The contemporary state of youth care: Impact of the decentralization on youth care employees

How the decentralization of youth care influenced how youth care employees carry out their work and how they cope with the changes in their working conditions

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Preface
Dear reader,

In front of you lies my master thesis ‘The contemporary state of youth care: Impact of the decentralization on youth care employees’, which I have written to finish my masters’ degree in Public Administration at the University of Twente. This research brings together knowledge I have gathered during four years of studying at Saxion University of Applied Sciences and one and a half year at the University of Twente. Writing this thesis has been a fun, interesting, but at times also very challenging experience. Due to the effort put into this, I genuinely hope this thesis will pique the interest of you as a reader.

I want to thank everyone who supported and helped me in any way to finish this thesis, but also during my time as a student. I want to thank my family, friends, fellow students and of course all professors and teachers at the university that made my time being a student a pleasant experience. I would also like to thank all the hardworking employees working at various youth care organizations who took their time to help me in this research. Regardless of their busy work schedules they took their time to help me with this research, not only for the interviews, but also to provide additional information when I needed this. Lastly I want to thank Dr. Meershoek for his personal guidance as a first reader of my thesis, and Dr. Svensson who helped me as the second reader of my thesis.

Christian Gervink

Enschede, April 2018
Abstract
Youth care organizations and municipalities were faced with new challenges to cope with after the decentralization of youth care in 2015. The aim of this research has been to describe these challenges from the perspective of the people working in youth care. To describe the contemporary situation, the book ‘Jeugdhulp & Jeugdbeleid’ by Clarïjs (2016) has been applied, supplemented by a wide variety of other sources. The theories applied in this research are Street-level bureaucracy as described by Lipsky (2010), supplemented by Street-level leadership by Vinzant & Crothers (1998). To research the field, seven interviews have been conducted: Four interviews at youth care organizations, one at a social neighbourhood team and two at municipalities. These interviewees hold various positions within youth care. In general, they hold managerial positions in which they are also directly involved with clients in their daily work.

The first researched aspect entails the influence of the decentralization on the working conditions of youth care employees. In general, youth care employees had perceived an influence in their working conditions due to the decentralization. These influences vary between organizations, however, the main influence perceived by all organizations is related to the administrative burden. The perceived increase, or when administration did not decrease even though this was contemplated, had negatively influenced the working conditions of youth care employees. In the second research question, similar findings are found related to the (perceived) workload. Youth care employees felt an increase in the workload due to the added administrative burden. In addition, there is also the influence of the ‘network approaches’ that are now being applied. The network approach is a method of solving situations which actively involves the network of the client. Network approaches are designed to result in durable solutions by enabling the network to solve their own future problems. It should be noted that network approaches, even though they add to the workload, are considered to be positive due to their effectivity on youth care related problems. In the third research question, the focus has been on how youth care clients are affected by the decentralization. The main findings of this research that influence the clients are the application of network approaches, and the shortening of trajectories. However, even though they are shorter, clients stay in contact with youth care organizations after they went through their trajectories. This way, clients are less likely to see their situation escalate after their trajectories. Lastly, in the explanations chapter there is emphasis on how the youth care employees deal with the changes due to the decentralization. This research concludes that the following coping mechanisms can be found in youth care: rationing and routinization. Routinization is due to the fact that the trajectories are being shortened, and rationing because youth care is aiming to provide youth care to the clients that need it the most.
Chapter 1. Introduction, background and research questions

1.1. General introduction

Decentralization (and reorganization) of governmental organizations in the Netherlands have led to a new system of youth care. Since the decentralization, youth care is based on the basic assumption that there should be: ‘One family, one plan, one director’ for each client and their problems (De Vries & Wolbink, 2017). The decentralization was implemented because the previous situation of youth care was considered to be ‘inefficient and ineffective, sometimes with dire consequences for its’ clients’ (De Vries & Wolbink, 2018). The main change that occurred, is that municipalities are now responsible for youth care tasks previously conducted by provincial and central government. These youth care tasks are mentioned in the new act called the ‘Youth act’ (Jeugdwet) (Rijksoverheid, 2016). This act describes how municipalities are now responsible for youth care and how this is regulated. In order to make sure municipalities are capable of performing these tasks, 42 regions were formed to assist them. These regions are inter-municipal platforms that combine knowledge and expertise to assist individual municipalities in handling their new tasks (VNG, 2017). However, even though various precautions were taken to achieve a smooth transition, the reality is that the transition faced, and still is facing, many (unforeseen) difficulties. The aim of this research is to describe these difficulties from the perspective of the people working in youth care. These are the youth care employees at the youth care organizations, and the public servants at the municipalities. Appendix 10.3 gives a more detailed overview of the interviewees and their positions.

Since the decentralization there have been various negative reports in the media about youth care. Most of these reports are about the administrative problems and the long waiting lists (Steenbergen & Vriesema, 2017). An example of what is occurring, is that youth that require immediate care for their serious (mental) situation, are not able to get this properly on time. As a result, problems can escalate and turn into a crisis situation. Consequently, the problems related to crisis situations in youth care are being reported on. Media report that more youth end up in crisis situations leading to organizations that offer crisis care not being able to deliver the care to every client (Dekker, 2015). The reported problems within youth care form the motivation of this research.

The aim of this research is to describe the influence the decentralization of youth care had on employees of youth care related organizations. These influences will be described from an independent perspective, based on interviews held with youth care employees. Due to the significance of the interviews and the significance how the field perceives the decentralization, the main theory applied is street-level bureaucracy. By making use of this theory, the changes that occurred due to the decentralization on the working process of the street-level bureaucrats is portrayed, from the perspective of the street-level bureaucrats (which are the youth care employees). To start out this research, first a general description will be made of the contemporary situation of youth care, describing the most important aspects of the decentralization and the youth act.

The supposed negative effects of the decentralization on youth care are the fundamental reason for this research. The main goal is to describe whether these claims are true, and whether this is due to the decentralization. To investigate this, research questions have been formulated to help assist describing the contemporary situation of youth care. Ultimately, by answering these research questions conclusions will be drawn at the end of this research.
1.2. Background

This research is based around the ‘transition’ of youth care related tasks to the municipalities. In order to achieve this transition, various tasks from provincial and central government were decentralized to the municipalities. However, these changes required, and still require, time and effort to be implemented properly. The time between the implementation of the youth act and the moment when everything is working as intended, is referred to as the transformation. In this background section the most important aspects of the transition will be elaborated, including the current municipal responsibilities, the implementation of network approaches and an explanation of the youth act.

1.2.1. Municipal Responsibilities

The municipal responsibilities describe how municipalities have to execute their youth care related tasks as described in the youth act. The basic assumptions the youth act has for municipalities, is that they have to address the following in their policies:

1. Enable, recover and strengthen the problem solving capacities of children, youth, their parents and social living environment;
2. Advancing the capacities of parents and their social living environment to help raise their children;
3. Prevention and early detection;
4. Offering the right form of care, tailored to fit the situation at hand;
5. Effective and efficient cooperation with families.

In addition, an enumeration of tasks and responsibilities for the municipalities can be made. This enumeration is based on the book ‘Jeugdhulp en Jeugdbeleid’ by Clarijs (Clarijs, 2016) and the website of the Dutch Youth Institute (NJI, 2017). The enumeration, shown below, gives a more clear overview of what the municipalities are supposed to do in relation to youth care.

1. Strengthening the pedagogic environment of families, neighborhoods, schools and daycares;
2. Accommodating a qualitatively and quantitatively sufficient supply of youth care;
3. Advising in the recommended use of applying a specific form of youth care;
4. Advising the professionals about the worries related to a child;
5. Advising children and youth about their questions and problems;
6. Requesting research at the child protection services when a child protection measure is required;
7. Compensating the restrictions in self-sufficiency and the civil participation of children and youth;
8. Accommodating a sufficient amount of certified institutions that are relevant to youth care;
9. Accommodating the necessary measures to prevent child abuse;

To make sure that the municipalities are capable to carry these responsibilities, inter-municipal cooperation exists. Municipalities are expected to work together if it would increase effectivity and efficiency of their performance (Rijksoverheid, 2016). However, this specific article does not imply that there is an obligation for municipalities to cooperate. The obligation for municipalities to work together can be found in the explanatory memorandum (Rijksoverheid, 2013). Inter-municipal cooperation is a necessity for municipalities to cope with the complexity of the youth care tasks they are now mandated to carry out.
1.2.2. Civil participation and network approaches

Since the decentralization employees of youth care organizations are expected to apply network approaches. Whenever a client gets into youth care, not only their personal situation will be assessed, but also the situation of their network (Municipality of Hengelo, 2017). The aim of network approaches is to take the capacities of the clients and their network as a starting point for solving situations (Clarijs, 2016, p. 153). The following example illustrates how network approaches work in practice: A child gets into youth care by getting in touch with a social neighbourhood team. The client is struggling with behavioural issues, resulting in problems at school, but also at home. In addition, his father is struggling with an alcohol addiction. Previously, the aim was to get the child back on track, while informing the father of his influence on the situation. The effect on the father was quite limited in the previous situation. When applying a network approach, the aim is also to get the child back on track, while also proactively pressuring the network of the child to do their part. In this case, this would mean informing the father of options for rehabilitation and raising awareness of his bad influence on the situation of the child (Nieuwe Organisatie Almelo, 2017). Network approaches result in durable solutions, due to the fact that it enables the network of the client to solve future problems on their own, because they become aware of their role. Network approaches are closely related to the principles of civil participation. Civil participation is however, a broader term that already existed for a longer time. Civil participation is a broad term that entails the involvement of citizen cooperation in public policy. Network approaches are an example of civil participation, because it enables to network of the client to solve future problems on its own.

1.2.3. The Youth Act

One of the main aspects of the decentralization, is the implementation of the youth act. The aim of this section is to elaborate in detail what the youth act is. First a short introduction will be given to the youth act, followed by a table sketching the contemporary and previous distribution of responsibilities.

In the terminology, the ‘youth act’ is the common term to refer to: ‘The law consisting of rules regarding the municipal responsibility for prevention, support, help and care for youth & parents’ (Rijksoverheid, 2018). This term can be explained as follows: With youth, clients between the ages of 0 to 18 are meant. However, any form of youth care that is being applied, can be extended to the age of 23 (if it does not fall under any other law), whereas any judicially related measure can be extended indefinitely. Besides youth, the youth act is also meant for parents that need guidance in the development of their children (Stimulanz, 2017). Prevention, support, help and care are all the aspects the youth care related organizations have to take care of. Finally, the municipalities have responsibility in guaranteeing that youth get the care they need according to the youth act.

Before the youth act was implemented, there were a couple of concerns that had to be solved. These concerns were as following: The youth care system was considered to be too fragmented, cooperation with families was inadequate, pressure on specialized care was too high, deviant behavior was too quickly medicalized, costs were constantly rising and inadequate treatments led to cases of ‘overtreatment’ and ‘undertreatment’. The change of the system was a method to realise a specific switch in youth care, to help improve the situation and solve these concerns (Movisie, 2015). When the youth act was implemented, a couple of goals were defined that would solve the concerns. These goals were defined as following:
● More prevention, more responsibilities, making more use of self-reliance of the social networks of youth and their parents;
● Letting children/youth participate according to their ability to do so. While in the meantime normalizing their situation and not medicalizing too easily;
● Quicker tailored youth care, close to the home of the youth, to reduce having to resort to specialized forms of care;
● Better cooperation with the families. Having 1 family, with 1 plan and 1 administrator;
● More space for the professionals and reducing the regulatory pressure (Movisie, 2015).

1.2.4. Responsibilities of the Youth Act: Before and after the transition
The youth act brings together a variety of acts that existed beforehand and combined them into one act. With this, all of the responsibilities have been transferred to the municipalities (Movisie, 2015). To give an impression of this, Table 1.1 has been added to illustrate the contemporary situation and the previous situation of youth care. All the tasks mentioned in the column ‘contemporary situation: after the decentralization’ are now responsibilities of the municipalities.

