the news about "youth care", all you get is about funding, deficits. Never about children. And I find that very worrying. We are, in fact, enormously hardcore. For decades now there have been policies aimed at support as close to the family as possible, to stand beside the family. But we continue to face major financial problems and continually hold each other down; municipalities, youth care institutions, professionals, parents. I wouldn't say they are literally fighting each other to the death, but it is a very persistent and intractable problem.'*

By now, there are more than enough figures on youth care, rather than too few, according to Dorien Graas. Getting even more figures will not solve the problem, she believes. *'The government may say that it is all about the figures, that "the numbers tell the tale", but what do you do with that knowledge?'* Graas wonders aloud. She is advocating for radical action. Ideally, she would like to see a lawsuit filed against the government over the lack of adequate youth care. Firm language for a scientist. But Dorien Graas seriously and openly sends out an urgent call for such a lawsuit. At a conference, she literally told the audience: *'I hope there might be a lawyer in this room who says, "Let's go and sue the government for the extreme neglect of vulnerable children." Because it's disgraceful that you know so much and yet do so little. I would go as far as to make an emotional appeal to each and every one of us. The numbers may tell the tale, but then comes acting and improving!'* Her lecture received thunderous applause.

14 DISASTROUS MARKET FORCES

This chapter provides an analysis of two components: on one side, the government as legislator together with the implementing governmental bodies, and on the other side the market. Youth care is a market, and as is true of many primary government tasks, a market system in health care is a recipe for things going wrong. Over 180,000 children in the Netherlands suffer from serious psychiatric problems, but providing them with the right kind of care is no longer self-evident. There are increasingly long waiting lists for just about all forms of youth care, for parenting problems, learning problems, or autism. This list also includes very serious psychiatric conditions, such as eating disorders and suicidality.

Following the decentralisation of youth care, in 2015, the responsibility for this type of care was taken away from psychiatrists. Under the new system, the municipalities are the ones deciding what happens to a 'mentally ill' child, as they are the ones paying for the care. In practice, this leads to unqualified civil servants having to assess a request for help and determine the related budget. Added fact is that, at the time of the decentralisation, the national government youth care budget was cut by a third. However, money is not the only problem. More serious is the loss of quality and the great damage that youth care incurred. And because of all this, thousands of children continue to suffer.

Children and their parents' individual right to responsible youth care is clashing with the budgetary possibilities and wishes of municipalities. Municipalities state that government funding is insufficient. They certainly have a point: in 2015, the organisation of youth care was moved from state level to the municipalities. Under the Rutte III Government, however, this also meant flagrant cuts in the budget for the most vulnerable group of children: a third of the Youth Care budget was cut and the austerity-related problem was passed on to the municipalities. The municipalities were supposed to organise youth care in a way that was closer to those who need it, more efficiently and, ultimately, also cheaper.

The opposite happened, with the number of care providers increasing from 120 in 2014, to around 6,000 in 2023. And, with the increase in providers, the

demand for care also grew: one in ten Dutch children now receives some form of youth care. At a certain point, many municipalities had had enough. They were spending so much money on youth care that they could no longer cope financially. The national government had to come up with more budget, was their message. Furthermore, financial problems are not the only reason for the abuses in youth care. The sector is suffering from structural mismanagement. For example, why can adults under the Compulsory Mental Healthcare Act (WvGGZ) always be placed out of home within their own region but for children this is hardly ever possible? Why is an adult out-of-home placement under the WvGGZ a truly last resort measure that is often limited to only a few weeks, after which treatment can be continued at home and only if really necessary, whereas local youth care and outpatient youth care are very poorly matched and outpatient youth care often is only applied in 'mild' cases? Why is legal protection for children regulated far more poorly in the context of youth care than under the juvenile criminal justice system or for adults under the WvGGZ?

Not only is legal protection for these children (up to the age of 18) regulated poorly, it is also true that the legal aspects that should in fact be adhered to are not: supervision by the Inspectorate is failing, the quality of care is not monitored, and there are excessively long waiting lists of many, many months although children are legally entitled to care within six weeks. All this results in a laundry list of illegalities, the magnitude of which is such that this situation has tacitly become the norm in youth care.

QUALITY

Correct diagnoses are few and far between, are often of an abysmal quality, and usually are not carried out by qualified psychologists or psychiatrists. This also means that the children's personal background for any problem is not being taken into account.

