



# COUNTRY SHEET

## ON YOUTH POLICY

### IN THE NETHERLANDS



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# 1. Context and principles of national youth policy

## 1.1 Context of national youth policy

As of 2015 all 393 Dutch municipalities are responsible for the whole continuum of care for children, young people and families in need of help. The transition relates to all types of services, including mental health provisions. The municipalities now steer a wide range of services for children and families, ranging from universal and preventive services to the specialized (both voluntary and compulsory) care for children and young people between 0 until 23 or 27 years. Youth care is for young people until 18 years, but in the Netherlands, the term youth is applied to children and young people from 0 up to the age of 23 or 27, depending on the domain; e.g. preventive local youth policies up to 23 years and youth employment policies until 27 years.

Before 2015 the situation was very different. The universal and preventive services were the responsibility of the local municipalities and the youth care system was under the responsibility of the twelve provinces. Now this 'turning point' in the system has been finalized with a new [Child and Youth Act](#) and all preventive and care provisions for children, youth and family are now a local responsibility. This is a huge transition of all administrative and financial responsibilities towards the local level. With this transition of responsibilities also a change of focus; a transformation is instigated; different approaches in steering and in working with children, young people and families are now in development with a focus to better empowerment and participation (inclusion) for all.

### Reasons behind the transition and transformation

The Netherlands has a long tradition in child and youth social services with a high standard of professional practice. However, during the last twenty years many evaluations have been made in an attempt to explain the flawed functioning of the system caring for children and young people at risk. The main obstacles could be summarized as follows:

- Imbalance in focus. There is an increasing imbalance between attention to normal development and development at risk. The specialized services received more funding in proportion to the universal and preventive services.
- Fragmentation. The child and youth care system lacked transparency because of the many different services, statutory bases, responsible and funding authorities, professional associations and sector organizations. Implementing innovations is therefore often difficult.
- The prevailing practice of referring clients. With many different specialized services, often one organization can't meet all needs of children and adolescents and their families cannot be supported by one organization. Therefore they are referred to several different organizations. The admission procedures of these organizations are also complicated and

take much time which prevents children and families from quickly receiving the care they need.

- Increased use of care. The demand on specialized care augments by approximately 10% every year. According to epidemiologists this rise cannot be explained by an increase in problems. It seems to be caused both by an improvement in detecting problems and the earlier mentioned imbalance between services, the fragmentation of the youth care system and the domination of referrals to specialist services.
- Unmanageability. When one type of services receives funding the demand of other types of services increases. For example, restricting the use of youth mental health care by its funder may lead to a larger demand on child and youth social care.

To reduce the existing obstacles, a major reform of the system and practice became necessary. The transition of the child and youth care system is part of a wider process of the transition of social services and assigns the Dutch municipalities the coordination of most services in the social domain. The change is not only related to the process of decentralizing responsibilities, but also on a process of transformation of care. There will be more focus on a larger role of the family and social networks in the care process, more prevention and a better coordination and integration of services. This should lead to more coherent, more effective, more transparent and less expensive services for children, young people and families.

It means a huge decentralization and transformation of the Dutch youth care system. The main changes are that there should be a stronger focus on prevention, youth's and parents' own capacities, care made to measure and a better cooperation between professionals. This is expected to enable municipalities to develop integrated policies and to offer well-coordinated care made to measure and support, geared to local and individual situations and needs. This decentralization should also lead to a cost reduction and more effective working methods. These efforts must decrease the use of the specialized services. More information can be found [here](#).

## **1.2. Principles of national youth policy**

In the Netherlands, the term youth is applied to children and young people from 0 up to the age of 23 or 27 – and in youth care until 18. In 2015, there are almost 5 million children in the age group 0-25. One in every five young people in Holland have an ethnic background. As in most other industrialized countries, the proportion of youth in the total population is decreasing. Dutch children are among the happiest and healthiest in the world, according to much international research. According to the Health Behaviour School Children (HBSC) study among children aged 11-16 the average Dutch child is happy, satisfied about his or her life, gets along well with his parents, does reasonably well at school, has an active social life and is satisfied about his or her relationships. This was confirmed in the UNICEF report card 11 (April 2013) on the well-being of children in rich nations, in which The Netherlands had the highest score.

Despite this, around a third of Dutch parents worry about the upbringing and development of their children. Furthermore, approximately 10% of the Dutch adolescents can experience problems and may need some additional support. A further 5% of Dutch youth is considered structurally at risk in their development and is in need of some form of youth care.

## 2. Statistics on young people

On January 1, 2015, 16.900.726 people lived in the Netherlands. The ratio of young people (15-29) years in the total Dutch population on January 1, 2014 was 18,4. On January 1, 2015, almost 4,9 million Dutch people are aged under 25. This represents nearly 29 percent of the population. The proportion of young people (0 to 25) in the total population is getting smaller. It is expected that this proportion continues to fall. All data are from [CBS Statline](#) and [Youth Monitor](#).

