

# EVALUATION ‘VLUCHTHAVEN’



Volunteers Vluchthaven  
Dutch text: June 3, 2014  
Translation: June 25, 2014

# **1 Table of Content**

<b>1 TABLE OF CONTENT.....</b>	<b>2</b>
<b>2 THE VLUCHTHAVEN: WHAT PRECEDED IT?.....</b>	<b>4</b>
<b>3 OBJECTIVES OF VLUCHTHAVEN.....</b>	<b>7</b>
<b>3.1 Methodology .....</b>	<b>8</b>
<b>3.2 Method.....</b>	<b>10</b>
3.2.1 Partnerships.....	11
3.2.2 Door Policy .....	12
<b>4 MAIN LINE 1: INSIGHT IN THE FUTURE PERSPECTIVE AND JURIDICAL SITUATION.....</b>	<b>13</b>
<b>4.1 Demographic data .....</b>	<b>13</b>
<b>4.2. Somalia: The juridical situation .....</b>	<b>14</b>
4.2.1. Somalia: The ambtsbericht December 2013 and the new policy.....	15
4.2.2. Somalia: credibility of the nationality .....	15
<b>4.3 Eritrea &amp; Ethiopia: the juridical situation .....</b>	<b>16</b>
4.3.1 Ethiopia and Eritrea: a complex history.....	18
4.3.2 Ethiopia and Eritrea: identity and return .....	18
4.3.3 A woman who speaks Tigrinya.....	19
4.3.4 Ethiopia: Oromo's and their vulnerable position .....	19
<b>4.4 Sudan and South-Sudan: Legal Situation.....</b>	<b>21</b>
4.4.1 Sudan and South Sudan: collecting evidence .....	22
<b>4.5. The total Group: the legal procedures and two cases .....</b>	<b>22</b>
4.5.1. A Fulbe from Conakry .....	23
4.5.2. An asylum seeker from Jemen in detention.....	24
<b>4.6. Short asylum procedure.....</b>	<b>25</b>
<b>5 MAINLINE 2: REDUCING THE PSYCHOLOGICAL ISSUES – THE HEALTH SERVICES .....</b>	<b>26</b>
<b>5.1. Medical care in the Vluchthaven .....</b>	<b>26</b>
<b>5.2. Psychological care .....</b>	<b>27</b>
<b>5.3 Use of medical information for indication of basic facilities .....</b>	<b>28</b>
5.3.1 Critical remarks.....	29
<b>6 MAIN LINE 3: REVITALISATION AND OBTAINING USEFUL SKILLS FOR BUILDING AN INDEPENDENT LIFE.....</b>	<b>31</b>
<b>6.1 Activation and progress of courses.....</b>	<b>31</b>
<b>7 MAIN LINE 4: ACTIVITIES AIMING FOR RETURN OR STAY.....</b>	<b>32</b>

<b>7.1 De Vluchthaven: a non-average pilot group .....</b>	<b>32</b>
<b>7.2 Return and group pressure.....</b>	<b>33</b>
<b>7.3 Perspective.....</b>	<b>33</b>
<b>8 CONCLUSION, BOTTLE-NECK AND RECOMMENDATIONS.....</b>	<b>34</b>
<b>8.1. Conclusion .....</b>	<b>34</b>
8.1.1. More hurry, less speed .....	34
8.1.2. Policies delayed are policies denied.....	34
8.1.3 Unsafe countries.....	34
8.1.4 The Asylum procedure .....	35
8.1.5 Wellbeing.....	35
8.1.6 Social Care.....	35
8.1.7 We are not there yet, but we are on the road.....	35
8.1.8 Basic facilities .....	35
<b>8.2. Bottlenecks .....</b>	<b>36</b>
8.2.1 Asylum procedure .....	36
8.2.2 Planning .....	36
<b>8.3. Recommendations.....</b>	<b>36</b>
8.3.1 Asylum requests .....	36
8.3.2 Return .....	37
8.3.3 Shelter.....	37

## 2 The Vluchthaven: what preceded it?

Criticism on the Dutch asylum policy is increasing. More and more people and authoritative bodies wonder whether the policy is effective, humane and consistent with human rights. Policies for care and shelter of refugees and the return policies are not attuned to one another for years. Illegal aliens residing in the Netherlands are no longer entitled to social services due to the Linking Act of 1998, and, since 2010, the Municipalities are also forbidden to provide emergency shelter.

