

POLICY BRIEF

Lessons from the inside:

Participatory Solutions for Safer
Dutch Asylum Seeker Centers (AZCs)

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About this policy brief

Every year, thousands of people come to the Netherlands to seek asylum. For the first few months, or even years, after their arrival, the asylum center is both their home and their public space. Despite the rules and regulations in place, asylum centers can still be an unsafe environment for many refugees, particularly women and LGBTQIA+ individuals. Fairspace has a vision for a society in which everyone in the Netherlands, regardless of sex, race, gender or gender expression, feels safe moving through public spaces. Based on this vision, the Let's Talk Safety (LTS) project addresses the issues of harassment and gender-based violence (GBV) in Dutch asylum centers (AZCs) by involving asylum seekers and refugees in the design of policy and programming for preventative measures. The project recruited a group of participants from different backgrounds who were currently living in or previously lived in AZCs to discuss their experiences and collaborate on designing solutions. The information and recommendations presented in this policy brief are informed by the participants' perspectives as well as existing research.

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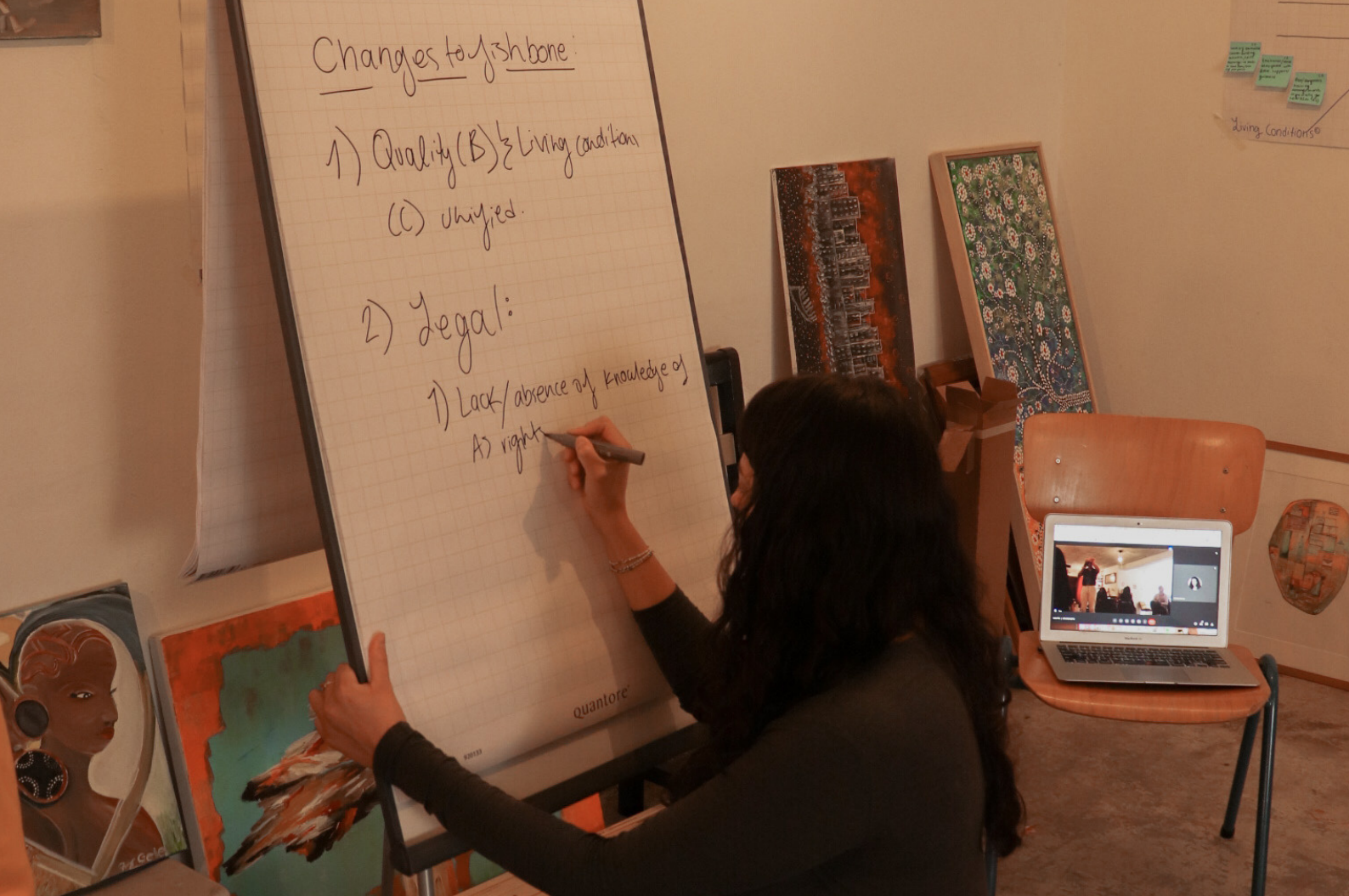
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Introduction