Table 1

Number and Percentage of young people in global population

	2010	2015
Total population	16 574 989	16 900 726
Population < 20 years in numbers	3 928 334	3 828 059
Population 20-40 years in numbers	4 192 772	4 134 447
Population <20 years in %	23,7	22,7
Population 20-40 years in %	25,3	24,5

Table 2

Number of young people by gender

	2010	2015
Total young people 0-25 years	4 941 244	4 897 091
Boys	2 521 546	2 501 056
Girls	2 419 698	2 396 035

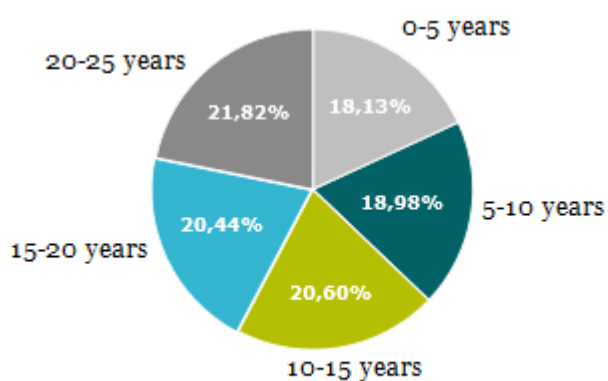


Figure 1. *Distribution Dutch young people to age groups*

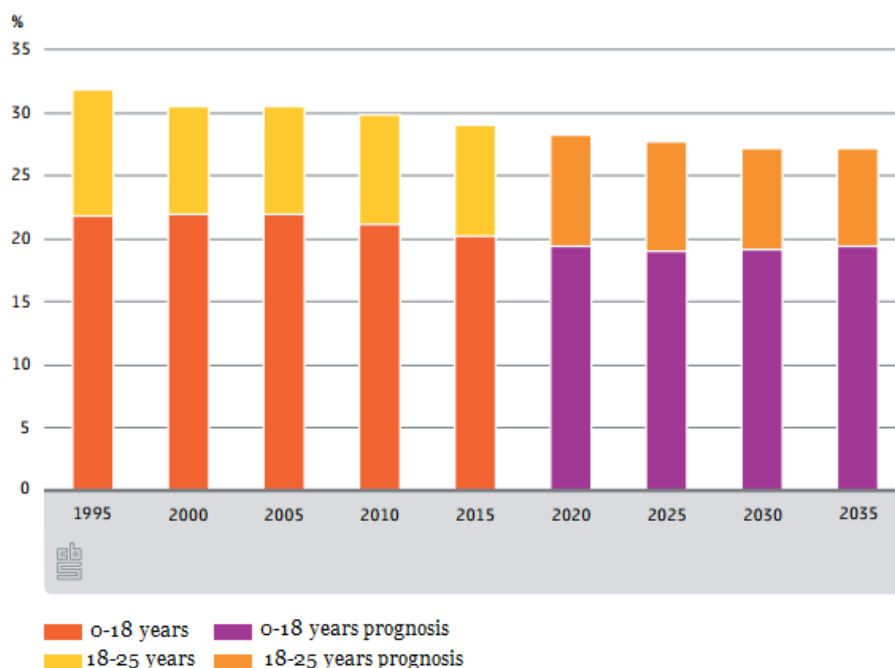


Figure 2. Proportion of young people (0 to 25) in the total population, 1995-2035

In 2015, 43.093 people asked for asylum in the Netherlands. The main part consists of Syrians (18.677 persons, 43%) and Eritreans (7.359 persons, 17%). In the same period of time 13.845 people reunited with a family member with a residence permit. In 2014, 21.811 people applied for asylum, so there is a considerable increase (data from [Dutch Council for Refugees](#)). On February 29, 2016, there were 2.508 unaccompanied minors in shelters according to the Central Agency for the Reception of Asylum Seekers ([COA](#)).

Table 3

Number of people in shelters by age on February 22, 2016 (data from COA)

Age group	Male	Female	Total
0-3 years	1.311	1.155	2.466
4-11 years	2.430	2.071	4.501
12-17 years	3.319	1.327	4.646
18-29 years	12.709	4.804	17.513
30-39 years	6.976	2.582	9.558
40-49 years	3.217	1.338	4.555
50-59 years	1.203	671	1.874
60 years and older	474	436	910
Total	31.639	14.384	46.023

### **3. Actors and Structures**

#### **3.1 Public authorities**

##### **3.1.1 National public authorities**

After the general election of 2012, a new government has formed based on a coalition between the People's Party for Freedom and Democracy (VVD – Liberal party) and the Party for Labour (PvdA – Social Democrats). This is the first two-party government in the Netherlands. The next Dutch general election will take place no later than 15 March 2017 to elect all 150 members of the Second Chamber of Parliament House of Representatives. More information on the Dutch government can be found [here](#).