Because of this, aliens end up on the street and become destitute and distressed.<sup>1</sup> On the street they are vulnerable, easy prey for human traffickers, forced prostitution and other forms of exploitation and crime. Traumatized people remain untreated, become sick or sicker than they already were, and lead a subhuman existence. Some people are a danger to themselves or to their environment.

The Dutch government asserts that care creates “false hope” and that a repressive policy will motivate these people to return to the country from which they have fled. But is that really so? There are still people who must return, but are unable to do so for various reasons. The asylum policy, from the asylum application to the order to leave and beyond, can be described as a complex set of rules and laws and ever changing situations in countries and opportunities.

The asylum policy is not watertight and is constantly balancing between international treaties and human rights on the one hand, and the harsh, repressive messages from The Hague on the other hand. Therefore guidance and future prospects are a necessity, and care and shelter is a key condition for this. Moreover, it offers room for nuance in a policy that is so complex and so little watertight — and which concerns vulnerable, often disenfranchised and displaced people.

Furthermore, the right to basic services such as “bed, bath and bread” is simply a human right. The *European Committee of Social Rights* decided accordingly and asked the Dutch government to “Adopt all possible measures with a view to avoiding serious, irreparable injury to the integrity of persons at immediate risk of destitution, through the implementation of a co-ordinated approach at national and municipal levels with a view to ensure that their basic needs (shelter, clothes and food) are met.”<sup>2</sup>

Secretary of State Teeven is reluctant and points undocumented migrants at their obligation to leave and the opportunity to reside in a “movement-constraining location” (VBL)<sup>3</sup> although he himself recognizes that the asylum policy is not watertight.

---

<sup>1</sup> Maak werk van menswaardige opvang (Make work of humane care), note by SP, January 2014.

<sup>2</sup> [http://www.raadvanstate.nl/adviezen/samenvattingen/tekstsamenvatting.html?id=217&summary\\_only=](http://www.raadvanstate.nl/adviezen/samenvattingen/tekstsamenvatting.html?id=217&summary_only=)

<sup>3</sup> <http://www.rijksoverheid.nl/bestanden/documenten-en-publicaties/kamerstukken/2013/11/06/voorlopig-standpunt-van-het-europees-comite-voor-sociale-rechten/lp-v-j-0000004414.pdf>

At the meeting of the Committee on General Affairs of the City Council of Amsterdam of November 14, 2013, Mayor Van der Laan stated that the group of asylum seekers who had united under the banner *We are here*, and were at the time temporarily staying in a squatted office building at Weteringschans, Amsterdam, would be given shelter and counselling for a period of six months. In those six months, the asylum seekers would be allowed time and rest to work on their future prospects.

The mayor explained that three elements had brought him to this decision: the humanitarian argument that the situation of asylum seekers living on the street in the Netherlands is inhumane; the weighty decision of the European Committee of Social Rights of October 25, 2013,<sup>4</sup> which states that asylum seekers on the street have a right to shelter, food and clothing; and finally the insight that a “return policy” that puts people on the street is counterproductive, because asylum seekers are then just trying to survive and cannot think about their future.

The shelter began on December 2, 2013, in a former prison in Havenstraat, Amsterdam, dubbed the Vluchthaven (Refuge Haven). This shelter facility was available to those people who registered with the Dutch Council for Refugees (VluchtelingenWerk Nederland) during the period of the Vluchtkerk (Refuge Church)<sup>5</sup> and allowed their files to be inspected. 159 people were on this list, of which 57 people had found shelter elsewhere, had returned, were deceased, or lived in an asylum-seeker centre (AZC) or in a care facility based on medical grounds.

Eventually, 101 people moved into the Vluchthaven. In February, 26 asylum seekers who had been given shelter at Surinameplein in connection with medical and/or psychological issues were also given access to the Vluchthaven. This brought the total number of residents of the Vluchthaven to 127 from February 2014 onwards.

This document is the evaluation of the Vluchthaven pilot project, composed by a number of involved people, in consultation with the residents of the Vluchthaven.