<table>
<thead>
<tr>
<th>Situation before the decentralization</th>
<th>Contemporary situation: after the decentralization</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Municipalities</strong></td>
<td><strong>Provinces</strong></td>
</tr>
<tr>
<td>● Development support</td>
<td>● Development support</td>
</tr>
<tr>
<td>● Youth Health care</td>
<td>● Youth Health care</td>
</tr>
<tr>
<td>● Light ambulatory care</td>
<td>● Light ambulatory care</td>
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<tr>
<td></td>
<td>● Ambulatory care</td>
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<tr>
<td></td>
<td>● Open Residential Care</td>
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<td></td>
<td>● Nursing care</td>
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<td></td>
<td>● Day Treatment</td>
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<tr>
<td></td>
<td>● Urgent care</td>
</tr>
<tr>
<td></td>
<td>● Closed youth care (till 2013)</td>
</tr>
<tr>
<td></td>
<td>● Youth protection and Youth reclassification</td>
</tr>
<tr>
<td><strong>The State</strong></td>
<td><strong>Zvw (Health Insurance Act)</strong></td>
</tr>
<tr>
<td>● Closed youth care (till 2013)</td>
<td>● Youth mental-health care (Jeugd-GGZ)</td>
</tr>
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<td></td>
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<tr>
<td><strong>AWBZ (Dutch Special Healthcare law)</strong></td>
<td></td>
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<tr>
<td>● Personal Budgets for youth</td>
<td></td>
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<tr>
<td>● Youth – (L)VB (for (minor) mental disorders)</td>
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</tr>
</tbody>
</table>

In addition to the execution of these tasks by the municipalities, there are also responsibilities regarding the purchasing of youth care and administration (Municipality of Hengelo & Enschede, 2017). The municipalities are now also responsible for these two aspects of youth care, but are not mentioned as new specific tasks. These aspects deserve to be mentioned because in practice, they are considered to be very important but also time-consuming. Without a properly working administration, which has purchased the right amount of youth care, youth would not be able to access the care they need. ‘Without a properly working administrative system, youth care providers cannot get paid, when they do not get paid, institutions fall, without institutions, youth care employees cannot do their work, and thus cannot offer care to the ones in need’ (Municipality of Hengelo, 2017).
1.3. Problem statement and Research questions

1.3.1. Problem statement
The decentralization of healthcare related tasks, including youth care, strived to improve the system of youth care. However, after the decentralization, complications seemed to occur. People working in youth care and the media reported negatively about the current state of youth care.

1.3.2. Central research question
To give direction to this research, the following central research question has been formulated to lead this research:

‘How has the decentralization of youth care changed the ways that youth care employees are dealing with their clients’

1.3.3. Research questions
1. How does the decentralization of youth care influence the working conditions of youth care employees?
2. Does the decentralization of youth care influence the (perceived) workload of youth care employees?
3. How does the decentralization of youth care change the ways that youth care employees are dealing with their clients?
4. How can the changes in the ways of dealing with clients by youth care employees due to the decentralization be explained?

Each of the chapters in this research are dedicated to answer one of the research questions. The first research question is answered in chapter 4: Decentralization and working conditions, followed by the next research question in chapter 5: Decentralization and workload. In chapter 6: Coping with clients, research question 3 will be answered and lastly chapter 7: Explanations is dedicated to answering the last research question. Finally, chapter 8: Conclusions & Discussion is dedicated to answering the central research question, making use of all the regular research questions.
Chapter 2. Theoretical Framework

In this chapter, the theory used in this research will be explained in detail. First, street-level bureaucracy will be explained, as described by Michael Lipsky, using his book ‘Street-level Bureaucracy, Dilemmas of the individual in public services’ (Lipsky, 2010). Due to the significance of coping mechanisms in this research, an individual section is dedicated to this part of the theory. Next, street-level leadership is explained, which will serve to expand on the theory of street-level bureaucracy.

2.1. Theory

2.1.1. Street-level Bureaucracy

The main theory used in this research is street-level bureaucracy. In short, street-level bureaucracies are public service agencies that employ a significant number of ‘Street-level bureaucrats’ in their workforce. The street-level bureaucrats are public service employees that directly interact with their clients who are citizens (Lipsky, 2010). In this research, street-level bureaucrats are the healthcare employees that work in (governmental) organizations related to youth care. In this section, street-level bureaucracy will be described as follows: First, the street-level bureaucrats will be described using three aspects, followed by the working conditions they typically experience. Both of these will show the difficulties street-level bureaucrats face in their daily work. In order to cope with these difficulties, street-level bureaucrats make use of ‘coping mechanisms’ which will be elaborated at the end of this section.

In his theory, Lipsky defines Street-level bureaucrats using three aspects, which are as following: ‘Street-level bureaucrats are people employed by government who: 1) are constantly called upon to interact with citizens in the regular course of their jobs; 2) have significant independence in job-decision making; and 3) potentially have extensive impact on the lives of their clients.’ (Lipsky 1969). In this section, the nature of ‘street-level bureaucrats’ will be elaborated using these three aspects (Later, five aspects that influence the working experience of street-level bureaucrats will be elaborated as well). The first aspect is about how street-level bureaucrats interact with citizens in their daily job, in which they represent the government. In doing so, they work with non-voluntary clients that are from a different primary reference group than themselves. In short, this means that they tend to work with clients that live in entirely different living conditions as themselves. Street-level bureaucrats tend to be middle-class adults, whereas their clients tend to be from lower socio-economic classes. There is a wide range of street-level bureaucrats working for different governmental entities which also explains how they differ from their own reference groups: There are policemen who have to deal with offenders and suspects in their work, there are teachers teaching their pupils and lastly, relevant for this research, there are the healthcare professionals working with youth in need of care (Lipsky, 1969).

The aspect of ‘significant independence in job-decision making’ refers to the discretionary authority of street-level bureaucrats. Street-level bureaucrats have significant capacities to decide the extent of time and resources they spend on each individual case (Lipsky, 2010 p. 13). This discretion manifests itself in various ways, such as: the punishment a judge imposes on a convict, the teacher who decides whether a student gets detention, or whether a policemen gives a fine or decides not to. According to Lipsky, the extent to which prison guards file reports on ‘dirty looks’ by the inmates is perhaps the most illustrative example of discretion. What defines a dirty look, making
someone guilty of ‘silent insolence’ and what does not? Discretion is dependent on a very subjective judgment made by the street-level bureaucrat and can be made in several ways (Lipsky, 2010 p. 13).

Street-level bureaucrats deploy their capacities according to their own discretion for various reasons. Ideally, discretionary decisions are made in order to get the best results for the clients. However, there are various constraints for street-level bureaucrats related to resources, requiring discretionary decisions to be made. Lipsky describes these as the ‘problem of resources’ (Lipsky, 2010 p. 29), street-level bureaucrats are often not able to do what is the very best for the client, due to a lack of resources. There is a wide range of resources street-level bureaucrats could require to properly serve their clientele, ranging from time and information to monetary funds and assets. Lipsky uses a couple of examples to illustrate how a lack of resources can result in less desirable situations. A notable example is the overcrowded classroom: Teachers are not able to give the personal attention each student requires when there are too many students. In addition, more time is spend to maintain order than for learning activities. This example shows how a lack of funds/assets (more teachers/classrooms) results in an undesirable situation. In this example, the teacher has to find a way to still lecture his students as best as he can. Another example can be made to illustrate a lack of time/information from the perspective of the youth care sector: Every client in youth care is an individual with a unique personality and life experiences. However, youth care employees do not have the time to perfectly align their trajectories to each individual client. In order to cope with this, such individuals get processed from ‘people’ into ‘clients’, assigning them into categories with corresponding generalized trajectories (Lipsky, 2010 p. 59). Further explanation of how street-level bureaucrats deal with a lack of resources will be given in the later section on coping mechanisms.

The final aspect of street-level bureaucrats is their potential extensive impact on the lives of their clients. Individuals who rely on governmental organizations a lot are impacted more significantly in their lives by street-level bureaucrats than people who do not rely on them (Lipsky, 1969). In general, these people are more likely to be from minority backgrounds and/or a lower socioeconomic class. This is also the case for youth in youth care, in which mainly youth from lower socioeconomic classes are present (Municipality of Hengelo, 2017). The impact of youth care employees on their clients is naturally very significant indeed: The difference between a good and bad treatment for a client in youth care could be the difference between getting their lives back on track again or having a situation escalate. The impact of a street-level bureaucrat can also be explained using a more obvious example. A teacher can decide whether a student gets detention, or gets an alternative punishment (which is also an example of a discretionary decision). The difference between these two options could have an impact on the student and the relationship between the student and the teacher.

In addition to the aforementioned three aspects defining the street-level bureaucrats, Lipsky also defines a fivefold of working conditions they typically experience:

1. **Resources are chronically inadequate relative to the tasks employees are asked to perform;**
2. **The demand for services tends to increase when the supply increases;**
3. **Goal expectations for the agencies in which they work tend to be ambiguous, vague, or conflicting;**
4. **Performance oriented toward goal achievement tends to be difficult if not impossible to measure;**
5. *Clients are typically non voluntary; partly as a result, clients for the most part do not serve as primary bureaucratic reference groups* (Lipsky, 2010 p. 27).

These five aspects are fairly closely related to the three aspects that define street-level bureaucrats, and overlap one another in several ways. For this reason, some aspects that have already been described will not be explained in detail again. It should be taken into consideration that these five aspects are not always present in every street-level bureaucracy. In his research, Lipsky describes the following exception as an example: A small city of which the inhabitants’ ethnicity and political views are highly homogeneous is likely to be able to provide a relatively full range of social services to its recipients. In addition, these services are also quite likely to be clear objectives, due to the like-mindedness of its’ inhabitants (Lipsky, 2010 p. 27).

The first aspect relates to the lack of resources street-level bureaucrats are constantly dealing with. The services street-level bureaucrats are expected to deliver tend to exceed the amount of services they are capable of properly delivering (Lipsky, 2010, p. 29). This phenomenon has already been elaborated more clearly earlier in this section. However, the second aspect shows a phenomenon that issues still occur when the supply increases, namely that demand also increases. This happens due to the fact that demand is not only fueled by demanders, but also by encouraging suppliers (Lipsky, 2010 p. 27). A critical note to this phenomenon is that street-level bureaucracies should not hold back on increasing their supply if necessary.

The third aspect refers to the ambiguity of the expectations that street-level bureaucrats are supposed to achieve. This is due to the fact that street-level bureaucrats work in organizations that tend to have ambiguous and conflicting goals (Lipsky, 2010 p. 40). The third aspect can be dissected into three main conflicting sources:

1. **Client-centered goals conflict with social engineering goals**: This is what occurs if the worker’s concern for the client conflicts with what is expected from the organization from the perspective of the general public. Lipsky makes use of an example of a police-officer: The general public expects them to maintain law and order but the agency demands norms of fairness and due process (Lipsky, 2010 p. 41).

2. **Client-centered goals conflict with organization-centered goals**: This mainly relates to the difference between the clients that require and what the organizations wants to deliver. This tension mainly exists due to the fact that clients expect specifically tailored services, while the organization has to mass process many clients (Lipsky, 2010 p. 41).

3. **Goals conflict with the role expectations of street-level bureaucrats**: This refers to the fact that the goals of street-level bureaucrats are communicated through multiple conflicting reference groups (Lipsky, 2010 p. 41).
The fourth aspect refers to the near impossibility to measure performance of street-level bureaucrats. Job performance of street-level bureaucrats is highly politicized and not based on market transactions such as the majority of non-governmental occupations. In order to measure the job performance of street-level bureaucrats, there are too many variables to take into account to make a reliable and realistic evaluation (Lipsky, 2010 p. 40). An important matter to take into account when assessing street-level bureaucrats’ job performance, is their reasoning when taking a course of action. For instance, if a youth care employee decides to implement a trajectory with a 50% success rate, how should that be interpreted? Would this be a bad choice due to the 50% fail rate, or a good choice because it is possibly the highest success rate achievable? This question can also be linked towards another hypothesis: What would have happened if no trajectory had been implemented? Lipsky states that it is difficult to assess to what would have happened to the clients of the street-level bureaucrats had they not intervened (Lipsky, 2010 p. 40).