Four ministries are responsible for various aspects concerning youth in the Netherlands. The mandate of the Ministers and State Secretaries lasts until 2017, after the election a new government is elected. The four ministries are:

- Ministry of Health, Welfare and Sport: overall youth policy and most specialized services for families and children. Minister is Edith Schippers. State Secretary is Martin van Rijn.
- Ministry of Security and Justice: juvenile justice policy and related institutions. Minister is Ard van der Steur. State Secretary is Klaas Dijkhoff.
- Ministry of Education, Culture and Science: all educational matters in the Netherlands. Minister is Jet Bussemaker. State Secretary is Sander Dekker.
- Ministry of Social Affairs and Employment: labour related measures, including the Child Care Act for the Kindergartens and playgrounds. Minister is Lodewijk Asscher. State Secretary is Jetta Klijnsma. The Department Childcare has 22 employees. The director-general is Marcelis Boereboom.

Between the different ministries, a regular interdepartmental consultation takes place. Frequency is unknown.

##### **3.1.2 Regional public authorities with competencies in the youth field**

###### *Child welfare regions*

Because of the transition of youth care and preventive youth policies to the municipal level in 2015, now all responsibilities of the provincial authorities in youth (care) policy are transferred to the municipalities. Municipalities have therefore formed regional alliances to organize residential care, foster care, child protection measures, youth probation and certain types of specialized care and/or secure care. In addition, the regional alliances jointly purchase care at (major) care providers. The current level is 42 child welfare regions.

Although the child welfare regions are not a regional public authority, they are important because local municipalities:



- are too small to perform all tasks themselves,
- are not able to deal with fluctuations in the demand of expensive care,
- do not have the specific expertise needed,
- have important partners that operate on a regional level and/or
- hardly have a voice in large regional education alliances on their own.

#### *J42*

Of each child welfare region, one councillor or alderman is represented in the J42 ('J' stands for 'jeugd', the Dutch word for 'youth') network. In the J42 network, the councillors and alderman collaborate to steer the implementation of all youth care tasks at local level. During these meetings, account managers of the Ministry of Health, Welfare and Sport are present.

### **3.1.3 Local public authorities with competencies in the youth field**

All 393 Dutch municipalities are responsible for the whole continuum of care for children, young people and families. It concerns the work for and with young people in universal provisions like schools and youth work for all, but also the support and care for those in need of help. It is the local government's duty to offer children, parents and professionals services. This in such a way that children can grow up safely and in good health, can become independent, are self-sufficient and can participate socially according to their age and development stage. The municipality decides about which services are freely accessible and which are not. The Dutch youth care and welfare system consists of: universal services, preventive services and specialized services. Different layers of the Dutch government are responsible for coordinating these services. Noteworthy is the shift from having the right to (health) care to the duty of municipalities to provide care.

The coordinating body of the municipalities in the organization and structuring of all local responsibilities is the Netherlands' Association of Dutch Municipalities, Vereniging Nederlandse Gemeenten (VNG). Tasks of the [VNG](#) are:

- Advocacy for and from all municipalities with other governments and stakeholders in the social field. Second Chamber of the Parliament House, the government and stakeholders in the social field are important partners;
- Services: advice to all members on current developments (own-initiative) and advice to individual members (on request);
- Platform function exerted by the VNG-committees, the provincial departments, conferences, seminars and consultation members.

The VNG subcommittee Youth consists of twenty councillors from different municipalities. The subcommittee advises the VNG-board about perspectives around prevention, youth care, youth

protection and juvenile probation. This subcommittee is a leading advisory body at councillors/aldermen level and acts as representative body in the negotiations with the government, e.g. with the ministers of Health, Welfare and Sport and the ministers of Justice.

### G32

The G32 is a network of councilors of large cities that focuses on joint advocacy and knowledge sharing. The theme group Youth focuses on five areas: (1) Input, (2) Direction and funding, (3) Knowledge and transformation agenda, (4) Education and integrated child centers and (5) System of care. At the moment, 37 municipalities are participating in the G32 network.

### **3.2 Youth welfare services (comprising public and/or non-public actors)**

It is the local government's duty to offer children, parents and professionals services. This in such a way that children can grow up safely and healthy, can become independent and are self-sufficient and participating socially according to their age and development stage.

The municipality decides about which services are freely accessible and which are not. The Dutch youth care and welfare system consists of:

- Universal, collective services,
- preventive services and
- specialized services.

Different layers of the Dutch government are responsible for coordinating these services.

The aim of new Child and Youth Act is: decreasing the number of children in specialized care and increasing preventive and early intervention support and promoting the use of social networks.