Amsterdam, June 3, 2014

Maartje Terpstra, asylum lawyer

Henk Griffioen, agogue

Irene Martens, health-care psychologist

---

<sup>4</sup> European Committee of Social Rights: Decision on immediate measures

<sup>5</sup> Rapportage over uitvoering individualisering hulpaanbod aan vluchtkerkbewoners (Report on the implementation of the individualization of aid offered to Vluchtkerk residents), Vluchtelingenwerk Nederland, September 2013

Danielle Roorda, medical doctor in training

Petra Tensen

Marijn van der List

Imre Kleinlugtenbelt

### **3 Objectives of Vluchthaven**

The Vluchthaven is a pilot project of six months to provide shelter for asylum seekers on the basis of cooperation between the municipality of Amsterdam, the residents, and a group of volunteers that supports the asylum seekers since a long time. In addition, some organizations have been involved in guiding and motivating the asylum seekers. Furthermore, the Municipality of Amsterdam has conducted consultation with the Dutch Council for Refugees, DT&V, IND, and State Secretary Teeven, without the presence of the residents or volunteers.

After the asylum seekers moved into the Vluchthaven, both they and the volunteers (on 17 december 2013), as well as the Municipality of Amsterdam (on January 14 2014)<sup>6</sup> developed a concept plan for action, which were both discussed mid-January during a communal meeting between volunteers, asylum seekers and the Municipality. The Municipality of Amsterdam formulated the objective as follows:

*"The purpose of the individual aid offer is that the people in the period until the 1<sup>st</sup> of June, can work optimally on their future. This can entail obtaining a residence permit and completing procedures. It will also entail orienting on and support with resettlement and return to countries of origin, because someone has no prospect on a residence permit in the Netherlands. In cases when someone wants to return, but when this is not possible through no fault of his own, action should be taken."*

This did not entail that for every individual a definite and conclusive solution would be present on the 1<sup>st</sup> of June. After all, that was partly depending on the regulation of the Government. Both the Municipality and the volunteers emphasized the creation of boundary conditions in order for people to get rest, to organize their thoughts, to get guidance, and to work on their cases (for example, to obtain proof), so that a prospect could be developed.

In accordance it was therefore decided that the success of the Havenstraat would be measured by the extent of clarity that people have obtained with regard to their prospect by the 1<sup>st</sup> of June 2014 - wherever that future will be – and the optimization of the circumstances in which people can work on obtaining a residence permit in the Netherlands, or on their return to their country of origin, or on the departure to a third country.

The project also offers the opportunity to look at the bottlenecks that make people unable to take a step forward towards a better future, both at the side of the asylum seekers, and at the side of the national asylum policy. Collectively the decision was made to monitor each individual process carefully, so that at the end of the pilot an overview could be made on the prospects of the asylum seekers, the individual choices that have been made with regard to that, and the bottlenecks that have surfaced.

---

<sup>6</sup> Municipality of Amsterdam, *New Directions: activiteiten en uitvoering project Vluchthaven Amsterdam 2014*.

### 3.1 Methodology

By offering basic needs such as shelter, food, privacy, heating, and hygiene the first condition to work on a future are created. According to the theory of Maslow<sup>7</sup> (see image) people can only develop themselves, when basic needs (as placed at lower level) are satisfied.



Although this model is not supported by empirical research, different parties endorse (Groen Links<sup>8</sup>, SP<sup>9</sup>, VluchtelingenWerk Nederland<sup>10</sup>) it as a basic assumption: "Research has furthermore shown that the lack of care is not at all conducive for the willingness to leave. In order to work on return one must feel strong and self-secured. That does not succeed while living on the street, when someone is only focused on surviving. Thereby, (ex-) asylum seekers are often traumatized."

Therefore within rest, safety and security that is offered by a dignified shelter, within the Vluchthaven a phased trajectory has been followed on the basis of four guidelines that correspond with one and another, as has been proposed by the Municipality of Amsterdam in their plan of action: 'New Directions':