Veilig Thuis, the Dutch aid organisation on domestic violence and child abuse, is usually in charge of assessing the domestic situation: social workers without any psychiatric or psychological expertise are the ones determining medical grounds without any expert knowledge. Establishing neglect is soon done on the basis of subjective observation. However, not every child with a problem owes this problem to the fact that they come from a home environment with problematic

parents. Cases of autism, lack of special education or other psychological causes too quickly lead to an official government supervision order. Judges blindly accept the recommendations in the poor-quality reports submitted by youth care workers. At which point, cases are handed over to the youth care market, which is characterised by a lack of oversight. Local municipal officials procure all types of care on the basis of price: the care provider who wins is the one who offers the lowest price while ticking enough boxes in each part of the particular tender.

Market forces are focused on turnover and competing youth care providers force each other out of the market at the expense of quality. The municipal procurement officials, thus, are placing youth care in the hands of private organisations. Moreover, the financial structures of these profit-seeking companies are not transparent. Nevertheless, it should be stressed that many of the people working in youth are doing their very best and are working hard. But the system is rigged against them, with government bureaucracy, the lack of monitoring and supervision, in combination with incompetent procurement and understaffing on a local level. And then there are also the market forces to contend with.

MARKET FORCES

How is this ‘market’ doing? Youth care is a market in which economies of scale are the magic word. Big, bigger, biggest is the motto. Institutions keep merging, with larger organisations taking over smaller ones. And this has huge consequences for children and their parents. ‘Horizon Jeugdzorg en Onderwijs’ [youth care and education] and ‘Pluyn’ (which also includes ‘De Hoenderloo Groep’ and ‘Intermetzo’) are the two major market leaders. Two giants with powerful and influential executives. They provide just about all forms of youth care. The aim is to bring in more clients and, thus, money. To achieve this aim, they have large marketing departments and sales teams that conduct complicated and expensive tendering procedures to win municipal tenders.

According to René Clarijs, author of the dissertation titled ‘tyranny in youth care’ [*Tirannie in de Jeugdzorg*] (2013), the situation is purely based on power, institutional interests and money. For this governance expert, with years of experience in youth care, it is crystal clear. He says: *‘Youth care has become an industry. Of course we are full of talk about good intentions and having big hearts. But*

whichever policy meeting you attend, the word 'child' is conspicuously absent. That is extremely painful.'

Alex de Bokx of the small Dushi family homes, calls the youth care system perverse and purely money-driven. 'It is about nothing more than that. It's very much about money and power.' De Bokx outlines how 'little guys' like Dushi lose out to 'a few very influential organisations in youth care', explicitly mentioning the big ones, Pluryn and Horizon, by name. *'Those are growing like mad. They are all merging. And we just have to deal with it.'* Small outfits like Dushi are very regularly forced to cooperate with those large organisations, which De Bokx calls 'representatives of the system'. *'If you don't, you can just close the place down and put the children out on the street.'* The smaller organisations are in danger of going bankrupt, as De Bokx explains: *'They just can't cope. They can't manage financially. They can't win tenders, they don't meet certain quality requirements.'* Market forces in health care lead to unacceptable practices, especially in the larger institutions, according to De Bokx. *'Beds need to be filled, otherwise staff cannot be paid. They may deny it, but this is the way it is. All health care is money-driven, on the premise: This is how we financed it, and this is the way we have chosen to do it. That is the painful aspect. A managing director of an institution that employs a thousand people, will be judged by the supervisory board mainly on the continuity of the organisation itself. Because as an employer, there are thousand families economically dependent on the organisation, with thousand employees who need to be able to hold on to their job. And if the better option for doing so is a merger, then this is what you will do. It's not about the children at all.'*

Linda Bijl, director of FamilySupporters, an organisation that supports children and parents in many areas, agrees: *'There are two or three big organisations. A limited number of very large players that traditionally have functioned as government institutions. It is not a real market, these are institutions that, in the past, have always been subsidised and threaten to swallow up everything in the way of new initiatives.'*

Large youth care organisations also have a huge overhead. *'A closer look at their annual accounts shows that, on average, youth care institutions have between 40% and 50% overhead. And that is unfortunate on two counts. Because this is money that can't be spent on providing proper care, but also because that large overhead has its own impact — which has an even worse effect. It causes rules being set up and lobbies being started, as well as marketing strategies and communication departments. And all this is utilised to defend the interests of those institutions. As a result, the implementation of care, the children and their parents as well as the professionals all come up short.'*

MERGERS AND HOSTILE TAKEOVERS

The strategies and methods of the largest market players are quite similar. Takeovers, mergers, collaborations, winning tenders and good marketing are needed for them to provide 'family care' and other youth care throughout the country. These giants achieve their expansionism because they are able to offer everything in the way of youth care. By communicating in tenders that they have expertise in all areas, municipalities are buying in their youth care en masse.