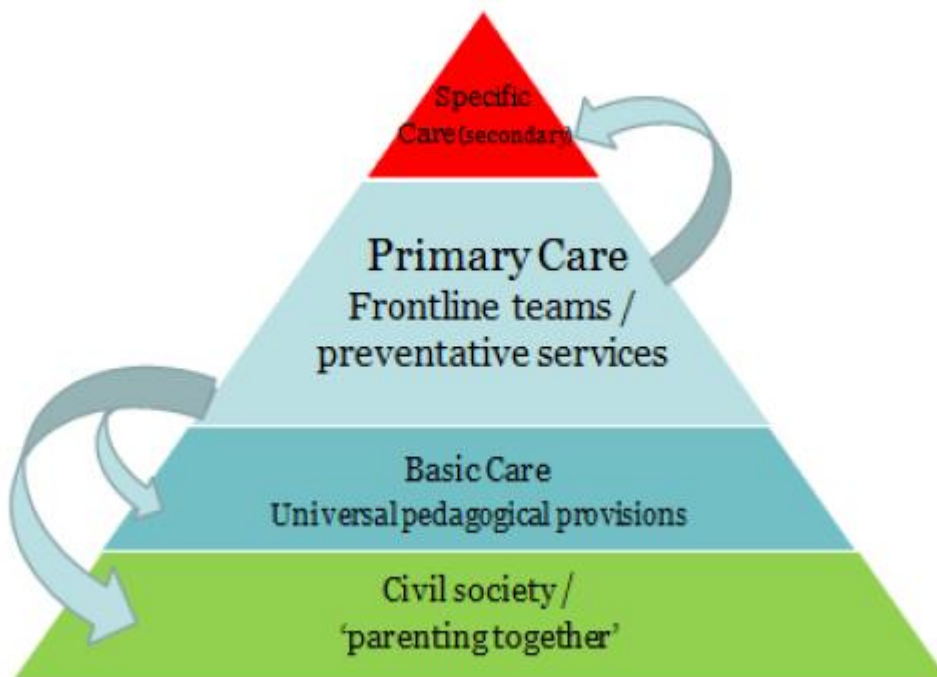


Figure 3. *Child welfare structure - services and provisions pyramid.*

The bottom of the pyramid refers to the collective responsibility to develop and foster a strong foundation in (local) society e.g. in connecting with the voluntary sectors, self-organisations and informal networks between citizens (including young people). “Parenting together” is referring to this collective responsibility of all citizens to support children and young people to grow up safe and healthy within the local environment.

Universal – basic care - services are the second layer. It consists of services like maternity care, preschool, kindergarten, schools, youth welfare, youth facilities for relaxation, sport, art and culture. Also for example youth (social) work, child care and schools are part of these services. General youth services provide support for: health behaviour of young people, growing up safe, talent development, participation and active citizenship. They aim to facilitate the normal development of children and to prevent small problems of children and families turning into severe problems. Municipalities aim to strengthen these universal services in order to enable professionals to adequately solve small problems in children’s upbringing and to detect more severe problems at an early stage. Municipalities in The Netherlands also aim to stimulate the cooperation between the different universal services.

Preventative services (or primary youth care services) are for example child health care, general social work, parenting support and in many local municipalities. Some fields of youth work are also

part of the preventive services as e.g. outreach youth work or street corner work to provide individual guidance and support to young people at risk.

These preventive services aim to detect problems at an early stage, to intervene at an early stage, to coordinate support and to refer children and families to the specialized youth care services. The municipalities are responsible for preventive youth policy.

Since the decentralized responsibilities in 2015, many municipalities form inter-professional teams to provide comprehensive outreach (youth, family or citizens) care within the neighbourhoods. These new multidisciplinary teams which are now active in almost 70% of all municipalities act as primary youth care providers or generalist care providers for all citizens. The teams differ per municipality but in general they consist of health care workers, social workers, parenting support workers, (school) psychologists and others active in the care field. They are the linking pin between the preventive (and universal, collective) services and specialized care.

Specialized services are for example the specialized (residential) youth care services, youth mental health care services, foster care and child protection and probation services. The provisions available should assess the needs and the situation of children and families with serious development and/or parenting problems. They also provide specialized care, coordination of care and aftercare, including intensive ambulatory support and specialized pedagogical support at home for multi-problem families, semi-residential care, residential care and foster care. Specialized services are used for problems requiring intensive care and to help if there is a very unfavourable educational environment. It is about specific and often more invasive and more expensive forms of aid.