In the Netherlands, the issues of asylum seekers (A/S) and refugees are greatly overlooked by society. Although immigration often becomes a highly politicized issue, the public often loses sight of the difference between economic migration and forced migration which is caused by war and conflict. Compared to other countries, the research available on the Dutch asylum system is quite scarce however, there is evidence which shows that harassment, discrimination and Gender-Based Violence are prevalent issues which threaten the safety of A/S.

This policy brief is based on participatory co-creation sessions led by Fairspace with a diverse group of refugees and A/S who have lived or are currently residing in Dutch Asylum Centers (AZCs). One of the goals of this project was to offer a platform for A/S to raise their concerns and share their experiences within the system while adding to a body of anecdotal evidence that points to the factors that contribute to lack of safety in Dutch AZCs. The second goal is to offer recommendations for preventative measures that are desirable by the target communities.





1

Knowledge & Accessibility to Rights

When an asylum seeker is not fully informed of their rights, their vulnerability to having these rights violated, often with no accountability, increases. This threatens the very concept of protection that is outlined in the Geneva Convention. There are also numerous barriers that prevent A/S from accessing their basic rights which include justice, safety, healthcare and general wellbeing. The inconsistencies in the safety measures across AZCs, as reported by the co-creation participants, make this issue more urgent.

Issues arising from lack of knowledge and accessibility to rights



Vulnerability to aggression & violence:

There was a consensus among the participants that there is often pressure to solve issues internally and that in many cases the police do not get involved unless the safety of COA staff is threatened. The current information given to A/S in this information folder contains practical information about rules and safety but does not offer A/S a way to file police reports independently. By emphasizing the need to discuss incidents with COA staff beforehand, this approach overlooks the unequal power dynamics and makes A/S vulnerable to repeated violations.

Lack of trust and misinformation:

When the system fails to protect people, cooperation becomes more difficult and A/S are less likely to seek help or disclose important information.

Poor mental health: Many A/S spoke of feeling unprotected from harassment by others in the AZC and how that poses a serious threat to both mental and physical health. In principle A/S do have the right to consultations with a psychologist however, eligibility criteria, system overload and long waiting times force many to wait until their mental conditions become dangerous to their health. The co-creation participants also emphasized that a lack of activities, especially those to build skills and integrate, contributes to poor mental health and sometimes leads to conflict or harassment when frustration accumulates.

EVERYBODY HAS THE
RIGHT TO SAFETY NO
MATTER WHO THEY ARE.
THEY HAVE TO
SENSITIZE AND
EDUCATE NEWCOMERS
ABOUT THE
CONSEQUENCES OF
HARASSMENT.
- PARTICIPANT



Finally, more awareness is needed for initiatives such as Bamboo as well as more research on their effectiveness.

Difficult integration process: The message that many refugees get from this experience is that their life in the AZC does not extend beyond eating and sleeping, which makes it very difficult for them to later shift from that to the highly demanding process of integration.



Recommendations



Civil & Human Rights Education: Upon arrival, A/S should be informed in person about their rights and duties as well as the clear responsibilities of all parties involved in their asylum procedure. This information should be delivered in detail and in person with emphasis on the fact that rules and regulations apply to both parties. Human rights and hygiene workshops were proposed by the participants as one of the solutions to help promote tolerance, reduce harassment of minorities, prevent diseases and improve integration from the start of the procedure.