Linda Terpstra, director of Fier, is an expert in girls who have fallen victim to loverboys, sexual abuse and exploitation. She wrote a manifesto aimed at turning this tide. Terpstra said: *'In the manifesto, I state that there is little left to choose from because of the system of procuring care. I am talking about not facilitating innovation or differences. This is all caused by the decentralisation and procurement procedures. Why is no one putting a stop to this situation?'* Youth care giants should be broken up, Terpstra believes: *'If the procurement officers would start asking critical questions and would demand quality, saying: We don't actually want an organisation that offers to tackle any and all problems. We want a little bit of differentiation, to have a few smaller institutions that are very good at specific things, and can prove that they are. In such a situation, the giants would be pushed out of the system. Then they would stop all these constructions that are currently being set up. If procurement officers would say: We are not interested in procuring care from institutions larger than two thousand people, then wait and see how rapidly they would dismantle.'*

Sometimes, a collaboration between organisations stops early, so that ultimately a merger or takeover would no longer be on the cards. Such was the case with Fier and Horizon in the 'Roffa' pilot project. The two youth care organisations jointly started Roffa for girls who have fallen victim to loverboys and sexual abuse in Rotterdam, homebase of Horizon, in late 2014. Terpstra says: *'We had such wonderful ambitions. We were housed in the same building. Fier on the right and Horizon on the left. We had our own groups, they had their own groups. Horizon had the girls who were in closed care. We saw that our girls sometimes needed something more and had to go to closed care. The plan was that these girls could go one door down to Horizon for a week of closed care. And, as soon as they were ready, they could come back to open care at Fier. We simply wanted to make things more coherent; keep children in closed care for a shorter period of time and also start treatment immediately.'* A wonderful plan. The State Secretary of Health and council member in Rotterdam, and later also the minister started us off. And former Queen Beatrix paid us a visit. But within

18 months, the plug was pulled on the project. The most powerful administrators in the youth care sector are everywhere: at VNG meetings, in documents by the Ministry of Health, Welfare and Sport, in a report by the Transition Authority Youth, and in interviews held for *Wards of State*. However, they are not equally appreciated by all, as the many interviews revealed.

Linda Terpstra talks about the existence of those youth care giants and their negative consequences. She thinks those very large, dominant institutions are not good for the quality of youth care: *'This is the result of the perverse incentives behind all procurement processes. And the giants are cashing in on it.'* Expertise, such as that of the small player Fier, is no longer the most important thing in the sector. Municipalities prefer to contract large organisations that can do everything (or say they can). Terpstra outlines how procurement officers work with regard to tenders: *'Those municipal officials are doing it with the best of intentions, I don't want to think there is any ill will behind it. But they just start, without any historical knowledge. They are often young and get into it full force. They are looking to tick all the boxes. It goes like this: the procurement officer asks a provider whether they have any expertise in dealing with victims of loverboys. And the provider says: 'Yes, we do' (tick!), and with the next expertise, it again says 'Yes' (another tick!) and so on. They can do it all.'* These giants thus win very large contracts from the municipalities. And they should not, according to Terpstra. *'Dream on! Really, they can't. They can't be good at everything.'*

TENDERS

Council members and juvenile lawyers found out exactly how powerful these youth care giants are when, in the autumn of 2018, they tried to uncover the facts about a controversial multimillion-dollar tender for JeugdzorgPlus in northern North Holland region. The tender had been won by youth care giant Horizon. This case also illustrated how little can be done against such large youth care organisations when they fail to provide the care they have promised to deliver in their 'marketing pitches'.

Until then, the Transferium, owned by the Parlan foundation, had been the only institute offering closed youth care in this particular part of the country. The institute had been established not even a decade earlier, at the initiative of the Ministry of Health, Welfare and Sport, especially for the — then new — JeugdzorgPlus. The

entire complex had cost EUR 30 million; with residential groups housed along a 'street', so that it had the atmosphere of a village, with lots of greenery and with good sports facilities — it was a showpiece of closed youth care institutions. The Province of North Holland also invested EUR 8.4 million into it. The care provided by Parlan at the Transferium location had a good reputation.