#### *Focus on child maltreatment and abuse*

Child abuse in the Netherlands is approached primarily as a medical, psychosocial or family problem. Dutch law offers several possibilities to institute legal proceedings against child abuse. Since January 2015 local authorities are responsible for implementing and maintaining Advice and Reporting Centres for Domestic Violence and Child Abuse called [Safe at Home](#). For an effective approach to domestic violence local authorities combine forces at regional level. Professionals working with families, children or adults that suspect domestic violence or child abuse are required to use a reporting code. Safe at Home is not a provider of youth care but a front office to assure necessary care is implemented at local level.

### **3.3 Non-public actors/structures & youth services with competencies in the youth field**

In 2010, the Dutch Lower House has set up the [Children's Ombudsperson](#). The Children's Ombudsperson is a nationally functioning institution that protects the rights of children and youth in the Netherlands.

The [Coalition of Children's Rights](#) is a coalition dedicated to improving compliance with children's rights at the national level and consists of different organizations. It is the Coalition of Children's Rights mission to ensure that the UN Convention is fully implemented in the policies of the central government. They are responsible for providing the NGO-report to the CRC Committee in Geneva.

#### **3.3.1 Youth Councils**

The National Youth Council, abbreviated as [NJR](#), is an umbrella organization of national youth organizations for young people between 12 and 30 years. At NJR employs over 30 young people and hundreds of volunteers in (media) campaigns and projects for young people. The NJR encourages young people to show what they are capable of to persons ranging from their own neighbourhood to the United Nations. In addition, the NJR advises governments and other organizations on youth policy. The National Youth Council is an affiliation of 37 youth organizations.

Each year, the National Youth Council organizes the election of the [Dutch Youth Representatives](#). These are young people between 18 and 25 who speak on behalf of their peers on four themes: sustainable development, Europe, UNESCO and the United Nations. For each theme, two youth representatives are active. Each year a new representative is elected for each of the four themes for two years.

#### **3.3.2 Youth NGOs**

A number of youth NGO's, both political and non-political, are active at the national level. Most of these organizations are member of the National Youth Council but, due to the decentralized nature of youth work, most groups and organizations are mainly at local level.

### **3.4 National network(s) for knowledge on youth linking all actors in the field (policy makers, researchers, young people and their organisations, NGOs)?**

The [Netherlands Youth Institute](#) is the Dutch national institute for compiling, verifying and disseminating knowledge on children, parenting and families. The Netherlands Youth Institute's main aim is to improve the physical, cognitive, mental and social development of children and young people by improving the quality and effectiveness of the services rendered to them and to their parents or caregivers. The main areas of expertise comprise: (1) effective parenting and healthy child development, (2) challenges in parenting and child development, (3) guidelines, effective interventions and instruments, (4) strengthening professionals working with children and families and (5) the child welfare system, its purpose and functions. The Netherlands Youth Institute works for and is commissioned by the European Commission, national, provincial and local governments, child welfare providers, professional organizations and charities. As an expert centre, the Netherlands Youth Institute connects scientific research to the practitioners' need for knowledge. One of its' key issues is promoting evidence based interventions through 'translating' academic results into practical advice and support. The Netherlands Youth Institute covers areas such as child and youth welfare, (residential) youth care, health, justice and children's development and well-being. It is the national specialist on parenting support, community schools, child abuse and early child education. It supports the youth sector by advising on policy, programs and implementation and by training professionals in evidence-based methods. In this role, the Netherlands Youth Institute works cooperates closely with other Dutch governmental and non-governmental organizations in the youth field. The Netherlands Youth Institute is also an international knowledge broker on issues related to children and youth policy. It seeks to exchange scientific developments and good practices with professionals, knowledge centres and research institutions in other countries, thereby improving the children's services and policies at home while at the same time contributing to developments in the youth field abroad.

The Dutch Youth Health Centre ([NCJ](#)) is the innovation and knowledge centre for child health care in the Netherlands. The NCJ stimulates innovation of the profession, puts youth health on the agenda and makes proven knowledge accessible. The NCJ focuses on the Youth Health Care (YHC) and executive bodies active in it. The NCJ supports YHC organizations in innovation and knowledge. In addition, the NCJ plays a unique role in supporting YHC organizations in the implementation of instruments.

[Movisie](#) is the Netherlands centre for social development. Their mission is to promote the participation and independence of citizens by supporting and advising professional organizations, volunteer organizations and government institutions. Five themes are central to Movisie's work: effectiveness; professionalization; participation; combating and preventing domestic and sexual violence; social care. Movisie is a not-for profit organization. One of their major funders is the Ministry of Health, Welfare and Sport. They work with a wide range of (care) institutions, foundations, provinces, other ministries and corporate businesses. Movisie also works together with local partners.

[ZonMw](#) is the Dutch national organization for health research and healthcare innovation. As an intermediary between science and society, ZonMw works to improve disease prevention, healthcare and health by stimulating and funding research, development and implementation. ZonMw supports knowledge enhancement, quality and innovation in health research and in healthcare. ZonMw's main commissioning bodies are the Ministry of Health, Welfare and Sport and the Netherlands Organization for Scientific Research.