---

<sup>7</sup> See for the theory of Maslow,

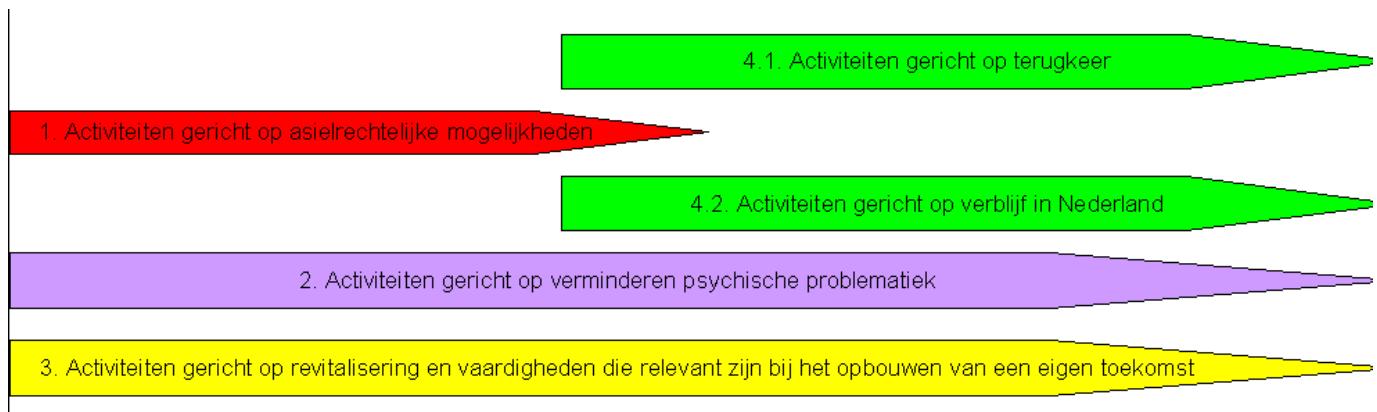
[http://123management.nl/0/040\\_mensen/a400\\_mensen\\_19\\_motivatie\\_klassiek.html](http://123management.nl/0/040_mensen/a400_mensen_19_motivatie_klassiek.html)

<sup>8</sup> Consent initiative proposal by the Council member Mrs Doorninck 's of 10<sup>th</sup> of January, 2013 entitled: Offering Perspective: a proactive immigration policy.'

<sup>9</sup> 'Create a shelter with respect of human value', note SP January 2014.

<sup>10</sup> Report on implementation of individual help offer to the Vluchtkerk residents. 11<sup>th</sup> of September 2013.

## Main Lines ' New Directions '



### 1. Insight in the future prospect and legal situation

First of all, the legal possibilities are explored and made transparent. In practice the Dutch Council for Refugees continue their previous activities, by using the already existing individualized files in order to discuss, update and register the present situation and the prospect of the client.<sup>11</sup> The resident makes his own decision after exploring his individual options. For this optimal guidance and space is pledged and no time limit has been set, because, as the Municipality states: "The goal is to make a case favorable for a repeated asylum application (Hasa) – this is not limited by time, it is about the chance."<sup>12</sup> (see Chapter 3).

### 2. Activities focused on reducing the psychological problems

A second aspect is focused on the clarity about the possible "improper functioning" as a result of serious psychological and medical problems. Within the whole group of asylum seekers (159 and more) a relatively large part of the people has psychological problems that hinder "working on a solution." For these people a stable accommodation is important in order to be considered for (trauma) treatment. The size is estimated at fifty to sixty people. There is a long waiting list at the GGZ. For the project it is very important to have an individual indication about the seriousness and the treatment advice, within very short time.<sup>13</sup> (see Chapter 4).

<sup>11</sup> Municipality Amsterdam, New Directions: Activities and implementation of project Vlucht haven Amsterdam 2014

<sup>12</sup> Municipality Amsterdam, New Directions: Activities and implementation of project Vlucht haven Amsterdam 2014

<sup>13</sup> Municipality Amsterdam, New Directions: Activities and implementation of project Vlucht haven Amsterdam 2014

### **3. Revitalization and obtaining skills that can be used in building up an independent life.**

The third main line concerns activating the residents to think about their future. Many asylum seekers have lived for years on the streets and have been in detention. Therefore it is very difficult for them to imagine a future. They feel powerless because of post-traumatic stress disorders, because of living on the street and because of the rejection of their asylum request, and because they have been in detention, where people are humiliated because of the visitations and the days long stays in isolation cells. This makes them gloomy and dreadful with regard to their future.

Being repeatedly, and for a long time in situations during which one doesn't experience to have control on its own life, can lead to feelings of apathy and passiveness. By offering a free choice of activities and vocational courses, people will be activated and challenged: this creates a chance to obtain positive experiences and strengthened the self-image. By means of personal conversation each resident will get individually adjusted guidance (see chapter 5).