Educational Guiding Map: The COA website has a simplified diagram of the asylum procedure including the institutions involved at each point however, many A/S still struggle to find help for specific issues or face barriers and miscommunication along the way. An online portal with an educational guiding map should make this information (from basic rights to navigating life) more accessible to A/S.

Rights & Responsibilities Training for Staff: COA officers and AZC staff must be fully aware of the rights that A/S are entitled to in order to remedy the issue of accountability. If a specific issue is not within their capacity, they should always be able to refer them to the relevant person/organization.

THERE IS AN ASSUMPTION THAT THIS CODE OF CONDUCT IS ONLY FOR US BECAUSE WE ARE REFUGEES WHEN IT SHOULD BE A TWO-WAY STREET. A GOOD AZC IS GOOD BECAUSE THE STAFF ARE GOOD PEOPLE. EDUCATE THE STAFF BECAUSE THIS IS A SERIOUS JOB.
- PARTICIPANT

When the reliability of AZC staff becomes the norm, A/S will feel safer and have more trust in the system which can also increase the likelihood of everyone following the rules and communicating issues more confidently with the staff.

Skills training & labour market integration: The participants stressed the importance of having activities and building skills to keep busy and stay motivated, encourage independence and become prepared for the labour market. Existing research supports that engagement in activities that promote integration into the local community is integral to trauma recovery.

Capacity building for mental health care providers is necessary to remedy the inconsistencies in the quality and availability of the service which was reported by the participants and also highlighted in previous research. All providers should be trained on:

1. Trauma and PTSD

2. Identifying and referring cases of sexual violence

Most importantly, all providers and especially administrative staff should receive:

1. Sensitivity training; especially on dealing with cases who are not eligible for the services or who will have to wait for extensive periods. It is imperative that staff offer reassurance as well as practical alternatives (such as group support) in the case of system overload.

2. Cross-cultural communication training to eliminate barriers to effective service provision.

Finally, COA should invest in training more providers in order to meet the existing demand for these services and consider the long-term rewards of sustainable and preventative measures rather than a reactive approach.

Open Door Policy: This policy gives refugee status holders the choice to live with family, friends or a host family, and is a viable solution to many of the issues that A/S face. Currently, this policy is being enforced to a certain extent, as it has proven to facilitate a smoother transition for A/S into society by creating the right conditions for their integration. However, more awareness needs to be built about its benefits, so more A/S benefit from it.

Cooperation between COA and local NGOs: COA would benefit from closer cooperation with local organizations that support A/S and refugees. These organizations can offer vital insights on how the system can be improved based on first-hand experiences from A/S. Integrating the perspectives of A/S into the asylum system and creating reforms that reflect real needs, are essential in the prevention of violence and harassment. Local NGOs that provide assistance to A/S are not only experts on their issues but a key point of communication between larger institutions and A/S.

Conclusion

There is a clear gap between what is written in theory about how the Dutch asylum system operates and what A/S experience in practice with regards to safety and human rights in AZCs. The solutions presented here are the starting point to reconceptualizing an entire systemic approach to resettlement of A/S in the Netherlands. COA needs to implement a standardized capacity building strategy for staff in all AZCs to ensure that they can effectively and sensitively handle conflict between A/S. COA also needs to agree with all relevant partner organizations to create the central statute that all parties should abide by. This includes the IND, Police, COC and the Ministry of Justice. Finally, the overall approach to quality of life in AZCs should focus on supporting the first steps of integration by ensuring A/S feel safe and empowered.

COA must make the necessary changes to ensure that the AZC environment is nurturing rather than debilitating.



2

Standardization, Evaluations & Accountability for COA

At present, COA is not subject to formal and independent monitoring and evaluation procedures on a biannual basis. Until 2015, there used to be an external supervisory board which consisted of diverse stakeholders involved in the resettlement process. However, after the supervisory board was disbanded, COA's evaluations take place every four years by either: 1) consulting firms within the Central Government of the Netherlands, or 2) an evaluation from the Ministry of Justice and Security who is the entity responsible for supervising and commissioning COA for its services.