#### *Academic Laboratories*

In the field of social development and in the field of youth, regional academic laboratories are in function since the decentralized structures. They act as developers of new evidence-informed knowledge in the field of social development and child- and youth welfare in the Netherlands. An academic laboratory is a (knowledge) infrastructure in which practice, research, policy and education work together on resolving issues. The laboratories are formal, long-term partnerships between youth institutions, a university and/or college and local policy partners, mainly municipalities. Parents and children are also involved. For more information, see page 16.

## 4. Legislation

There are four transitions causing a change in child and youth care:

- [Child and Youth Act](#) (January 1, 2015). All municipalities are responsible for all forms of child and youth care for children and young people until 18 years. This includes that their policy:
  - Activates, restores and strengthens the own capacities of children, youth, parents and their social environment to solve problems.
  - Improves the parenting capacities of parents and their social environment, so that they are able to bear responsibility for the upbringing of children and youth. Municipalities should strengthen the pedagogical climate in families, communities, neighbourhoods, schools, playgrounds and children's day care. Policy should aim to improve the safety of children and youth.
  - Includes prevention, early detection and early support.
  - Offers timely suitable care made to measure. This includes improving the safety of children and youth and out of home placements in environments that are most similar to family environments, like foster care.
  - Contains effective and efficient cooperation regarding families.
- [Participation Act](#) (January 1, 2015). The law stipulates that local authorities guide young people to school or work in a new way, in particular young people with disabilities. For example, persons under 27 years who can study with the right to receive government loans for study, are not entitled to financial aid.
- [Social Support Act](#) (January 1, 2015). The law forms the basis of the system of care and welfare for all citizens. The Social Support Act is implemented by the municipalities.
- [Fitting Education Act](#) (August 1, 2014). Municipalities are responsible for ensuring that every child receives an appropriate education. The Act states that schools have the responsibility to provide a suitable learning place for every child. Mainstream and special needs schools must co-operate in regional alliances to offer children a learning place at one of the mainstream schools, if needed with extra support in the class room, or at a school for children with special needs. The schools should closely involve parents in this matter. In this respect, connections need to be established with the other decentralizations. The duty to go to school is until 16 years and partially until 18 years.



#### Legislation relating to child abuse

- [The Convention on the Rights of the Child](#) by the United Nations came for the Netherlands into force on March 8, 1995.
- In April 2007, [Article 247 of the Dutch Civil Code](#) included a provision that disapproves the use of physical or mental violence or any other form of humiliation against children in education.
- On July 1, 2013 the [Act Mandatory Reporting Code Domestic Violence and Child Abuse](#) came in force. The law provides that organizations and independent professionals in the sectors of education, health, childcare, social support, sport, youth care and justice should have a reporting code and should promote its use. The reporting code is a road map explaining how professionals should deal with the detection and reporting of domestic violence and child abuse.

For more information (in Dutch), see [here](#)

## 5. National Policy Programmes on youth

- Programme: [Academic Youth Laboratories](#). ZonMw is financing six academic youth laboratories that are committed to develop knowledge for the youth sector. The laboratories result in products and interventions that benefit the strengthening of the (former) Centres for Youth and Families, the (indicated) youth care and youth mental health services and/or a coherent chain of care. From 2010 to 2014, the focus was on research and development. In the period 2014 to 2016, dissemination and use of results are the spearhead of the workshops. Budget: 9.325 million.
- Programme: [Academic Laboratories Transformation Youth](#). This programme supports the transformation of the youth care with 12 academic laboratories. In September 2015 the first workshops were launched. Duration: 2014-2020. Budget: 6.3 million.
- Programme: [Working effectively in the youth sector](#). The mission of this programme is to increase, compile and disseminate knowledge on promoting of the psychosocial development of children and adolescents that is useful for the sectors youth health, local preventive youth policy end/or customers on the cutting edge of youth care/youth mental health care/mentally disabled youth. Duration: 2012-2019. Budget: 21.145 million.
- Programme: [Longitudinal effect monitor Youth Care Plus](#). The programme has been developed on behalf of the Ministry of Health, Welfare and Sports, directorate of Youth with input from relevant organizations. Goal is to identify the progress of the Youth Welfare Plus and to stimulate the quality of the Youth Care Plus. Duration: 2011-2018. Budget: 2 million.
- [Priority Medicines for Children](#) (PRIOMEDCHILD) is a European association of nation research funding to finance research into medicines for children. ZonMw is the coordinator of this consortium. The aim of this cooperation is to strengthen and improve research into medicines for children. Duration: 2009-2018. Budget: 3 million.
- The programme [Youth Health Care Guidelines 2013-2018](#) should lead to further professionalization and standardization of Youth Health Care. This is done through the development and revision of guidelines, collaboration guidelines and products that support the implementation of guidelines. Duration: 2012-2018. Budget: 6 million.
- Programme: [Sport Impuls Youth in low-income neighbourhoods](#). Various studies have shown that participation in sport by young people from families with low incomes remains. Goal of the Sport Impuls is to promote youth up to 21 years to achieve long-term regular exercise. Duration: 2014-2016. Budget: 4.7 million. A similar program, for reducing obesity in children, is [Sport Impuls Sporty at Weight](#). Duration: 2013-2016. Budget: 1.9 million.