### **4. Activities focused on return or reside (depending on personal capabilities)**

The fourth main line is focused on considerations that every residents makes individually, in order to come to a personal conclusion with regard to the future: working on return, migration to a third country, or staying in Netherlands with — or without status. According to the Municipality of Amsterdam individual guidance will be leading. Although the guidance is thus individually and there was no fixed deadline, the Municipality does expect a conclusion from every asylum seeker with regard to its future on the 1<sup>st</sup> of June, 2014; the end date of the Vluchthaven pilot project. The Municipality has taken insufficient view about the fact that this issue requires more thinking time and intensive mentoring. In addition, there must still be given direction to the future prospects (see Chapter 6).

#### **3.2 Method**

The Dutch Council for Refugees was responsible for the personal guidance in the individual files and procedures. Lawyers and volunteers were also contributed to this. To obtain the necessary documents, there was also occasional cooperation with the Red Cross, IND, DT&V and embassies.

The Dutch Council for Refugee, together with volunteers and a number of residents who are seen as group representatives, has made a questionnaire in order to get clear which vocational courses were wanted. Volunteers have inventoried this and have offered a carrier test and personal conversations in case this was wanted.

On the basis of the obtained information and preferences, an offer was composed of vocational courses, in addition to more general courses such as language courses, or a FIRST

AID course. Besides this, the volunteers also organized activities that contributed to activation (sports, music, creativity). Furthermore, the volunteers offered a course on enterprise-focused thinking, which was accessible to everybody.

In the last phase refugees were guided in making conclusions, by individual conversations with the Dutch Council for Refugees, lawyers, confidants (volunteers) and DT&V. To encourage return, the Municipality of Amsterdam was looking for possible projects and companies in some countries of origin. The Municipality of Amsterdam also explored the possibilities of migration to a third country and made proposals through the Dutch Council for Refugees and DT&V.

The phase in which people physically recovered enough, are mentally strong and judicially well informed enough in order to make a decision, follows up the phase in which clarity on the judicial perspective of the asylum seeker has been given, and medical and psychological help is offered (and has had an effect), and the activating phase has had a sufficient effect. This phase is not followed as was proposed in the plan of action. The results of the pilot project can therefore not be judged accordingly to the directives of the plan.

### **3.2.1 Partnerships**

Both in the Vluchthaven, and in the period of tent camps and squat building that was preceding it, the volunteers have insisted on partnerships with the Municipality, lawyers, the Dutch Council for Refugees, the GGD, and other organizations of importance. The cooperation has been sought during the whole period and improved on several points, but was difficult as well at certain moments.

The Municipality of Amsterdam was in control of the pilot project and decided when volunteers were, or where not, involved. In the last period there were regular consultations between the Municipality and several volunteers. Several times the recommendations and observations from the volunteers were pushed aside, even though they have the most experience with the group of asylum seekers. This has sometimes led to friction.

The residents themselves were informed sporadically by the Municipality, for example about the planning of the trajectory, and a number of times their has been a visit by the Major Van Der Laan and his colleagues at the Vluchthaven. However in the communication with the residents there was noise and unnecessary ambiguity, for example with regard to the media coverage of the extension of the accommodation for subgroups (the sick and the asylum seekers who will cooperate on return). This news was in Parool newspaper before it was discussed with the residents themselves.

The stress enhancing impact of unclear communication with the residents was underestimated. The group of volunteers` opinion is that in the future there must be a more constructive way of working together and more involvement of the residents themselves in the communication lines.

### **3.2.2 Door Policy**

Because the Vluchthaven is a former detention building, the Ministry of Security and Justice recommended to use security personnel, rather than approachable guidance. This was executed first by staff of the prison institution, and later by a security company. Many residents, visitors, and regular volunteers had to identify themselves when entering, which heightened the threshold for visitors to stop by, and unnecessarily brought the atmosphere of the detention regime inside the building.