Issues arising from a lack of frequent and independent monitoring and evaluation (M&E) procedures

Accountability: Currently, the lack of frequent and independent M&E procedures to evaluate COA's performance has resulted in a lack of accountability within the organization. Hence, A/S's safety within AZCs, particularly those belonging to vulnerable groups, has been greatly affected. Particularly, the lack of an effective systemic reporting and prosecution of crimes committed in AZCs has affected COA's timely and efficient response to these. As mentioned in a report by the Migration Policy Institute, which was commissioned by the European Union, independent and constant M&E procedures are essential to ensure asylum and resettlement programs are 1) delivering on its policy objectives, 2) identify key strategies and best practices to improve resettlement operations which 3) aid resettlement programs to become more sustainable and cost effective. Having standardized M&E procedures in place for resettlement programs also strengthen all key stakeholder's understanding about how "resettled refugees, host communities, and communities of origin are affected by resettlement."

Variability of quality and safety of AZCs: Our sample of participants, who live in 5 different AZCs, reported a large variation in the quality and safety of AZCs. Their experiences regarding quality of life and safety varied greatly: some participants reported having access



I WAS ASSAULTED BY A MAN IN THE AZC AND WHEN I REPORTED THIS TO COA OFFICERS HE WAS ONLY PUT IN ANOTHER ROOM, HE WAS STILL IN MY BUILDING AND FACED NO CONSEQUENCES. ONLY WHEN HE THREATENED A COA OFFICER AND DAMAGED PROPERTY IN THE CLINIC WAS HE LATER REMOVED FROM THE BUILDING.
- PARTICIPANT

to high-quality Dutch language courses and adequate mental health support, while others reported inhumane sanitary conditions and criminal threats against their person by other A/S that went formally unreported and unpunished by COA staff. Even though these experiences appear anecdotal, the variability of AZCs' quality highlights the lack of a centralized and frequent M&E procedure for COA. This has resulted in unstandardized and inconsistent management of AZCs nationally by COA, with variabilities being defined by the municipalities AZCs are located in.



Lack of cooperation within the chain of stakeholders involved in AS's resettlement and integration: As was stated in Aalbersberg & de Jong's 2019 evaluation of COA, the elimination of the Supervisory Board in 2015, lead to a loss of 1) cooperation amongst stakeholders involved in the resettlement of A/S, and 2) supervisory and advisory oversight from key external experts.

Recommendations

Accountability & variability of quality and safety of AZCs: As proposed by the co-creation participants, there should be a centralized framework of evaluation for AZCs in the Netherlands. Within this framework, an accessible complaints system for A/S should be implemented. This complaints system should be devised for A/S to report any threats against their safety in AZCs, and provide a sound base for follow-up and criminal prosecution if necessary.

Improve cooperation within the chain of stakeholders involved in AS's resettlement and integration: Re-establishing an independent supervisory and/or audit board, in line recommendations mentioned by Alsbersg & de Jong's evaluation (p.27) and the co-creation participants, will improve the cooperation amongst stakeholders and give COA the necessary supervisory and advisory oversight.

In line with this, our participants suggested that the Supervisory Board should be an independent entity that is constituted by multiple parties, which include external experts such as former A/S who have lived at least one year in AZCs, NGOs working directly with A/S, and academia. Including former A/S who have been granted refugee status will give the Supervisory Board expert advice and an essential perspective on the inner workings of living in an AZC that is indispensable to build a fitting M&E framework which delivers on its strategic and policy objectives.

Conclusion

1. Conditions in some AZCs grossly undermine basic human rights. Not every AS is treated equally, and A/S's experiences who identify as LGBTQIA+ fear disproportionately about their safety in AZCs.
2. The lack of a centralized (and independent) monitoring and evaluation for COA's performance, affects the systematic accountability it should be subject to.
3. Including former A/S (particularly those who are part of more vulnerable groups such as LGBTQIA+) in the supervisory oversight of COA's performance is essential to provide expert advice on how to improve the system from within, particularly to improve safety and access to key care services which may facilitate integration into Dutch society.

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