Lastly, there is the fifth aspect of the typically non-voluntary clients. There are two general reasons why clients are non-voluntary. First there is the obvious one for coercive organizations such as police departments and their ‘clientele’. The second is that street-level bureaucracies generally supply services that cannot be obtained elsewhere (Lipsky, 2010 p. 54). The non-voluntary aspect does not imply that clients are forced to make use of the services of street-level bureaucracies. However, what it does mean is that their situation requires them to do so. The second part of this aspect refers to the fact that clients are normally not from the same reference groups as the street-level bureaucrats, which has already been elaborated more clearly in the previous section.

**Coping mechanisms**

The previous section shows how the work of street-level bureaucrats is characterized by various difficulties they face. Naturally, this sketches a fairly negative view of the working experience of street-level bureaucrats. However, to deal with these difficulties street-level bureaucrats develop various patterns of practice to cope with their situation. In this research, these mechanisms will be described as ‘coping mechanisms’. Coping mechanisms are patterns of practice used by street-level bureaucrats to cope with their situation and meet the requirements they are held up against (Lipsky, 2010 p. 81). In short, the coping mechanisms exist for the street-level bureaucrats to cope with working under pressure, work related stress, the ‘never-ending demand for (public) services’ and deficient resources. Coping mechanisms are used to align the workload with the capacities of the street-level bureaucrat. Examples of coping mechanisms and how they can be used will be given in this section, to further elaborate the concept.

In general, street-level bureaucrats routinize their work. This routinization of processes makes them able to simplify their otherwise complex tasks (Lipsky, 2010 p. 83). Various forms of routinization exist and are applied in various ways - but most notably, they are used to classify clients into certain groups. By classifying people, a routine method of approach can be used, instead of tailoring individual approaches for every individual case. For instance, there are routine approaches to handle the troublemaking children at school, the nagging people at the service desk, the overreacting family of patients in the hospital, et cetera (Lipsky, 2010 p. 87). In case of youth care employees, personally tailored approaches can be considered a necessity to help youth return to a safe situation. However, this does not mean that standardization does not happen within the youth care sector. The results of the interviews will tell to what extent the standardization of processes exists in youth care and the possible influence of the decentralization on this.
Another coping mechanism which is usually deployed in street-level bureaucracies is the rationing of services (which will be referred to as ‘rationing’). In theory, there is no real limit to the demand of public goods. However, in practice there obviously has to be, because agencies can only offer a limited amount of resources. This means that organizations have to find ways to ration the supply of services available (Lipsky, 2010 p. 87). In order to achieve this, street-level bureaucracies should find ways to reduce the demand of their services. A couple of methods to do this are: Lowering accessibility, ‘queuing’ people (let people wait for service), privileging clients and ‘creaming’. To elaborate, each of these will be given an example: Lowering accessibility is the first method, which makes it more difficult for an individual to apply for the services, such as application forms consisting of many requirements. Queuing people is what the name implies, an individual has to get behind in the queue to apply for the service. Only people who can afford to wait, will be able to apply for the service. Third, there is the method of privileging clients: When a street-level bureaucrat has the resources to give a select group of clients a more favourable service, they will give it to the clients they favour. These could be acquaintances, or clients who appeared to be very polite at first sight. Lastly, there is the method of ‘creaming’. Creaming usually occurs when a street-level bureaucrat has to meet, for instance, a minimum amount of clients processed per day. In order to process this amount more easily, they would choose to service clients that are easier to help. Creaming can also be applied to make work more bearable for youth care employees: If they are able to, they could choose to help the youth in need who are most likely to succeed their trajectories (Lipsky, 2010 p. 107).

Asides from the previous patterns of practice that function to ration services, Lipsky also describes a method that focuses on client cooperation. An example of this would be how the environment in which the street-level bureaucrat operates tends to be a setting of client compliance (Lipsky, 2010 p. 117). There are two examples that illustrate this phenomenon: First there is the court, in which the judge is taking in a powerful position: At the front of the courtroom, in their formal attire and entering the room from a private entrance. The second example is the classroom, which is a bit less notable but still is similar: The teacher stands in front of the room, with each of the students facing them. These settings exist to create a division between the roles each of the individuals have: The street-level bureaucrat doing their job, and the client listening/cooperating. Various other methods exist to increase client cooperation, such as isolating clients from one another and punishing undesirable behaviour (Lipsky, 2010 p. 117). However, due to the fact that all these methods describe the same phenomenon, not all will be described individually here.

The nature of the tasks street-level bureaucrats are confronted with, determines the coping mechanisms they are most likely to use. Clerks at a municipal office use different coping mechanisms than teachers, and teachers use different coping mechanisms than youth care employees. Due to this, one of the goals of this research is to figure out which coping mechanisms are predominantly used by youth care employees. In addition, the influence of the decentralization on these coping mechanisms will be described.
2.1.2. Street-level leadership

Since this research applies street-level bureaucracy so extensively, in addition to Lipsky’s’ work on street-level bureaucracy, Vinzant and Crothers’ book ‘Street-level Leadership’ (1998) has also been consulted. In this book, street-level bureaucracy is explained from the perspective of the street-level bureaucrat (the book handles a ‘worker-centered’ approach). In the book, the focus is on public servants and how they can successfully and effectively meet the challenges of their difficult, complex jobs (Vinzant & Crothers, 1998). Street-level leadership also elaborates the side tasks that emerge for child protection when they decide to take steps to do anything such as starting a youth care trajectory. Child protection employees might have to do quick medical examinations, exchange information with the police, assess dangers of the living environment and such. Amidst all the complexity and pressures, street level employees are expected to achieve the goals of their agency, community and the broader society (Vinzant & Crothers, 1998). The book is written from a leadership perspective, implying that each street level bureaucrat has a form of leadership in their task.

In the book, Vinzant & Crothers provide a model that distinguishes four types of leadership. In this model, two dimensions are portrayed: The outcome dimension, and the process dimension. Both dimensions are continuous, and range from low discretion to substantial discretion. Below, a copy of this model is illustrated in table 2.1.

Table 2.1: Dimensions of Street – level leadership (Vinzant & Crothers, 1998).

<table>
<thead>
<tr>
<th>Substantial Discretion</th>
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<tbody>
<tr>
<td>3. Transformational Leadership</td>
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<tr>
<td>Discretion over outcomes but not process</td>
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<tr>
<td>4. Transformational and Situational Leadership</td>
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<tr>
<td>Discretion over process and outcomes</td>
</tr>
<tr>
<td>1. Administrative procedure</td>
</tr>
<tr>
<td>Little worker discretion</td>
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<tr>
<td>2. Situational Leadership</td>
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<td>Discretion over process but not outcomes</td>
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As seen in the table, there are four distinguishable types of street level leadership. Of the types of leadership it should be noted that higher discretion does not always imply higher levels of leadership by the street-level bureaucrat, it is more of a necessity at these levels. In addition, one individual can apply different forms of leadership in their work, a phenomenon that will become clear in explaining each form of leadership. The first quadrant is the administrative procedure, in which employees exercise little discretion in either the process or outcome. Examples of administrative procedures are grading exercises, paperwork, and other standardized tasks.

The second quadrant is situational leadership, in which a street-level bureaucrat can exercise discretion on how to solve the situation, but the goal is clear (Vinzant & Crothers, 1998). An illustrative example in youth care would be when a social worker is assigned to get an individual into crisis care. The goal is clear, but how to get this done would be up to the social worker. The situation decides which approach works best. When the family of the individual is cooperative, the situation can be solved in a civil manner. However, if the situation is more grim, a more forceful approach might be necessary.
The third quadrant is transformational leadership, in which there is discretion over the outcomes but not the process (Vinzant & Crothers, 1998). In this quadrant, once an outcome has been chosen, the process to reach that outcome is unchangeable. Illustrative examples of this phenomenon mainly exist in police departments. For instance, when a police officer decides that an individual is violating traffic law and has to give this individual a fine, there is one process to follow: Halt the individual and give the fine. If the officer decides that the offence is too minor to take further action, he can decide not to halt the individual and focus on other tasks instead.

Lastly, there is the fourth quadrant ‘transformational and situational leadership’. In this quadrant, the street-level bureaucrat has discretionary competences on both the process and the outcome (Vinzant & Crothers, 1998). This quadrant is most prevalent when a street-level worker is both required to analyze the situation and then decide on what to do. For instance, when there is a notification about a potential victim of child abuse, and a social worker is dispatched to take action. That social worker should first investigate the situation, determine whether intervention is necessary, and also determine the best way to approach the situation. When having to take action within this quadrant, a street-level bureaucrat takes on a high level of responsibility, because at this level, both the pre-planned outcomes and the process has to be justified.

2.1.3. Conclusion of the theory
This chapter described the two theories that are applied to this research: Street-level bureaucracy and Street-level leadership. In applying these theories, the aim is to figure out to what extent coping mechanisms exist, and which are being applied by the youth care employees. To do this, the theory has been taken into consideration in substantiating the questions of the interview. The same has been done to the theory of Street-level leadership, a theory that is being used to determine the level of discretionary capacities by the interviewed youth care employees. Both of the theories will show how the youth care employees cope in the situation of youth care after the decentralization.
Chapter 3. Methodology

The general aim of this research is to determine to what extent the decentralization impacted the ways of working by youth care employees. To describe this impact, first the influence on the working conditions and (perceived) workload will be researched. Thereafter, the aim is to describe how these impacts consequently influence how youth care employees are dealing with their clients. Finally, the aim is to draw conclusions and determine whether the influences that occurred can be attributed to the decentralization.

In the execution of this research, qualitative research methods have been applied. Quantitative sources have been consulted, but only to get an impression of the contemporary situation of youth care. The most relevant use of these statistics in this research, is to establish the representativeness of a sample in Overijssel. The statistics used to determine this, stem from the Central Bureau of Statistics (CBS) in the Netherlands. Apart from this, this research is only based on qualitative research methods: Books, (news) articles and interviews.

The main source of information from the field in this research stems from seven interviews conducted at various youth care related organizations. The aim of conducting these interviews has been to acquire in-depth information from different points of view. This has been accomplished by interviewing employees had different youth care organizations. First, interviews have been held at the municipalities of Hengelo and Enschede. At both of the municipalities public servants were interviewed with administrative, governing and policy-related tasks. An ‘organization’ that is very close to the municipalities (and sometimes can be part of the municipality), is the social neighbourhood team. One of the interviews has been conducted at the social neighbourhood of Almelo, which is part of an overarching entity ‘De Nieuwe Organisatie’. At this organization, the manager of the social neighbourhood teams was interviewed. At this position, the interviewee was not in direct contact with their clients, but did represent the employees that have direct client contact, at the front of youth care. In addition, in prior functions the interviewee did occupy positions with direct client contact.

Apart from the interviews at the governmental organizations, four interviews have been held at youth care organizations. First there is the interview held at Jarabee, an organization were ‘regular’ youth that came in contact with youth care can get the care and guidance they need. At this organization, a behavioural scientist has been interviewed. The behavioural scientists are occasionally in contact with their clients, together with other professionals. Together, they aim to make a trajectory that is most likely to help youth get back into a normal situation. Another interview has been held at Ambiq, a similar organization which specializes in youth with intellectual and developmental disabilities. At this organization a ‘cluster manager’ has been interviewed, which is a managerial position which includes direct client contact. In specific, the interviewee had tasks related to crisis situations of youth. Another interview has been held at the youth protection office of Overijssel (JBoV, Jeugdbescherming Overijssel), where a regional manager has been interviewed. This regional manager held a administrative position within this organization. Lastly, there has been an interview at the mental-healthcare organization Karakter. At this organization a business manager has been interviewed. As a business manager, one is not directly involved with the clients, but do have a general view of the organization. The business manager is also in direct contact with all the professionals who are in turn working with the clients. In addition, they are responsible for aspects that had to be implemented due to the organization from a managerial perspective. Both the
interviewees at Karakter and the youth protection office occupied solely managerial positions, which did not include direct client contact. The interviewee at Karakter did however work directly with clients in prior positions.