## 4 Main line 1: Insight in the future perspective and juridical situation

### 4.1 Demographic data

Table 1 gives an overview of the countries of origin of the residents of the Vluchthaven. The group consisted of 159 people who were known by the VWAZ, and an extra 26 people from Surinamerplein who were permitted to stay in the Vluchthaven since February. In the overview in table 1 (and the diagrams further on in this chapter) the people with whom there is no contact anymore are left out. People who in the mean time got shelter at another location (for example Moo or ASKV) and the people who got a residence permit or shelter in an asylum seekers centre (AZC) are included in the table. The table shows that the greater part of the people is from countries where the general security situation is bad. The largest group of the inhabitants of the Vluchthaven is from South/Central Somalia (almost 30 percent is from Somalia, of whom the majority comes from South/Central Somalia)

**Table 1: Overview of the countries of origin**

Country	Number	Percentage
Algeria	2	1.21
Burma	1	0.61
Burkina Faso	2	1.21
Burundi	8	4.85
China	1	0.61
Congo	2	1.21
Eritrea	31	18.79
Ethiopia	28	16.97
Ghana	1	0.61
Guiney	5	3.03
Ivory Coast	10	6.06
Kenya	1	0.61
Liberia	1	0.61
Libya	2	1.21
Mali	1	0.61
Mauritania	1	0.61
Uganda	1	0.61
Saudi-Arabia	1	0.61
Sierra Leone	1	0.61
Sudan	14	8.48
Somalia	48	29.09
Yemen	2	1.21
South-Sudan	1	0.61

**Total**

**165**

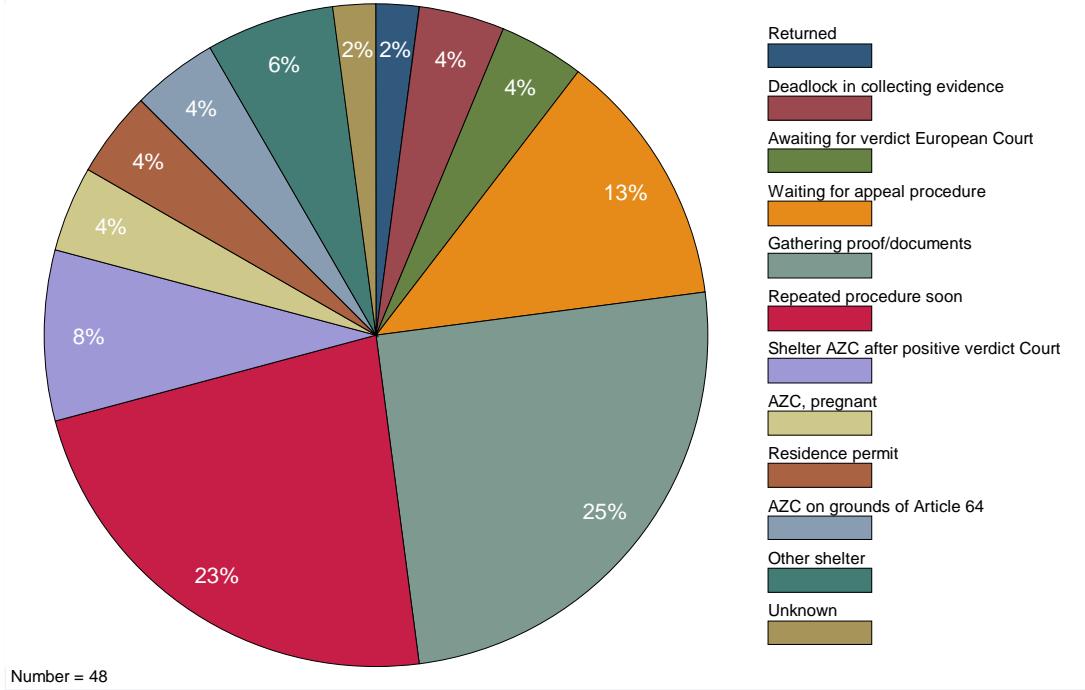
**100**

## 4.2. Somalia: The juridical situation

Pie chart 1 shows the different phases in which the somali inhabitants from the Vluchthaven currently find themselves with regard to their procedure. One person has returned,<sup>14</sup> 13 percent is waiting for his or her appeal procedure; 8 percent has been given shelter in an AZC after a positive verdict from the judge; 4 percent stays in an AZC on grounds of Article 64,<sup>15</sup> 25 percent is busy with collecting evidence (further information on the Somali embassy and the Dutch ambtsbericht is given below) and 23 percent will lodge a repeated asylum request in the foreseeable future. Two Somalis have been given a residence permit. This occurred in the last two weeks of the stay in the Vluchthaven.

**Pie chart 1**

Overview Procedures - Somalia



<sup>14</sup> During the shelter in the Vluchtkerk one Somalia man has been forcibly returned to Somalia. He is injured during an attack on a hotel in Mogadishu. This man has not been included in the overview, because at the time of subscribing at Vluchtelingenwerk he was no longer in the Netherlands.