## **6. Budget / Public expenditure allocated to youth**

### National level

At a national level the following ministries are involved in youth policy: the Ministry of Health, Welfare and Sport, the Ministry of Social Affairs and Employment, the Ministry of Education, Culture and Science and the Ministry of Security and Justice. Because four ministries are responsible together for all youth related policies, the public expenditure allocated to youth is hard to define.

### Local level

Municipalities are at liberty to choose how they are going to spend their funding on youth. Therefore, the expenditure differs between municipalities. Because of the transition, municipalities now have more budget for youth help and care, but the idea is that fewer costs are incurred by working preventively.

## **7. European Dimension of youth policy**

The ministry of Health, Welfare and Sport is the ministry to contact for international relations and organizations. Under the authority of the ministry, the Netherlands Youth Institute carries out several international activities and act as the Dutch correspondent for the EKCYP, the European Knowledge Centre on Youth Policies of the Council of Europe and the European Commission.

### **7.1 Council of Europe.**

The Netherlands has a special embassy, the Permanent Representation at the Council of Europe in Strasbourg. At the head of it is an ambassador, participating in the Intergovernmental Consultation on behalf of the Dutch government. This may include instructions from The Hague.

The Youth Directorate of the ministry of Health, Welfare and Sport disseminates the information on the youth programmes of the Council of Europe to all relevant Dutch organizations in the field.

### **7.2 European Union.**

#### **7.2.1 Implementation of the Youth in Action programme**

The European subsidy program Youth in Action funds international group exchanges for young people, international volunteering and other international youth projects for youngsters from 13 to 30 years of age, including seminars and networking activities. Youth in Action also provides opportunities for international training and meetings on cooperation and knowledge exchange between volunteers and professionals in the youth sector. The programme ran from 2007 to 2013 and is currently part of the Erasmus Plus programme..

The Netherlands Youth Institute has studied the impact of Youth in Action. The study shows that participation in Youth in Action has impacts in several areas, both in young people, project managers and organizations. After the programme, European awareness of young people is increased, young people believe that their chances on the labour market are increased and they have grown in their personal development and skills. You can find the study (in Dutch) [here](#).

### 7.2.2 Follow up of the EU Youth Strategy (2010 – 2018) on the national level

[Erasmus+](#) is the European Commission's Programme for education, training, youth and sport for the period 2014-2020. As an integrated programme, Erasmus+ offers more opportunities for mobility of students, young people in out of school settings and staff (teachers and youth workers) and cooperation across the education, training and youth sectors and is easier to access than its predecessors, with simplified funding rules and a structure which aims to streamline the administration of the programme.

Erasmus+ replaces several previous EU programmes, covering all sectors of education: the Lifelong Learning Programme which had four sub-programmes – Erasmus (higher education), Leonardo Da Vinci (vocational education), Comenius (school education), Grundtvig (adult education) – Youth in Action, and five international programmes (Erasmus Mundus, Tempus, Alfa, Edulink and the programme for cooperation with industrialized countries). For the first time, Erasmus+ also offers EU support for sport, particularly at grassroots' level.

The grand programme Erasmus+ is carried out by two national agencies: the National Agency Erasmus+ Education & Training and the National Agency Erasmus+ Youth. EP-Nuffic, CINOP and the Netherlands Youth Institute together form the National Agencies, commissioned by the Ministry of Education, Culture and Science and the Ministry of Health, Welfare and Sport.

[Eurodesk](#) is an international non-profit association created in 1990. As support organization to the Erasmus+ programme (2014-2020) Eurodesk is one of the most comprehensive and most accessible source of free youth information about international learning mobility opportunities. As of today, Eurodesk is present in 34 countries. In these countries, Eurodesk Centres help multipliers in their work to carry out Eurodesk's mission: 'to raise awareness among young people on learning mobility opportunities and encourage them to become active citizens.' The Dutch Eurodesk Centre is [Go-Europe](#).

The [European Youth Portal](#) offers European and national information and opportunities that are of interest to young people who are living, learning and working in Europe. It gives information on eight main themes, covers 34 countries and is available in 28 languages.