Nevertheless, 18 municipalities awarded the contract for closed youth care to 'outsider' Horizon. Because Horizon had its roots in Rotterdam, the regional player Parlan was wiped off the local map. Under its new contract, Horizon was to provide all closed youth care in northern North Holland region, starting from 1 January 2019. This timeline soon proved impossible. It took until mid January 2019 for Horizon to find a suitable building — the former children's home Antonius, in Bakkum, which falls under the municipality of Castricum. Immediately after Horizon had received the keys to the building, on 4 February, they opened for business. They named the new closed care facility also 'Antonius'. The 1930s building had stood empty for eight years and, in that state, was unsuitable to be used for taking in children. When the first adolescents arrived, it still had to be completely renovated and furnished. The fact that this was permitted was remarkable or even, as some said, scandalous. Vrank Post of the Transferium called the committee members incompetent: *'Care procurement officers, municipal policymakers, were on the selection committee. With a fairly limited knowledge of JeugdzorgPlus, the committee looked at both our tender and that of Horizon, which was rather unsubstantive. The committee simply used a checklist: "What is the length of stay? Oh, this is shorter with them and that's better, looks nicer." They just ticked the boxes on the list — very neatly and according to the rules of procurement.'* Or, as one insider put it: *'The way we have been organising care and youth assistance is wrong.'* And about the compulsory EU tendering in the youth care sector: *'The human dimension has been removed, because the focus is largely on juridical procedures and bureaucracy. You become disconnected from what a provider could actually offer. In the past, when we had to deal with only a few procurement officials, they would come to see us on working visits. We had a relationship. But we are now organising it in such a way that the quality is gone, as well as the human dimension. If you have critical officials who have a good relationship with the institutions in their region, this will prevent any perverse incentives. At which point you will be able to look at what they say they can do and recognise the things that could merely be 'window dressing'.*

BANKRUPT

Everything should have been done differently at Zeeland's youth protection institute 'Intervence', the most serious and often compulsory form of closed youth care. It was one of the biggest fiascos since the responsibility for youth care was transferred from the national government on to the municipalities, in 2015. The auditors of 11 municipalities investigated the bankruptcy of Zeeland's youth protection system in 2020. The blame was shared by all those involved, the 11 municipal auditors concluded. Incompetence and mistrust were paramount in the organisation's management, the responsible municipal regulators and board of executives.

Thirteen councillors in Zeeland were responsible for the Intervence facility having to shut down, even though, at the time, there was no safety net for the 750 children and their parents who were being looked after by the institution, often by order of the court. The intensive care provided to these children was too expensive and of substandard quality, council regulators felt. Which was why they did not renew the contract — something that amounted to the institute's liquidation. *'Money was the main element of their consideration,'* according to a reconstruction by internet magazine Follow the Money on 20 January 2023. With this focus on costs, the municipal administrators had ignored the fact that there were no other youth care institutions to take over the tasks of the now defunct organisation. The auditors concluded: 'Everything that could go wrong did go wrong, and repetition cannot be ruled out. This system is creating a context that leads to disaster.'

YOUTH CARE FRAUD

The Social Support Act (WMO), the municipal care which also includes youth care, led to a tenfold increase in care providers due to the fragmentation over 340 municipalities instead of a small number of government bodies run by experts. This fragmentation not only led to an explosion of bureaucratic care, it also meant that of the EUR 4 billion in total, as much as 1 billion had to be spent on 'shuffling paper around'. Controlling this fragmented landscape is nearly impossible.

CIBG, the Central Information Point for Healthcare Professions, is a so-called executive organisation of the Ministry of Health, Welfare and Sport. It is in

charge of the website www.jaarverantwoordingzorg.nl, on which all annual reports must be published. This, in turn, produces something remarkable. CIBG publishes but does not check anything else. Sometimes annual reports are not on the website at all, or not on time. *'There are simply too many of them, we lack sufficient capacity'*, is their honest answer.

According to the report on healthcare fraud in 2022, published by the Information Hub Healthcare Fraud (IKZ), there are many things wrong. The IKZ reports are about suspicions of healthcare fraud. The signs of WMO fraud have increased by 14% in a single year, and incidences of fraud related to group supervision, care for the disabled and youth care are also on the rise. In youth care, in particular, this is mostly about tampering with substandard care that has been provided, and the WMO-related fraud pertains to care funded from the personal health budget (PHB).