The previous two sections described where the interviews have been conducted. The interviews have been conducted at a wide variety of organizations to acquire a representative and reliable sample. The aim has been to do at least one interview at each of the following organizations: A municipality, a social neighbourhood team, the youth protection office, a youth care organization directly involved with clients and a mental-healthcare organization. Ultimately, this research succeeded to achieve this, resulting in the fact that each of the organizations are represented in the sample. Due to the fact that in-depth interviews have been held, having done at least one interview at each type of youth care organization provides a representative sample of the field. Obviously, a more representative sample would have consisted of multiple interviews at each of the different forms of organizations. This way, comparisons could have been made between these interviews to acquire a more reliable source of information from the perspective of that form of organization. However, this research lacked the capacities to execute this.

Next is the reliability of the answers given in the interviews. The aim of the interview has been to collect unbiased data from the interviews. To achieve this, each of the interviewees were faced with the same interview questions. These questions can be found in appendix 10.2. The interviews were generally structured as follows: First, interviewees were asked about their position in youth care and how they felt about the decentralization. These questions were asked to gauge whether the interviewee was either generally positive or negative about the decentralization. Next, questions where asked about how the decentralization influenced their working situation. These questions were about whether there are more clients after the decentralization, whether clients seemed to struggle in the new situation and whether they got more/less responsibilities. Lastly, questions were asked about their individual situation: whether they had to change their way of working, changes in their discretionary capacities and whether they had to spend more time on administrative tasks. Apart from the general questions, some follow-up questions where asked that differentiate per interview.

At the end, conclusions will be drawn by answering the central research question, making use of the partial conclusions. Followed by the conclusions will be a section dedicated to the recommendations that can be made based on this research. These recommendations will be accompanied by a discussion on the methods used and leads for further research on this subject.
Chapter 4. Decentralization and working conditions

This chapter is dedicated to describe the influence of the decentralization on the working conditions of the youth care employees. In doing so, the following research question has been formulated: ‘How does the decentralization of youth care influence the working conditions of youth care employees?’ This research question will be answered making use of in particular the following interviews question: ‘Did you have to change your way of working after the decentralization?’ The aim of this research question is to describe the influence of the decentralization on the working conditions of youth care employees from the perspective of the field. In doing so, a division will be made between the municipalities and the youth care related organizations. This has been done due to the fact that municipalities operate differently than the youth care organizations. Municipalities play an administrative/coordinating role, whereas the youth care organizations are directly engaged with the recovery of the clients. At the end of this chapter, the research question will be answered in the partial conclusion.

4.1. Perspective of the municipalities

The decentralization of youth care resulted in changes in the working conditions of the municipalities. However, these working conditions are also still in development (Municipality of Enschede, 2017). From the perspective of the municipalities it is agreed upon that right after the decentralization, work pressure was high, especially because various arrangements had to be made. These arrangements consisted of putting together an ICT-system and signing/making (financial) contracts. Eventually, when these aspects are fully arranged, the working conditions will be different. Nevertheless, there are also changes in the working conditions that occurred already, and are permanent. These are mainly the changes in the working conditions that stem from the fact that municipalities now have a lead-directing role in youth care. Municipalities had a similar role in the past, but their responsibilities have greatly been increased after the decentralization (these responsibilities will be described in the next chapter). Municipalities do mention how the main changes on the working conditions have manifested themselves at the executive side of youth care. During the interview at the municipality of Hengelo it was mentioned that ‘Especially those at the executive side had seen changes (...) they had to work with client-centered approaches, but now need to have a wide scope of knowledge about the situation and work with network approaches’ (Municipality of Hengelo, 2017). This executive side of youth care from the municipal perspective are the social neighbourhood teams. The employees of the social neighbourhood teams have seen most changes in their working conditions being implemented already (Municipality of Hengelo, 2017).

4.2. Perspective of the youth care organizations

From the perspective of the youth care organizations a wide range of responses was given whether the working conditions had changed. The changes in the working conditions are not only differing per organization, but also within organizations different functions saw different changes. Most interviewees agreed that there were some notable changes in the working conditions after the decentralization. The exception to this was the interviewee at the youth protection office. Even though the youth protection office did see various changes, their working conditions are considered to be fairly equal compared to before the decentralization (JBoV, 2017). The main difference they saw in their working conditions is that they are now working under a certain ‘certificate’ (JBoV, 2017). This certificate consists of strict requirements for an organization to perform youth care
related tasks. An organization requiring such a certificate cannot operate without meeting the requirements.

From the perspective of youth care employees at Jarabee, their working conditions are affected by the ‘SKJ’ (Stichting Kwaliteitsregister Jeugd) (which roughly translates as ‘quality register youth’). Due to this register, youth care employees at master level are now more responsible for their actions whereas previously only the behavioural scientists bore responsibility (Jarabee, 2017). This is due to the fact that previously only the psychologists at post-master level were part of this register (Psynip, 2016). As a result, the youth care employees have to make trade-offs with which clients they involve themselves more extensively, or stay in the background (and assist if necessary) (Jarabee, 2017).

At Ambiq, one of the main aspects affecting the working conditions is the influence of the social neighbourhood teams (sociale wijkteams). Social neighbourhood teams play a very important role and are also more involved in youth care than their counterparts from before the decentralization. Ambiq has to cooperate intensively with the social neighbourhood teams of all the municipalities in the region. However, each of the social neighbourhood teams operates differently and Ambiq has to adapt specifically to each of them: ‘What I find difficult, is that there employees of social neighbourhood teams in Enschede, in Almelo, in Hengelo, et cetera... And they all want something differently’ (Ambiq, 2017). To make matters more complicated for Ambiq, they have to approach the municipalities and their social neighbourhood teams as their clients. This effect increases when new public servants become involved and steer their policy in a different direction (De Vries & Wolbink, 2017). Consequently, the working conditions are drastically impacted, because a significant amount of time has to be spend to specifically tailor their services to each individual ‘client’ (This client being an employee of a social neighbourhood team). In addition, there are no clear frameworks what can be expected in return from the representatives of these social neighbourhood teams (Ambiq, 2017).

Lastly, there is the perspective of Karakter and how the decentralization affected their working conditions. The aspects that were affected mainly were related to administrative tasks (consisting of the reporting of incidents/clients) (Karakter, 2017). Currently, each of the youth care professionals at Karakter is an individual business that has to be financially stable. What this means in practice, is that before any patient gets the care they need, the youth care professional has to make a small plan of approach: Everything has to be registered, what trajectories will be implemented and how will it be financed? Ultimately, this has to be done monthly for all the clients so that the business manager can arrange the financial matters. These added responsibilities are considered to be the main change of the working conditions of the professionals at Karakter (Karakter, 2017).

4.3. Partial conclusion
It can be concluded that the changes in the working conditions are perceived differently within each organization. However, most of the interviewees do agree that the decentralization did influence the working conditions of the youth care employees significantly. For the youth protection office, the main influence is due to the certification of their organization. Youth care organizations mentioned how the differences between social neighbourhood teams affected their working conditions.
Chapter 5. Decentralization and workload

Due to the decentralization, youth care employees were confronted with changes in their working conditions as described in the previous chapter. However, changes in the working conditions do not necessarily mean that there has been a significant change in the amount of work that had to be done. In order to investigate whether this is the case, the following research question has been formulated: *Does the decentralization of youth care influence the (perceived) workload of youth care employees?* To answer this research question, first the new responsibilities for the youth care employees will be elaborated. Due to the significance of the (perceived) changes in the administrative responsibilities, an individual section is dedicated to the administrative responsibilities. Together, this will give a representative view of the extent to which the (perceived) workload had changed. Ultimately, conclusions will be drawn answering the research question in the partial conclusion.

5.1. New responsibilities

Due to the decentralization various organizations were faced with new responsibilities to cope with. To investigate to what extent the interviewees were faced with new responsibilities, the following interview question has been formulated: *Did you get more responsibilities after the decentralization?*. The interviewees gave a wide range of answers. Some were met with entirely new responsibilities, and some had less responsibilities after the decentralization. This happened to the youth protection office which now has less responsibilities, but is now operating as a certified organization (JbOV, 2017). *Various tasks, such as making assessments, are not our responsibility anymore. However: the tasks we do still execute, we have to execute according to a certificate. We can only execute these tasks, if we meet the requirements of this certificate* (JbOV, 2017). Naturally, the youth protection office has to face new challenges due to this certificate. Organizations such as the youth protection office are not allowed to execute their tasks without certification. This certification is based on a framework of standards drafted by the Ministry of Justice in cooperation with the Association of Dutch Municipalities (Keurmerk Instituut, 2017).

Naturally, the municipalities have seen most changes in their responsibilities, considering they are now responsible for youth care as described in the youth act. All the youth care related tasks previously conducted by provincial and national governmental entities are now their responsibility. From the perspective of the municipality of Hengelo, the most prominent new responsibility is their financial responsibility over youth care (Municipality of Enschede, 2017). Municipalities are now together responsible to properly spend several hundreds of millions of euros of taxpayers’ money, without having specialized prior experience. In addition, the municipalities also faced budget cuts at the same time they got the financial responsibilities of youth care (Municipality of Enschede, 2017). However, it should be taken into consideration that especially at the early stages of the transformation financial arrangements had to be made (contracts had to be signed and public servants had to be trained to work in the new situation) (Municipality of Hengelo, 2017). Due to this, the prominence of the financial responsibilities is still bound to change. When contracts and such are settled, naturally less time has to be spend on them.

Before the decentralization, social neighbourhood teams where already a growing phenomenon (NJI, 2013). In 2014, 69% of municipalities had established a social neighbourhood team, which rose to 83% in 2017 (Movisie, 2018). After the implementation of the youth act they
also became an important organization of youth care, working at the ‘front’ of the field. The people working as youth care employees at social neighbourhood teams, are mostly people that worked at similar organizations before the decentralization such as ‘Bureau Jeugdzorg’ (Youth care Office). These people did not see new responsibilities being added to their function, but are now occupying a similar position at a different organization instead. However, considering they are now occupying such ‘similar positions’ (but in a new system), the responsibilities they have now can be compared with their previous situation. For some social neighbourhood teams, the target group has changed. At the youth care offices, employees only had to work with children (from 0 to 18), however, some social neighbourhood teams are also involved with problems of adults, such as in Almelo (De Nieuwe Organisatie, 2017). In addition, the teams are required to solve the problems from a network perspective, which also adds new responsibilities (De Nieuwe Organisatie, 2017).

From the perspective of the youth care providers, there are some notable changes related to responsibilities. For the youth care providers Ambiq and Jarabee, there are teams that are working on solving problems for youth, which are now expected to solve these problem from a network perspective (Ambiq, 2017). When solving problems from a network perspective, the youth care providers are also responsible for aspects related to the network, and not just the children. ‘Previously, we were expected to do certain aspects of the problem, ‘we can do this, or we can help out there’, but now, we have to assess what is needed for the entire system (network) of the client’ (Ambiq 2017). Changes in responsibilities can also be different for different youth care providers. For Jarabee, the behavioural scientists have gotten more responsibilities for instance (Jarabee, 2017). These responsibilities stem from organizational changes that have been implemented. From the perspective of the mental-healthcare agency Karakter, the budgetary cuts had led to several new responsibilities. In the contemporary situation, several external tasks have been added, increasing the ‘Spell of Control’ of various employees (whereas previously, only internal tasks were performed) (Karakter, 2017).

5.2. Administrative responsibilities
After the decentralization all of the youth care related organizations were faced with changes in administrative activities. In many instances, the administrative burden is referred to as one of the main problems in contemporary youth care. During the interview at Karakter, this was even described as: ‘The administrative burden was already considered to be high, but after the decentralization, there has been a tremendous increase on the administrative burden’ (Karakter, 2017). Among other reasons, this section is dedicated to investigate the influence of administrative changes. The interview question used to investigate the influence of administrative changes is as following: ‘Do you have to spent more time on administrative work after the decentralization than before?’.