From January 1 to June 30, 2016, the Netherlands for the twelfth time presides over the Council of the European Union. Priorities are: a strategic agenda for the EU in times of change, job creation through innovative growth and connect to social actors. During the EU presidency, the Netherlands chairs the Council meetings and takes the lead in negotiations between Member States. The Netherlands also promotes the interests of the Member States in negotiations with the other European institutions on new legislation.

The Dutch Youth Council, together with the Ministry of Health, Welfare and Sport and the Netherlands Youth Institute is involved in a large-scale European project, the [Structured Dialogue](#). The Structured Dialogue is a European initiative involving all Member States in a dialogue between young people and policy-makers. This comprises extensive consultations with young people about different themes, which are processed in a report to be discussed at a European Youth Conference. The goal of this project is that both Europe and local parties develop youth policy together and that youngsters and policy makers exchange knowledge on youth policy on a European level.

Every half year there is a different theme for the Structured Dialogue. In this cycle (January 2016-July 2017), the theme is “Ready for life, ready for society”. At the next EU Youth Conference, the frames will be outlined for the next two conferences. Because of the Dutch EU presidency, the Youth Conference will take place in Amsterdam and is organized by the Dutch Youth Council, together with the Ministry of Health, Welfare and Sport.

## 8. Further sources of information on youth policy in the Netherlands

- <http://www.youthpolicy.nl/>
- <http://www.nji.nl/Jeugdwet>
- <http://www.youthpolicy.nl/en/Download-NJi/Publicatie-NJi/Children-and-youth-support-and-care-in-The-Netherlands.pdf>
- <http://statline.cbs.nl/Statweb/?LA=en>
- <http://jeugdmonitor.cbs.nl/en-GB>
- <http://www.vluchtelingenwerk.nl/english>
- <https://www.coa.nl/en/>
- <https://www.government.nl/>
- <https://vng.nl/>
- <http://www.vooreenveiligthuis.nl/>
- <http://www.dekinderombudsman.nl/241/english/>
- <http://www.kinderrechten.nl/>
- <http://www.njr.nl/>
- <http://www.jongerenvertegenwoordigers.nl/>
- <https://www.movisie.com/>
- <http://www.zonmw.nl/en/>
- <http://www.nji.nl/nl/Wet---en-regelgeving/Licht-verstandelijk-beperkte-jeugd-Beleid-Ontwikkelingen-Participatiewet>
- <https://www.government.nl/topics/care-and-support-at-home/contents/social-support-act-wmo>
- <https://www.rijksoverheid.nl/onderwerpen/passend-onderwijs>
- <http://www.ohchr.org/en/professionalinterest/pages/crc.aspx>
- [http://wetten.overheid.nl/BWBR0002656/2013-01-01#Boek1\\_Titeldeel14\\_Afdeling1\\_Artikel247](http://wetten.overheid.nl/BWBR0002656/2013-01-01#Boek1_Titeldeel14_Afdeling1_Artikel247)
- <https://www.rijksoverheid.nl/onderwerpen/huiselijk-geweld/inhoud/meldcode>
- <http://www.nji.nl/Beleid-Wet--en-regelgeving>
- <http://www.zonmw.nl/nl/programmas/programma-detail/academische-werkplaatsen-jeugd/algemeen/>
- <http://www.zonmw.nl/nl/programmas/programma-detail/academische-werkplaatsen-transformatie-jeugd/algemeen/>
- <http://www.zonmw.nl/nl/programmas/programma-detail/effectief-werken-in-de-jeugdsector/algemeen/>

- <http://www.zonmw.nl/nl/programmas/programma-detail/longitudinale-effectmonitor-jeugdzorgplus/algemeen/>
- <http://www.zonmw.nl/nl/programmas/programma-detail/priority-medicines-for-children/algemeen/>
- <http://www.zonmw.nl/nl/programmas/programma-detail/richtlijnen-jeugdgezondheidszorg-2013-2018/algemeen/>
- <http://www.zonmw.nl/nl/programmas/programma-detail/sportimpuls-jeugd-in-lage-inkomensbuurten/algemeen/>
- <http://www.zonmw.nl/nl/programmas/programma-detail/sportimpuls-kinderen-sportief-op-gewicht/algemeen/>
- [http://www.nji.nl/nl/Download-NJi/Impact\\_van\\_Youth\\_in\\_Action\\_rapport\\_2011.pdf](http://www.nji.nl/nl/Download-NJi/Impact_van_Youth_in_Action_rapport_2011.pdf)
- <http://www.erasmusplus.nl/welcome-at-the-website-of-the-dutch-national-agency-erasmus>
- <http://eurodesk.eu/>
- <http://www.go-europe.nl/>
- <http://europa.eu/youth/splash>
- [http://ec.europa.eu/youth/policy/implementation/dialogue\\_en.htm](http://ec.europa.eu/youth/policy/implementation/dialogue_en.htm)