Group supervision, care for the disabled and youth care increases were proportionally the most rapid. Most of the cases involved fraudulent claims for more or different care than had actually been provided, or requests for more care than needed. *'In addition, it often happens that care costs are declared without the care having been provided,'* the IKZ report states. In the case of individual counselling, this was mainly about claiming more care than provided, but there were also incidences of bribery and intimidation, and clients being recruited for money laundering or drug smuggling.

FALSIFICATIONS AND MISUSE OF DATA

Since 2016, nine organisations, including the Association of Netherlands Municipalities (VNG), the Health and Youth Care Inspectorate (IGJ) and the Tax and Customs Administration, have been working together within the IKZ to combat healthcare fraud. A total of 248 out of 344 municipalities are affiliated with IKZ (December 2022). In the future, this number is expected to increase further. The recently adopted Wbsrz Act, on the promotion of collaboration and legitimate care, requires municipalities to join the IKZ. This has also meant that the IKZ is now a juridical person with a statutory task. In this way, a registration desk has been created, where incidences of fraud reported by the various healthcare financiers are brought together.

The IKZ also received reports of falsifications. Several describe the misuse of care-related codes/treatments, others are about deviations from what is stated in the BIG register (a legal, online and public register for Professions in Individual Health Care), in which care workers are registered with their qualifications. These incidences include the use of an incorrect title of care providers, and people posing as a nurse without having the proper training and/or official papers, as is stated in the reports. The IKZ is also increasingly receiving reports on care workers who have falsified VOGs or diplomas.

Furthermore, the registration desk finds that there are some care providers who are suspected of misusing clients' personal data and documentation. Such as misusing the login details of people's personal digital identity (DigiD). This sensitive information would be used in submitting forged care applications, agreements, declarations and authorisation forms. Suspected care providers often strikingly go bankrupt at precisely the time when an investigation into them is launched. On certain occasions, the owners relaunch their business under a new care company. The report writes about "complex organisational structures", where owners have businesses in other sectors, such as real estate and cleaning.

ORGANISED POWERLESSNESS

Bureaucracy is stifling youth care. A report on the subject, published by the Netherlands Court of Audit, the official auditor of public spending, is titled 'Georganiseerde Onmacht' [organised powerlessness] and this title also describes the final conclusion. Youth care in the Netherlands is not functioning properly, because of how it is organised.

'The youth care system has in fact failed', reports Ewout Irrgang, acting President of the Netherlands Court of Audit in an article in internet magazine Follow the Money (April 2023) about the impasse in youth care. The Court of Audit examined the way state secretaries and ministers took their responsibility for youth care.

Conclusion: 'On paper, those responsibilities are well organised, but in practice, departments and governments fail when it comes to implementation. Which means that government ministers are also failing. After all, they are responsible for the functioning of the ecosystem of municipalities, child protection workers, child judges, care providers, the Child Care and Protection Board and Veilig Thuis

that is supposed to arrange proper care for the Netherlands' most vulnerable children.'

When it comes to youth protection, as it is described in this book and essentially is the most stringent, court-ordered form of youth care, care providers point to the municipalities, municipalities point to the national government which, in turn, points back to the municipalities. 'An administrative deadlock,' as the President of the Court of Audit calls it. No one is taking the lead in getting the stalled youth care system back on track, none of those involved are working towards a solution, everyone is pointing at each other. The Court of Audit has no confidence in this Cabinet's reform plans.

GLOSSARY

IBP - individual budget ceiling	IBP (individueel budget plafond)
Action plan to improve fact-finding in the youth care chain	Actieplan Verbetering Feitenonderzoek in de Jeugdbeschermingsketen'
AMK - Child abuse advice and registration desk	Advies- en Meldpunt Kindermishandeling (AMK)
BIG register - legal, online and public register, under the Professions in Individual Health Care Act	BIG register (Wet op de beroepen in de individuele gezondheidszorg (Wet BIG))
Bureau Jeugdzorg - Dutch youth care organisation	Bureau Jeugdzorg
Child Care and Protection Board	Kinderbescherming
Child and Youth Act 2015	Jeugdwet 2015 (Adopted in 2015, new elements: youth decentralisation from the provinces to the municipalities, who became responsible for all forms of youth care, including youth mental health and addiction care (GGZ), child psychology and specialist child and adolescent psychiatry)
Defence for Children	children's rights organisation
DigiD - personal digital identity	DigiD
DCI - Children's rights organisation Defence for Children International	DCI
Follow the Money - Dutch platform for radically independent investigative journalism	Follow the Money
FNV - Dutch trade union for the health care sector	FNV Zorg & Welzijn