To elaborate the administrative burden of the municipalities after the decentralization, there are various aspects to keep in mind. First of all, considering that many aspects of youth care were transferred to the municipalities, the administrative activities were naturally transferred along with them. So naturally, there has been an increase of administrative tasks for the municipalities. Especially right after the decentralization, municipalities spent a lot of time setting up their administrative systems (Municipality of Hengelo & Enschede, 2017). Mainly due to this fact that many of the administrative burdens were related to setting up the administrative systems at the beginning of the decentralization, means that it might not be a lasting phenomenon. Due to this, the
administrative experiences during the early phases of the transition are not a good indicator for the future (Municipality of Hengelo, 2017).

From the perspective of youth protection and the social neighbourhood team the administrative burden is considered similar as before the decentralization. Before the decentralization, the youth protection office was already subject to a high level of bureaucracy. Due to the decentralization, there have been various changes to this, but in general there has not been an increase of the administrative burden (JBoV, 2017). A similar response came from the social neighbourhood team of Almelo. Even though these employees now work in a different organization, in the current setting they carry out similar tasks. Consequently, a similar level of administrative burden could be expected, which is also the case in practice (De Nieuwe Organisatie, 2017). However, both organizations mention that they expected a decrease of the administrative burden. This decrease has not yet manifested itself yet. In the (near) future this decrease could still happen, which from the perspective of the youth protection office will depend on the municipalities (JbOV, 2017).

Lastly, from the perspective of the youth care providers, a common agreement exists that there has been an increase of the administrative burden. This increase is felt in various ways, such as various rules that now exist to arrange decrees: ‘Yes, there is definitely more administration now. For example for arranging decrees, forms have to be send to various organizations, which also requires time and effort to arrange’ (Ambiq, 2017); which is a concrete example of how administration had increased. From the perspective, of Jarabee, it is mentioned how they are still looking for ways to effectively deal with the forms and risk taxations they have to make (Jarabee, 2017). Whereas other organizations mainly saw changes in their administrative burden, the youth care organizations felt a significant increase. Especially from the perspective of the youth mental-health organization Karakter, there was an emphasis on this matter (Karakter, 2017). At Karakter, the entire organization, including practitioners and its’ management, saw an increase in the administrative burden. In general, managers and employees at administrative occupations are quite capable to cope with this increase. To manage the increase of the administrative burden, they cope by working more hours (Ambiq, 2017). However, especially the youth care employees that are constantly in contact with the clients, are affected by the administrative burden (Ambiq, 2017).

5.3. Partial conclusion

In general, the decentralization did influence the perceived workload of the youth care employees. In most cases, this change was an increase in the (perceived) workload, especially related to the administrative burden. Another change is that various tasks have been shifted due to the decentralization. However, various aspects that influenced the (perceived) workload, were not permanent. Due to this, not all the increases of the (perceived) workload are permanent.
Chapter 6. Coping with clients

The previous chapters described how the decentralization had an influence on the working conditions and (perceived) workload of youth care employees. The aim of this chapter is to describe how these influences had an effect on how the youth care employees deal with their clients. In doing so, the following research question has been formulated: ‘How does the decentralization of youth care change the ways that youth care employees are dealing with their clients?’ First, the changes that affect clients from the perspective of the municipalities and the social neighbourhood teams will be described. In the second section, the perspective of the youth care organizations will be described. These descriptions will be based on the interview questions which (in)directly illustrates how youth care employees are now working differently with their clients. The changes that occurred, will also be linked to theoretical aspects of Lipsky and Vinzant & Crothers. The third section will separately treat ‘civil participation’ and its’ influence. At the end of this chapter the research question will be answered.

6.1. Municipalities and social neighbourhood teams

Municipalities usually do not directly interact with clients, that task is generally mandated to the social neighbourhood teams. However, considering that interviewees at the municipalities could represent their colleagues at the social neighbourhood teams, their view on this matter is still relevant. Besides, there are some indirect influences on the clients that occur due to administrative changes at the municipalities. These influences will be described and how it affects (potential) clients.

The first investigated influence of the decentralization of youth care on clients is the duration of trajectories. The municipalities have no representative data of this because they do not possess data from before the decentralization (Municipality of Enschede, 2017). However, the general trend has been that trajectories are decreasing in duration: ‘(...) Since before the decentralization, organizations are aiming to shorten the duration of trajectories, this trend did not stop after the decentralization’ (Municipality of Hengelo, 2017). The shortening of trajectories is an example of routinization of activities, as described by Lipsky (Lipsky, 2010 p. 99). This is because the shorter trajectories require a more routine approach than the trajectories from before that could last for an indefinite amount of time. However, even though the trajectories themselves are shorter, the decentralization does offer opportunities to keep clients ‘in the picture’ after their trajectory. During the interview with the social neighbourhood team of Almelo it was mentioned that ‘... After the regular trajectories, we visit the client, or give them a call (...) the transformation of youth care gives us opportunities to stay in contact with our clients’ (2017). As a result, the phenomenon that after a trajectory clients would return after a period of time with escalated problems, should occur less often. This is because problems that manifest themselves after the trajectories can now be identified more easily, and smaller problems can be solved on the spot before they escalate. The discretionary capacities over the processes have thus decreased, implying a shift from situational leadership to more administrative procedures according to the theory by Vinzant (Vinzant & Crothers, 1998). These capacities are replaced by informal capacities to keep clients in the picture after they finished their trajectories.
Another investigated aspect is the referring of clients. In doing so interviewees were asked whether they had gotten more options to refer clients to other organizations. It should be taken into consideration that referring clients is not necessarily either a ‘positive’ or ‘negative’ thing. Sometimes clients need to be referred to another organization to get the care that best fits their needs, or can be better off staying at the same organization. Due to this ambiguity, the interviewees gave a wide range of answers that affect the clients in different ways. One negative influence is that youth with very complex issues tend to get referred from one organization to another. In such a situation, the following occurs: ‘Let’s say there is a child with complex issues, according to one organization the mild mental-health issue has to be solved first, the next organization then says: No, first do something about the psychiatric issues, resulting in children being send from one organization to another. That is an aspect that did not improve over the years, proper cooperation between organizations is still not achieved yet’ (Municipality of Enschede, 2017). As a result, the client does not get the care they need, and might feel that they are stuck in the bureaucratic system. It should be taken into consideration that this problem mainly occurs with complex issues. This problem is mentioned at both of the interviewed municipalities and the social neighbourhood team (Municipality of Enschede & De Nieuwe Organisatie, 2017). This constant referring also occurred before the decentralization, even though the youth act should have offered opportunities to improve this. Another aspect related to the referring of clients is that after the decentralization there are far more opportunities for clients to choose from (Municipality of Hengelo & Enschede, 2017). This is due to the fact that, for instance the municipality of Enschede made over 300 contracts with youth care providers. Due to this fact, the right form of care not being available for youth cannot be considered the core of the problem (Municipality of Enschede, 2017). This large amount of contracts also has a negative side: Besides the difficulty of finding the right form of care, it is also increasingly difficult to get care outside of the local providers. Now that municipalities are responsible, some clients face difficulties in arranging care they want in other regions (JbOV, 2017). This problem can be considered a negative side effect of the bureaucratic and administrative changes of the decentralization.

An important aspect for youth that are in need of care is the route to acquiring the right form of care that fits their needs. To investigate this, interviewees were asked whether they felt that clients faced difficulties in finding the right form of care they require. By law, there are various organizations that can refer youth to the care they need, such as: General practitioners, pediatricians, youth protection organizations and the municipalities with their social neighbourhood teams. About 50% of these requests for youth care pass through the municipalities (Municipality of Enschede, 2017). In general, most clients are able to find the care that they need: ‘There are certain situations that tend to be difficult, but in general, you should be able to find your way through the system to get the care you need’ (JBoV, 2017). However, there are still some improvements to be made, because parents are not always aware of the fact that they can enter youth care through the municipalities (Municipality of Hengelo, 2017). Other clients that still face difficulties acquiring the right form of care, are clients in more complicated situations. This mainly occurs in situations of double diagnosis, such as a client with both an intellectual deficiency and mental-healthcare related issue. For such youths, finding the right form of care can be difficult (De Nieuwe Organisatie, 2017). It should be mentioned that organizations can also willingly make it more difficult for clients to acquire care at their organization. This is a form of rationing to make sure that only the clients that truly need
the care, can pass certain boundaries in order to get care (Lipsky, 2010 p.87). From the interviews, there are however no indications that this form of rationing is (consciously) happening. Municipalities are even aiming to increase awareness of their position in youth care towards the population, through meeting with family of clients for instance (Municipality of Hengelo, 2017). Problems in not acquiring the right form of care can also stem from the network of the client. For instance in situations in which the parents of the client are divorced and cannot find agreement on whether to send their child to youth care or not (De Nieuwe Organisatie, 2017).

Lastly, interviewees were asked to what extent they are free to determine their approach for individual cases. In doing so, further questions were asked to determine the influence of the decentralization on this. From the perspective of the municipalities the main influence stems from the network approaches that are now being executed in the field. The effects of this manifest themselves at the social neighbourhood teams. These teams are now expected to make plans that help solve the problems of the client from a network perspective. These plans tend to be more customizable and also less depending on standardized protocols than before the decentralization (Municipality of Hengelo, 2017). The effect of this on the client is that they can expect more customized forms of care that is better tailored to their situation. Municipalities play a consultative role in making sure that clients get the right form of care that best suits their needs. Especially when there is doubt about unclear agreements or when very complicated issues arise, municipalities can consult from their position (Municipality of Enschede, 2017). Even though there is a high level of discretionary capacities, there are various protocols which cannot be deviated from. There are certain steps that need to be taken to decide what form of care will be applied, and there are standardized plans such as safety plans. Lastly, there are also certain administrative steps that have to be taken where youth care professionals cannot deviate from (De Nieuwe Organisatie, 2017).

6.2. Youth care organizations

Youth care organizations were also asked about the duration of trajectories. From their perspective, the same trend exists as stated by the municipalities: Trajectories are currently much shorter on average than before. The main cause of this is that there is now a maximum duration for trajectories. Whereas previously there were cases of clients staying in trajectories (or in clinics in the case of mental-health issues) for many years, the maximum is now 4 months (Karakter & JBoV, 2017). The shortening of trajectories, and in particular the maximum duration that now exists, is a form of routinization (Lipsky, 2010, P. 99). Just like at the municipalities, this is considered to be a very positive trend. However, there is also a downside to this which occurs with forms of emergency aid. Either when crisiscare or ambulatory care is advised, after a short while, some patients return in need of emergency aid again. In such cases youth care professionals are in doubt whether the right form of care has been applied. In some cases, the network of clients do not support the advice of the professionals: ‘It could occur when clients/their parents do not fully support the advices. Especially when it concerns voluntary advices, it could be that our advices are not being followed by them’ (Jarabee, 2017). This phenomenon is not a direct consequence of the shortening of trajectories. Some causes of this problem are that parents do not support the advices, or when financial matters cannot be arranged. However, fact of the matter is that it does make it seem trajectories are shorter, but in these cases clients are not fully recovered after their trajectories. Yet again, the root cause in
these situations does not lie with the shortening of the trajectories, which is mainly perceived to be a very positive trend.

In the referring of clients the youth care organizations themselves are directly involved. Youth care organizations sometimes have to refer to other organizations or see clients being referred to themselves. In answering the interview question: ‘Are there more or less possibilities to refer clients to other organizations?’ The phenomenon that youths with very complex issues sometimes do not get the care they require was mentioned as well. One example was given of a client of which various organizations did not want to offer their services to, because they felt incapable in solving their issues. In such situations, youth care organizations should have a unified responsibility to help the client in need, regardless of how complex the situation is. According to Ambiq, this is (sadly) not happening yet: ‘I believe that we, as youthcare providers, still have a long way to go in cooperating. It cannot be that a child in a crisis situation, with complex issues of both mental-health and psychiatry, does not immediately get both forms of care they require’ (Ambiq, 2017). There is also the possibility to refer clients to different providers within an overarching organization. For such organizations a wide range of care can be offered. This occurs within mental-healthcare organizations such as Karakter. At Karakter, a wide range of care can be offered, including care by specialized teams for the most complex issues. Within this organization, there is a tendency to refer clients to these specialized teams too quickly, in cases in which more generalized forms of care should be sufficient (Karakter, 2017). Youth with complex issues not finding the form of care they require, can be seen as a form of rationing of services. This occurs when only the ‘desirable’ clients are capable of getting services they require (Lipsky, 2010 p. 87). However, at the youth care organizations there is no indication that this is the reason for this phenomenon. Instead, it is more likely that organizations just feel incapable of solving the issues of these clients.

In answering the question whether youths are capable in finding the right form of care that suits their needs, youth care organizations gave a similar reply as the municipalities. For generalized forms of youth care and issues that are not very complicated, clients usually manage to acquire the care they need (JbOV, 2017). However, it is mentioned that due to the changes of the decentralization, some clients do seem to struggle to understand the roles of the municipalities and their social neighbourhood teams (Jarabee, 2017). Youth care in general still has a few steps to take in communicating to the public how youth can ‘enter’ youth care. In addition, for difficult cases some clients do seem to struggle to find the right form of care. Here, it should be noted that this is not the result of rationing of services, in which acquiring care is made more difficult in order to only get clients that truly require it (Lipsky, 2010 p. 87). Instead, an actual problem can be identified of clients not being able to find the care that fits their needs. From the perspective of youth care organization Ambiq there is still much to improve, giving an example of youth with two different issues: A psychiatric mental disorder and limitations in mental functioning. Before the decentralization there was an organization coordinating such matters so both forms of care could be applied together. However, after the decentralization this is not the case, and even if both forms of care are applied there are cases in which organizations are not working together. In such cases, a combined trajectory with organizations working together would be most desirable, but is not happening consequently at the moment (Ambiq, 2017). As a result, such clients are not getting the level of care they require.
The interviewees at the youth care organizations were asked to what extent they are free to determine their approach for individual cases. At the youth protection office the youth care employees are expected to work with a very strict framework of standards. Discretionary decision making processes do exist, but always have to be made as a team, and not by a single youth care employee (JbOV, 2017). Similar courses of action exist for Jarabee, Ambiq and Karakter, each of these organizations work with frameworks and standardized protocols, and discretionary decision making that has to be made in teams instead of individuals (Jarabee, Ambiq & Karakter, 2017). All these frameworks and standardized protocols are based on scientific research and experiences of professionals and clients (Jarabee, 2017). Consequently, clients can expect high quality care when receiving care according to these protocols. It should be taken into consideration that there is always room for interpretation within these protocols. Youth care professionals are free to act within these protocols, relying on their professional knowledge and experience. It should be mentioned that the decentralization did not significantly change these protocols and frameworks. The main change identified from the interviews is that the youth protection office now works as a certified organization. The fact that they now work under this certification, does reduce the likeability that youth care employees would deviate from protocols. This implies less discretion over the process, and thus a shift from situational leadership towards administrative procedures according to the table/theory by Vinzant & Crothers (Vinzant & Crothers, 1998). For clarity, it should be stressed that this shift is on a continuous scale.

There is also the direct influence of increased administration, which specifically affects the youth care employees. From the interviews, two interviewees were able to describe this direct influence and both agreed that it impacted the youth care employees. Due to the increased amount of administration, youth care employees that are in direct contact with the clients have less time to spend with their clients (Ambiq & Karakter, 2017). The youth care employees have no real methods of truly coping with this, which is one of the core problems of contemporary youth care. A logical consequence for the client is that they are now less in contact with their caretakers, or have to spend more hours on their job: ‘You just have to make more hours to cope with it’ (Ambiq, 2017). The fact that these employees have to spend more hours in order to meet their administrative requirements, could have two implications: First, they possibly are not able to cope with this increase at all, or second, they have not found proper coping mechanisms yet.

6.3. Civil Participation

The implementation of ‘civil participation’ is a particular aspect that is developing in various public policy fields including youth care. In youth care, civil participation is generally referred to as ‘Eigen Kracht’ (which can be roughly translated to ‘own capacities’, referring to clients’ own capacities to solve issues). It refers to self-reliance and putting the capacities of the client central in solving their issues. Civil participation is more of a principle to apply to situations, rather than a form of care (Clarijs, 2016 p. 153). Civil participation is also one of the fundamentals of the youth act. However, civil participation had already gained prominence before the decentralization and did not gain much specific attention during the interviews. Instead, civil participation was mainly associated with the network approaches, which also relies on the capacities of the network. However, due to its’ prominent influence on how clients go through youth care, its’ influence on clients’ treatment will be described here.
Civil participation and network approaches are so similar because they both take the clients’ network as a starting point. However, civil participation is a wider concept, and more of a principle to apply to an approach than an approach itself (Clarijs, 2016 p. 153). The main influence of civil participation on youth care clients is that it gives the clients and their network directive capacities. The client gets assistance and recommendations in the form of treatment they feel suits them best. Civil participation aims to empower the client, not just looking at solving the problems but also at possibilities to improve them. Lastly, civil participation aims to have youth care employees assist clients and their network to help themselves, rather than just solving the situation for the client (Clarijs, 2016 p. 153). It should be taken into account that even though this approach puts more emphasis on the capacities on the client, it does not diminish the role of the youth care employees. They now have to spend a significant amount of time in maintaining contact with the clients and their network (Ambiq, 2017). To conclude this section, it can be said that civil participation requires more time and effort from youthcare employees, clients and their network, but result in more durable solutions.

6.4. Partial Conclusion

This chapter described how the decentralization influenced how youth care employees deal with their clients. The main change that occurred is that trajectories are now shorter. Due to the fact that the trajectories are now shorter, there is less room for the people working in youth care to make discretionary decisions. Lastly, in dealing with their clients, youth care employees now involve the network of the client in their approaches. This is called the network approach and also changes how clients go through their youth care trajectories.
Chapter 7. Explanations
The previous chapter described how the changes of the decentralization affected the client. The aim of this chapter is to describe how these changes can be explained. In particular, why exactly the decentralization had this impact. This chapter will also connect the aspects of the theories by Lipsky and Vinzant & Crothers to the changes of the decentralization. The aim of this chapter is to answer the following research question: ‘How can the changes in the ways of dealing with clients by youth care employees due to the decentralization be explained?’ using the influences described in the previous chapter. The first section will be dedicated to the administrative burden, and how this increased burden is due to the decentralization. The section will be about the shortening of the trajectories and how contact is maintained with clients after their trajectories. Next, the third section is about street-level decision making. At the end of this chapter there is a section dedicated to the partial conclusion.

7.1. Administrative Burden

The impact of the administrative burden and its’ influence on youth care employees has been described in the previous chapters. In short, the opinions to what extent the administrative burden had increased is different for each organization. Most importantly would be however, that for the youth care employees directly in contact with the client, the administrative burden did increase after the decentralization. This happened even though the aim of the decentralization was to decrease the administrative burden, which did not happen according to any of the interviewees. Even according to the youth protection office, where the increase of the administrative burden was not perceived by the interviewee, it was mentioned that: ‘The decentralization was supposed to decrease administration, make it easier and less bureaucratic, but that did not happen, because of that you hear people complaining.’ (JBoV, 2017). The aim of this section is to describe why exactly the decentralization had a negative effect on the administrative burden.

The first cause for the increase in administration stems from the fact that since 2016, municipalities started asking for more information from youth care organizations (JbOV, 2017). As a result, administrative tasks had to be fulfilled to deliver this information. This obviously pressures these organizations, because without proper information send to the municipalities they cannot get their funding (Ambiq, 2017). From the perspective of the municipalities one requirement reflects why they would require more information: The legal principle of residence. Municipalities only pay for the care of children whose parents live in their municipality (Municipality of Enschede, 2017). This means they require information they did not require before the decentralization. In addition, there are also very complicated situations in which the parents are divorced and they live in different municipalities: ‘To which of the parents does the invoice have to be send?’ Is the question that arises in such situations (Municipality of Enschede, 2017).

The second cause has its’ roots in all the required allocations and decrees that have to be signed. From the perspective of Ambiq, this resulted in an added position within their organization, someone working specifically on composing decrees (Ambiq, 2017). To illustrate the increase of time that has to be spend on these decrees: A few years ago there were instances of decrees lasting for over a year, sometimes even two years. Currently, decrees are given for 4 weeks. After its’ expiration, another decree has to be signed for 4 weeks. ‘It is very important that these allocations
are properly made within schedule, or else we do not get the financial compensation’ (Ambiq, 2017). Even though decrees lasting for over a year were not considered to be desirable, renewing them every 4 weeks was indicated to be too much of an administrative burden. This trend is not just occurring at Ambiq, the article by de Vries & Wolbink find similar results: ‘The moment that registration is not done properly, we do not get the money for it. Even if you did provide excellent care’ (de Vries & Wolbink, 2017). Youth care organizations naturally face difficulties when they do not receive financial compensation for their delivered services by failing to meet administrative demands.

7.2. The shortening of trajectories

One of the main changes, that further expanded after the decentralization, is the shortening of trajectories. Instead of keeping youth in very long trajectories, the fundamental principle is to keep trajectories short, but stay in contact with the clients afterwards. This principle manifests itself at both the social neighbourhood teams and youth care organizations, which now handle maximum durations for trajectories. Keeping trajectories short, is a form of routinization as described by Lipsky. Lipsky describes why routinization is desirable at various organizations, including relevant aspects for youth care organizations. Routine approaches promote a sense of equal treatment and clarity of the treatment (Lipsky, 2010 p. 99). In addition, shortening the duration force the youth care organizations to effectively structure the trajectories. This consequently results in clear and predictable trajectories, increasing client confidence. To put this shortly into perspective, the trajectories that were too long offered no clarity and perspective to the clients, whereas the shorter trajectories are contemplated to do so.

Due to the fact that the trajectories are shorter, there is naturally less room for discretionary capacities. This fact is further confirmed by the fact that certain organizations operate under a certificate since the decentralization. Due to this, the tasks performed by the youth care employees tend to be more administrative procedures rather than situational leadership (Vinzant & Crothers, 1998). Opposed to the long trajectories, the fundamental principle is now to keep in touch with clients after their trajectories. This replaces the somewhat formal relationship between the client and youth care employees during the trajectories with informal contact after their trajectories.

7.3. Street-level decision making

This research described a wide range of influences the decentralization had on the contemporary state of youth care. However, for the client, the only thing that matters is how they themselves go through youth care trajectories. Youth care employees ultimately decide which type of care suits the client best, and apply this to the client. The concept behind these discretionary capacities of the youth care employees is referred to as street-level decision making. This section will be dedicated to this concept and the influence of the decentralization on it. In doing so, first the influence of the certification of organizations will be described. In the second section, the influence of the new responsibilities will be addressed.

First, the influence on the discretionary capacities of the street-level bureaucrats will be described. In general, there are two main aspects that influenced this which have been described in
previous sections/chapters: First, there is the certification of certain youth care organizations. The reason such organizations are now working under this certificate, is because the basic quality of youth care is supposed to be the same in each municipality (Clarijs, 2016 p. 204). In order to meet these basic level of quality, there is a list of quality requirements. This list includes aspects such as: All the (voluntary) employees need to have a certificate of conduct, a mandatory system of quality assurance, a system of complaints and disputes with low-threshold accessibility for the clients, and a wide variety of other requirements (Clarijs, 2016 p. 204). Second, there is the shortening of trajectories which extensively has been described in the previous section. Even though the trajectories in general are shorter, the trajectories themselves are, and have been, bound by frameworks, within these frameworks the youth care employees are free to act. Only in exceptional cases this can be deviated from, but only when a collective group of youth care employees can strongly substantiate why this is desirable (JBoV, 2017).