Foundation Justice Wards of State	Stichting Recht voor Kinderen van de Staat
GGZ - Dutch Association of Mental Health and Addiction Care	GGZ (Geestelijke Gezondheidszorg)
IGJ - Health and Youth Care Inspectorate	IGJ (Inspectie Gezondheidszorg en Jeugd)
JJI - youth detention centre	Justitiële jeugdinrichtingen (JJI)
JenV - Dutch Ministry of Justice and Security	Ministerie van Justitie en Veiligheid (JenV)
JeugdzorgPlus	intensive youth care method (JeugdzorgPlus)
Netherlands Court of Audit, the official auditor of public spending	Algemene Rekenkamer
Netherlands' Ombudsman for Children	Kinderombudsman
NJI - knowledge institute of youth care	Nederlands Jeugdinstituut(NJI)
OTS - Court-ordered supervision	ondertoezichtstelling (OTS)
PHB - personal health budget	PGB (persoonsgebonden budget)
Samen Veilig - organisation that steps in when a child's safety is at stake	Samen Veilig
SPICs (database of youth care providers, used by the Municipality of Amsterdam)	SPICs (Segment B: Profiel-intensiteit combinaties en gecontracteerde aanbieders)
Stichting Beroepseer - foundation on 'professional ethics'	Stichting Beroepseer
TenderNed - Platform for tenders	TenderNed
United Nations Convention on the Rights of the Child (UN-CRC / CRC)	Verdrag voor de Rechten van het Kind
Veilig Thuis - Dutch aid organisation regarding domestic violence and child abuse, which includes an abuse hotline and information desk)	Veilig Thuis

VNG Association of Netherlands Municipalities	VNG (Vereniging van Nederlandse Gemeenten)
VNJA (the association of Dutch juvenile lawyers)	VNJA (Vereniging van Nederlandse Jeugdrechtsadvocaten)
VWS - Dutch Ministry of Health, Welfare and Sport	VWS
WMO - Social Support Act	Municipal care which also includes youth care (WMO)
WSS - William Schrikker Foundation	William Schrikker Stichting (WSS)
WvGGZ - Compulsory Mental Healthcare Act	Wet verplichte geestelijke gezondheidszorg (WvGGZ)
Youth care	Jeugdzorg

WARDS OF STATE

Youth care in the Netherlands under lock and key

In the Netherlands, minors who have been placed under state supervision or have been removed from their home environment at the order of Youth Care are what we call wards of state. Youth care in the Netherlands is a market that is driven by perverse incentives, as this book makes clear. A market where expansion and money take precedence

over the welfare of young people. A world in which truth and the best possible care are not of paramount importance. The translation is mainly intended for readers in Europe and may serve as documentation for any EU legal action. It is also a tribute to the journalistic work of the author H  l  ne van Beek (1964–2022).

Hélène van Beek *author*



Investigative journalist and author who worked freelance for the Dutch daily newspaper 'Trouw' and television shows 'Zembla' and 'Witteman Ontdekt' (VARA television).

She worked on the Dutch version of this book [‘Kinderen van de Staat’] for three years. In the process, she interviewed many adolescents and their parents, care workers and experts from the youth care sector, as well as juvenile lawyers. She consulted all current research and literature. By filing a WOB request (Government Information (Public Access) Act) and talking with key sources, she uncovered secret information about a controversial tender for closed youth care.

Martijn van Rheenen *foreword*



A Dutch entrepreneur and investor who strongly believes in taking corporate social responsibility. He is also a supporter of various foundations and an initiator

of social projects. In 2008, he began to support foundations for the children and parents who found themselves in trouble with the youth care system. In 2015, when policy changes caused authorities to lose all sight of the abuses in youth care, he started investigating these abuses himself. He called the project 'Kinderen van de Staat' [wards of state].

Rob Bakker

Journalist, author, historian and publisher of Nobel Books. He modified the original Dutch version of this book to make it accessible to European Institutions.



Nobel Boeken



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