Secondly, there are the changes that occurred due to the new responsibilities for the youth care employees. Naturally, due to all the changes that occurred during the decentralization, there is a high amount of influences that can be identified. The implementation of network approaches in particular affected how youth care employees have to make their street-level decisions. In making their decisions, they now have to take into consideration the position and capacities of the clients’ network as well. Even though these additional responsibilities have been added, the general job description for the youth care employees at the youth care organizations is still the same (Ambiq, 2017). On top of the existing job description, these employees now have to think outside the box more often to involve the entire network in their approach: ‘The description of my position is the same, however, I do work differently (...) We are required to think outside of the box. In the current situation, when a crisis occurs, the entire system (network) is in this crisis situation’ (Ambiq, 2017).

7.4. Partial Conclusion

This chapter described how the ways of dealing with clients by youth care employees due to the decentralization can be explained. Both of the theories by Vinzant & Crothers and Lipsky offer an explanation. First, from the perspective of Vinzant & Crothers, there is a swift from situational leadership to administrative procedures. Due to certification, the increase of the administrative burden and a perceived increase of the workload, there is less room for discretionary decisions by the youth care employees. Another aspect is that the trajectories are now shorter, meaning that more routine approaches are necessary. From the perspective of street-level bureaucracy by Lipsky this is described as routinization.
8. Conclusions and discussion

8.1. Conclusions
This research portrayed how there have been various influences of the decentralization on the contemporary state of youth care. In specific, this research has focused on the implications of these changes for the employees of various organizations within youth care. These influences can be used to answer the central research question: ‘How has the decentralization of youth care changed the ways that youth care employees are dealing with their clients?’ In answering this central research question, four regular research questions have been formulated, each answering an aspect of this central question. In this conclusion, an answer will be given to the central research question, using these regular research questions. Lastly, at the end of this chapter, reflections on this research will be made in the discussion.

The first researched influence of the decentralization in this research is the impact on the working conditions. From the perspective of the interviewees, most youth care employees had seen changes in their working conditions. These changes are mainly related to financial and organizational matters, that came as new responsibilities the youth care employees had to work with. The main negative effect of these new responsibilities, is considered to be the work pressure that came along with it. However, a significant amount of time and resources had to be spend on establishing a system, which is not a permanent change. Due to this, the final effect of the decentralization on work pressure and working conditions, is still bound to change.

The second aspect researched is the influence of the decentralization on the (perceived) workload of youth care agencies. In general, interviewees do agree that the decentralization did increase the workload. Especially the administrative workload had increased, whereas a decrease was expected. Similar research confirm this by providing similar results: A (perceived) increase in the administrative burden by youth care employees (De Vries & Wolbink, 2017). However, there are some exceptions to this, and the extent to which the workload increased, is also perceived differently by each of the interviewees. Besides, most of the workload after the decentralization was spend on arranging matters that only had to be done once, such as signing and making many contracts. However, there are also permanent increases in the workload, such as the implementation of network approaches.

Third, the aspect of how the decentralization influenced how youth care agencies are dealing with their clients has been researched. In general, the main change that occurred is that within youth care, network approaches have been implemented. Whenever a client gets into youth care, not only his own situation will be assessed, but also of their network and how their network can be involved in their recovery. Another aspect is that youth care trajectories are now shorter in general, which has been described as a form of routinization. The general aim is to keep the trajectories short, but keep clients in the picture after their trajectories. This way, potential problems that occur after their trajectories, can be signaled early on. For clients, the main problem occurs when they are faced with very complicated issues. These clients are likely to have difficulties to find care that fits their situation. Lastly, there is the impact of the administrative burden. This mainly affects the youth care employees that are in direct contact with the clients. These youth care employees are not able to cope with the added administrative burden and are thus spending less time with their clients.
The last research question focused on why the decentralization had the impact on how the youth care employees are dealing with their clients. In general, this showed why exactly the effects can be attributed to the decentralization. First of all, the network approaches had indeed been implemented during the decentralization. However, these approaches stem from a general trend to implement civil participation in public policies, a trend that stems from way before the decentralization. Secondly, the increase of the administrative burden can also be attributed to the decentralization, although each organization perceived this increase differently. The increase can for instance be attributed to changes in decrees and municipalities demanding information from youth care organizations. The third aspect researched is the shortening of trajectories, which is also strongly connected to the coping mechanism ‘routinization’. However, there is also the aspect that shorter trajectories decrease discretionary capacities, which has been described as a swift from situational leadership to administrative procedures according to theory by Vinzant & Crothers. Discretionary capacities received some extra attention in the last section on street-level decision making. There, in addition to the discretionary capacities, it has also been concluded that the changes in responsibilities due to the decentralization also influenced how youth care employees deal with their clients.

At last, making use of the partial conclusions, a general answer can be given to the central research question. Briefly summarized, the decentralization of youth care resulted in a situation in which youth care employees have to approach their clients from a network approach. This approach is deployed at the municipal level, which keeps youth care close to its’ clients. These aspects are considered to be positive from the perspective of the interviewees in this research. The negative side that affects the clients is the administrative system resulting in less time spend with the clients. To deal with this, there are two main coping mechanisms that seem to be used: Rationing of services and routinization of processes. This research also concludes that, due to the fact these routine approaches are applied more often, there has been a decrease of discretionary capacities. This results in more administrative procedures being applied as opposed to situational leadership, when applying theory by Vinzant & Crothers. Lastly, it should be taken into consideration that the changes that occurred due to the decentralization are still in development.
8.2. Discussion

This research described the influences of the decentralization on the ways of working by youth care employees and how they deal with their clients. In doing so, the aim has been to make this description from an independent perspective. However, due to the independent nature of this research, there have been various limitations to the extensiveness of this research. These limitations manifested themselves in two ways, first: This research has only been conducted within the region of Twente. Secondly, confidential information that could have been relevant, was not always disclosed. The aim of this discussion is to describe how future research can further extend on the conclusions of this research. In doing so, the limitations of this research will be taken into consideration. In addition, some personal views on how youth care could improve in the future will be given.

First, this section will be dedicated to how future research can improve/extend the conclusions made in this research. First and foremost: To describe the contemporary situation of youth care in the Netherlands, future samples should consist of organizations from all of the provinces. Perhaps even more desirable, organizations from all of the intermunicipal regions that were established after the decentralization should be involved. In addition, any organization deciding to extend on this research with certain ‘leverage’, could get more information from the youth care organizations and municipalities. However, on the flipside, organizations are likely to have certain interests in performing their research. This could also have a negative effects on the likelihood of interviewees disclosing valuable information during their interviews. During this research, the interviewees were very open during the interviews. This was most certainly a benefit this research profited from.

Second, there are effects of the decentralization that were perceived by the field, but are not permanent changes. The administrative changes and contracts that had to be signed at the municipalities, seemed to have an impact on various youth care organizations. However, when eventually these matters are settled, time can be dedicated to actual improvements on youth care that the decentralization was supposed to offer. However, it is still quite speculative whether the improvements that the decentralization was supposed to offer, will fully manifest themselves. It is also impossible to tell whether the route that is taken now, will eventually reach the desirable situation the decentralization initially contemplated to achieve. For now it can only be concluded that time will tell whether a desirable situation of youth care as intended will be achieved.

During the interviews the interviewees gave their insight on what they would like to see improved in the current situation of youth care. In doing so, there is one aspect that is constantly mentioned, which is the administration. Most of the people within youth care understand the necessity of administration, however, feel like it could (and should) be much lower. During the interviews, the interviewee of Karakter gave a more specific example of a desirable situation: ‘Having one ‘entity’ dedicated to administrative improvements within youth care. That entity should be devoted to improving administration from an integral perspective. In doing so, the aim should be to improve the ratio between time spent with clients, and time spent on administration’ (Karakter, 2017).

Reflecting on this research, the effects of the decentralization are tended to be described fairly negative. One reason for this is that the motivation for this research, are media reports that described a negative trend (problems in youth care due to the decentralization). Second of all, the
decentralization increased the perceived workload, especially related to administration. Administration is already a sensitive topic, if there is an increase, this is easily regarded as something very undesirable. This might make it seem that the decentralization as a whole, is regarded as a failure by the field. This is definitely not the case, due to the fact that there are also aspects of the decentralization that were very positively received. In this research, it is already mentioned how the network approaches definitively influenced the workload, but are considered a positive change. The fact that youth care is now executed at the municipal level, is also considered to be a good thing. Arranging youth care at the municipal level, brings youth care as a whole closer to the people. Lastly, when youth care is arranged at this level, every aspect is now under the responsibility and financing of one party, namely the municipality. This last aspect is still in full development and facing problems, but has potential to make youth care much clearer for its’ clients and the youth care organizations.

Lastly, to conclude this discussion (and this research) this section will be dedicated to my personal reflections on the decentralization. It is important to note that when researching the current situation, it should be taken into consideration that it is still in development. Most of the essential matters however, such as creating the administrative system, arranging various matters and signing contracts, are now close to being settled. The time spent on these matters, should now be spend on the actual innovations the decentralization was supposed to offer. From my perspective, the near future will truly show the success of the decentralization, when time is spend on these innovations. Regardless, lessons should be drawn from the problems that occurred during the decentralization. Especially the fact that the decentralization was supposed to lessen administration, but did not, or even increased in some situations, is unacceptable.
9. Bibliography


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10. Appendix

10.1. Terminology

This research is written in a Dutch setting, meaning that all the relevant terms are originally in Dutch. In this introduction of the terminology, the terms used in the contemporary setting of youth care are clarified. For the sake of clarity, both the Dutch and English words used to indicate the definition are given in the first column. In this introduction, first a table is presented with concise definitions of all the used terms. In the second part of this introduction, all the relevant organizations are elaborated more clearly.

10.1.1 Concise definitions

<table>
<thead>
<tr>
<th>Dutch Term</th>
<th>English Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulante jeugdhulp (preventieve jeugdbescherming)</td>
<td>Extramural Youth-aid (preventive youth-protection)</td>
<td>Aimed at families with children struggling with truancy, quarrels, minor depressions, and such.</td>
</tr>
<tr>
<td>Jeugdbescherming</td>
<td>Youth Protection</td>
<td>Helps children (0 to 18 years) that are in serious potential harm due to problems in nurturing and growing up.</td>
</tr>
<tr>
<td>Jeugd-ggz (ggz = geestelijke gezondheidszorg)</td>
<td>Youth mental-health services</td>
<td>Supporting children and youth with their psychiatric problems and their environment.</td>
</tr>
<tr>
<td>Jeugdgezondheidszorg (JGZ)</td>
<td>Youth Healthcare Service</td>
<td>JGZ must provide for the protection and improvement of the (mental) health and mental &amp; social development of youth/children from 0 to 18 years old.</td>
</tr>
<tr>
<td>JeugdzorgPlus (Gesloten Jeugdzorg)</td>
<td>Youth care ‘Plus’ (Closed youth care)</td>
<td>For youth with serious (behavioral) problems who need protection against themselves or others.</td>
</tr>
<tr>
<td>Jeugdreclassering</td>
<td>Juvenile Probation</td>
<td>Form of youth care that can be imposed on youth that committed a criminal act. The individual gets care, guidance and will get back into society while avoiding recidivism.</td>
</tr>
<tr>
<td>Jeugdwet</td>
<td>Youth Act</td>
<td>The law consisting of rules regarding the municipal responsibility for prevention, support, help and care for youth &amp; parents.</td>
</tr>
<tr>
<td>Pleegzorg</td>
<td>Foster Care</td>
<td>Any form of care in which a different family or guardian takes over the parental tasks.</td>
</tr>
<tr>
<td>Residentiële jeugdhulp</td>
<td>Residential Youth-aid</td>
<td>A living environment where children/youth live on voluntarily or mandatorily imposed bases 24/7 outside their own living environment.</td>
</tr>
<tr>
<td>Raad voor de Kinderbescherming</td>
<td>Child Protection Board</td>
<td>Board that advises in order to prevent vulnerable children from potential harm.</td>
</tr>
<tr>
<td>Sociale wijkteams (Jeugdteams)</td>
<td>Social neighbourhood teams (youth teams)</td>
<td>Municipal teams aimed to increase efficiency and effectivity of youth care</td>
</tr>
</tbody>
</table>
10.1.2. Definitions
Youth care organizations

In this section all the relevant youth care organizations will be introduced in a more detailed way than in the table of the previous section. Most of the organizations will be defined based on their definitions given by the Inspection of Youth care (Inspectie Jeugdzorg, 2015). Other organizations are described from their respective description on their own websites.

Youth Protection (Jeugdbescherming)

Youth Protection is a measure legally imposed upon a child/teenager (0 to 18 years). A youth protection measure can be imposed if the parents of the child are not able to guarantee a safe and healthy development of the child, or when this development is under serious threat (NJI, 2017). A youth protection measure can be imposed upon the child after voluntarily care did not succeed or was denied. There are three youth protection measures that a judge can impose on youth, which are as following (Inspectie Jeugdzorg, 2015):

1. Putting the child under a ‘supervision order’ (OTS: OnderToezichtStelling)*;
2. Interdiction of the parental powers (Ontzetting uit de ouderlijke macht);
3. Exemption of the parental powers (Ontheffing uit de ouderlijke macht).

* In addition to regular supervision orders, Provisional Supervision Orders (VOTS, Voorlopige Ondertoezichtstelling) exist for potential crisis situations. A VOTS is then legally imposed upon a client by a judge. A regular supervision order takes time before it can be implemented (for legal reasons and such). However, for a crisis situation there is no time for such legal matters, and immediate action is required. When a provisional supervision order is being executed, the client is immediately being put under supervision. A provisional supervision order can maximally last for three months (Samen Veilig Midden-Nederland, 2017).

Juvenile Probation (Jeugdreclassering)

Juvenile probation is a combination of intensive guidance and monitoring for youth that have been convicted or are suspected of committing a criminal act. The individual who committed the criminal act has to be at least 12 years old to qualify for juvenile probation. When a juvenile probation measure is imposed, different forms of youth care can also be applied if necessary (such as a mental-health care measure) (Inspectie Jeugdzorg, 2015). There are a variety of measures that juvenile probation can impose, such as: Intensive monitoring, strict guidance trajectories, trainings and courses (NJI, 2015).

In addition to juvenile probation, there are also Judicial youth arrangements, that are closely related to this juvenile probation. Judicial youth arrangements consist of youth that have been convicted according to juvenile justice. In a judicial youth arrangement, youth serve their sentence such as community service.
Youth care Plus (Jeugdzorg Plus)

Youth care Plus is an intensive form of care to aid youth in their development. It is meant for youth with severe behavioral problems and are likely to abstain or withdraw from their necessary treatments. Youth care Plus is a compulsory form of aid, for youth that obtained a warrant for closed youth aid, by the children’s court. Youth care Plus aim to offer their form of care at the regional level: Youth should get their aid as close as possible to their home (Inspectie Jeugdzorg, 2015). A request to impose a Youth care Plus measure can be done by the municipality, the child-protection board, any certified organization or the public prosecutor. The children’s court then decides whether the client can get into this form of youth care. Besides, it is also possible to apply a conditional warrant, in which the client can get out of this intensive form of care provided that they meet the conditions (Jeugdzorg Nederland, 2017).

Social Neighbourhood teams (Sociale Wijkteams) / Youth Teams (Jeugdteams)

Sociale Neighbourhood Teams are, as the name suggests, teams that aim to tackle social problems integrally. They serve as a contact point for people that struggle with (social) issues, or have any questions in general about (mental-)health care (Movisie, 2016). For problems related to youth, these teams are also known as youth teams. Social neighbourhood teams have responsibilities on areas such as youth care, employment and social participation. Youth teams are mainly aimed at families with problems related to the growing up and development of children (Inspectie Jeugdzorg, 2017).

Youth care providers (Jeugdhulp aanbieders)

In the Netherlands, there are various organizations operating to help youth and their caretakers with problems related to their development and growing up. The different forms of care these organizations provide, are very diverse. Examples of organizations explained below are foster care and small-scale youth care with residence (Inspectie Jeugdzorg, 2017). There are also very specific organizations, that are for instance related to people living abroad. However, because of the relatively small significance of these organizations, these have not been elaborated in this research.

Foster Care (Pleegzorg)

When children are not able to stay with their parents for a short, or even longer period, they can qualify for foster care. There are various reasons which could lead to a situation in which foster care is desirable. The main aim of foster care is to make sure that children stay in a household environment, such as a foster family (Inspectie Jeugdzorg, 2017).

Youth Healthcare Service (Jeugdgezondheidszorg, JGZ)

Youth Healthcare services are part of the public healthcare services (The GGD, Gemeenschappelijke GezondheidsDienst). The most notable characteristic of the GGD, that it is concerned with collective demand, and not individual demand of care. They are concerned with tasks such as vaccination, informing and advising citizens and making healthcare assessments (and intervene if necessary). The services related to youth care, which are called JGZ, aim to provide protection and improvement of the (mental) health and social development of youth/children from 0 to 18 years old (Clarijs, 2016 p.)
Lastly, it should be noted that the GGD provides their services not only during office hours, but there are also operational teams ready for disaster- and crisis situations (GGD-Twente, 2016).

Youth Mental-Healthcare Services (Geestelijke Gezondheidszorg, GGZ)

Youth Mental-Healthcare organizations are aimed to help children and youth with diagnoses and treatment of several mental-health issues. These issues include for instance: Autism, ADHD, compulsive and behavioural disorders, psychosis and various other psychiatric problems (Karakter, 2017). In the Netherlands, approximately 5% of all young people suffer from a mental illness that leads to serious limitations in their functioning or an increased risk of a disrupted development (GGZ-Nederland, 2017). Youth suffering from mental-health issues, can get the help they need at several Youth Mental-Healthcare Services

Social Neighbourhood teams / Youth Teams (Sociale Wijkteams / Jeugdteams)

Social Neighbourhood Teams (literal translation of ‘sociale wijkteams’) are municipal teams that focus on improving youth care at the local level. In providing care at the local level, the teams utilize the available resources of the clients and their network. The idea behind this approach is that at the local level, a more efficient and effective approach can be established. Since the social neighbourhood teams are operating at the local level, the municipality is able to apply their capacities optimally. So when a social neighbourhood team is working on a case, they are always able to apply other municipal services from other domains such as reintegration trajectories, welfare and housing policy (Clarijs, 2016, p. 208).

The integral approach of the social neighborhood teams can differ in each municipality, but the core values on how they work, are like-minded in each municipality. The Social Neighbourhood teams should aim to provide care that is in line with the clients and resources of the municipalities. Some municipalities should focus more on problems that are more prevalent such as vandalism or drug-use. Smaller municipalities might only be able to provide generalized care, in which they have to send the more ‘extreme’ clients to specialist care. For smaller municipalities, it might even be beneficial to have social neighbourhood teams that focus on (health) care problems in general for all ages, instead of just for youth (Clarijs, 2016, p. 208). Due to the fact that social neighbourhood teams differ between each other, the VNG occasionally polls the state of affairs of the social neighbourhood teams. In the summer of 2017 this poll was conducted, which concluded that social neighbourhood teams mainly spend time on: Case-management, kitchen table conversations, making plans for their clients, and offering short-term support (Movisie, 2018).

The social neighbourhood teams themselves consists of various healthcare- and welfare employees. Per municipality, there is a different approach of what kind of healthcare- and welfare employees take part in the social neighbourhood teams. There can be a team of specialists, a team of specialists or combined teams. In addition, larger municipalities are able to afford more teams, in which they can decide to have both a team of specialists and a team of generalists. Which kind of teams exists and why depends on the size and capacities of the municipality, and the problems they are dealing with (Clarijs, 2016, p. 208). In total, 83% of municipalities have sociale neighbourhood teams. The remaining 17% of municipalities organize it differently, for instance with a ‘Centre for youth and family’ or with a social services office at the municipality (Movisie, 2018).
10.2. Interview questions
This appendix consists of the questions asked during the interviews. First, the original Dutch list of questions will be shown, followed by a translated version. It should be taken into consideration that although all the base questions have been asked during the interviews, some follow-up questions where different. Hence, only the base questions are listed.

Dutch Version
Introductievragen
1. Wat is uw taak binnen de jeugdzorg?
2. Hoe lang bent u al werkzaam op uw huidige positie?
3. Wat is naar uw mening de voornaamste positieve verandering van de decentralisatie?
4. Wat is naar uw mening de voornaamste negatieve verandering van de decentralisatie?

Hoofdragen
1. Merkt u, binnen uw organisatie dat het aantal cliënten is toe- of afgenomen?
2. Merkt u dat cliënten langer of korter in zorgtrajecten dan voorheen?
3. Merkt u dat jeugd/verzorgers moeite hebben om de juiste zorg te krijgen die ze nodig hebben?
4. Zijn de mogelijkheden om cliënten door te verwijzen toe- of afgenomen?
5. Merkt u of er meer jeugd terecht komt in crisissituaties dan voorheen?
6. Hebt u meer verantwoordelijkheden gekregen na de transitie?
7. In hoeverre bent u zelf vrij te bepalen hoe u een individueel geval aanpakt?
8. Hebt u uw werkwijze moeten aanpassen na de decentralisatie?
9. Bent u na de decentralisatie langer bezig met administratief werk dan voorheen?

English Version
Introductory questions
1. What is your task in youth care?
2. How long have you been working at your current position?
3. What is, in your opinion, the most positive change due to the decentralization?
4. What is, in your opinion, the most negative change due to the decentralization?

Main questions
1. Do you notice whether there are more or less clients that enter your organization?
2. Do you notice whether clients stay in care trajectories longer or shorter than before?
3. Do you notice difficulties for youth/guardians to find the right form of care they require?
4. Are there more or less possibilities to refer clients to other organizations?
5. Are you noticing whether more youth end up in crisis situations than before?
6. Did you get more responsibilities after the decentralization?
7. To what extent are you free to determine how to approach an individual client?
8. Did you have to change your way of working after the decentralization?
9. Do you have to spend more time on administrative work than before?
10.3. Description of the interviewees
In this research the decision has been made to anonymously refer to the interviewed individuals. Below, a list describing the interviewees has been made, to give an overview of the task description of the interviewees and when the interviews took place. Lastly, each description includes whether the interviewee is directly involved with clients in their job.

**Interview 1. Youth Protection Office Hengelo**
Monday, August 21st 2017, 14:00
Regional manager
Not in direct contact with clients. Represented the Youth Protection Offices’ employees.

**Interview 2. Municipality of Enschede**
Monday, September 11th 2017, 10:30
Senior Advisor Social Development
Not in direct contact with clients. (municipality of Enschede is not in direct contact with their clients). Did represent the social neighbourhood team.

**Interview 3. De Nieuwe Organisatie Almelo, (Social Neighbourhood Team)**
Monday, September 18th 2017, 10:00
Peoples’ manager
Represented the social neighbourhood team employees that are in direct contact with clients. Not in direct contact with clients (anymore).

**Interview 4. Jarabee Hengelo**
Thursday, September 28th 2017, 13:00
Behavioural Scientist
In direct contact with clients, also represented other employees with different positions during the interview.

**Interview 5. Ambiq Hengelo**
Tuesday, October 3th 2017, 13:30
Clustermanager
In direct contact with clients, also represented other employees with different positions during the interview.

**Interview 6. Municipality of Hengelo**
Wednesday, October 18th 2017, 15:00
Policy advisor
Not in direct contact with clients. (municipality of Hengelo is not in direct contact with their clients). Did represent the social neighbourhood team.

**Interview 7. Karakter Enschede**
Wednesday, November 16th 2017, 13:00
Business Manager
Not in direct contact with clients, but with experience in working with clients in prior positions of youth care. Represented various youthcare employees working at Karakter.