<sup>15</sup> Article 64: deportation is postponed as long as the health situation of the alien or that of one of his family members makes it irresponsible to travel.

#### **4.2.1. Somalia: The ambtsbericht<sup>16</sup> December 2013 and the new policy**

In December 2013 a new ambtsbericht on Somalia appeared. In this report it was written that the general security situation in the whole of South/Central Somalia is bad and that the human rights situation for certain groups in particular has deteriorated. Among these groups is the group of Somalis who have to return from West to South/Central Somalia.

Although the report is clear about the risks that people face when they return from West to South/Central Somalia, it was only in March 2014 that State Secretary Fred Teeven came with a new policy. Because of this, VluchtelingenWerk and the lawyers of the Somali inhabitants of the Vluchthaven had to wait until March 2014 before they could determine whether or not the Somalis from the Vluchthaven fall under the new rules.

Many Somalis have lodged a repeated asylum request. Before the 1<sup>st</sup> of June, the Immigration and Naturalisation Service (IND) was able to take only seven of the cases into consideration. Several Somali cases will be considered after the 1st of June. On the 31<sup>st</sup> of May it is unclear whether the City Council would give shelter to those who are waiting the outcome of their procedure. When there will be no prolongation of shelter, the Somalis, almost a quarter of the inhabitants of the Vluchthaven, have to prepare their repeated asylum request while living on the street. This can have a negative effect on the course of the procedure.

The new policy of March 2014 is formulated unclearly; therefore the IND does not execute a clear policy, which makes that the courts also have difficulties in interpreting the new policy.

#### **4.2.2. Somalia: credibility of the nationality**

The second problem for the Somali inhabitants is that the by them declared nationality of origin is disputed. Because of the war and the absence of a government in South/Central Somalia for years identity- or other official document- were not issued. The investigation to the origin of the asylum seekers from South/Central Somalia could therefore only be done by asking questions on the area of origin or by a language analysis.

Part of the Somalis has not been able to answer these questions correctly, or has received a negative outcome on the language analysis. This happened for several reasons. Some Somalis were traumatized by the war violence and could therefore not explain well, several Somalis have had no education and their cognitive perspective seems to be underdeveloped, which made it difficult for them to explain well. Part of them does indeed not come from the declared area, and a part has been on the run its whole life, which makes that there is no clear country of origin.

---

<sup>16</sup> An Ambtsbericht is a report from the Dutch Ministry of Foreign Affairs, that contains information on countries of origin, and that is used by the IND as a source to determine the asylum requests.

According to the UNHCR 1,1 million people within South/Central Somalia are on the run, and more than one million Somalis has sought protection abroad (this on a general population between the four and six million). The actual origin of a Somali is therefore difficult, and not clear-cut to establish.

Since April 2014, there is a Somali embassy in Brussels, which is authorized to issue official documents to Somali citizens. Part of the Somalis from the Vluchthaven has gone to this embassy and has received official documents that established their identity and nationality. However, the IND attaches little value to the by the Somali embassy issued documents and holds on to its own judgement with regard to the credibility of the origin of the Somali asylum seekers.

DT&V does value the judgement of the Somali embassy on nationality and origin. This results in bizarre situations. The following example will illustrate this:

*The nationality of a Somali boy in the Vluchthaven is not believed by the IND. The IND rejected his asylum request because he could not make it credible that he comes from South/Central Somalia. According to the language analyst he most probably originated from Kenya.*

*The boy is placed in alien detention and DT&V presents him at the embassy of Kenya and Somalia. The Kenyan embassy says that he is not from Kenya. The Somali embassy says that he is from South/Central Somalia. DT&V starts a procedure to deport the boy to South/Central Somalia. The court does not allow this. The boy is released and ends up on the street, and afterwards in the Vluchthaven.*

*The Dutch Council for Refugees calls from the Vluchthaven the Somali embassy to ask if the Somali embassy can provide proof that the boy is presented by DT&V to the Somali embassy and that it is established that the boy has the Somali nationality. The embassy issues this proof and the boy brings it to the IND to show that he comes from South/Central Somalia. However, the IND does not attach much value to the document of the embassy and does not examine the request substantively whether the boy is at risk when he returns back to South/Central Somalia.*

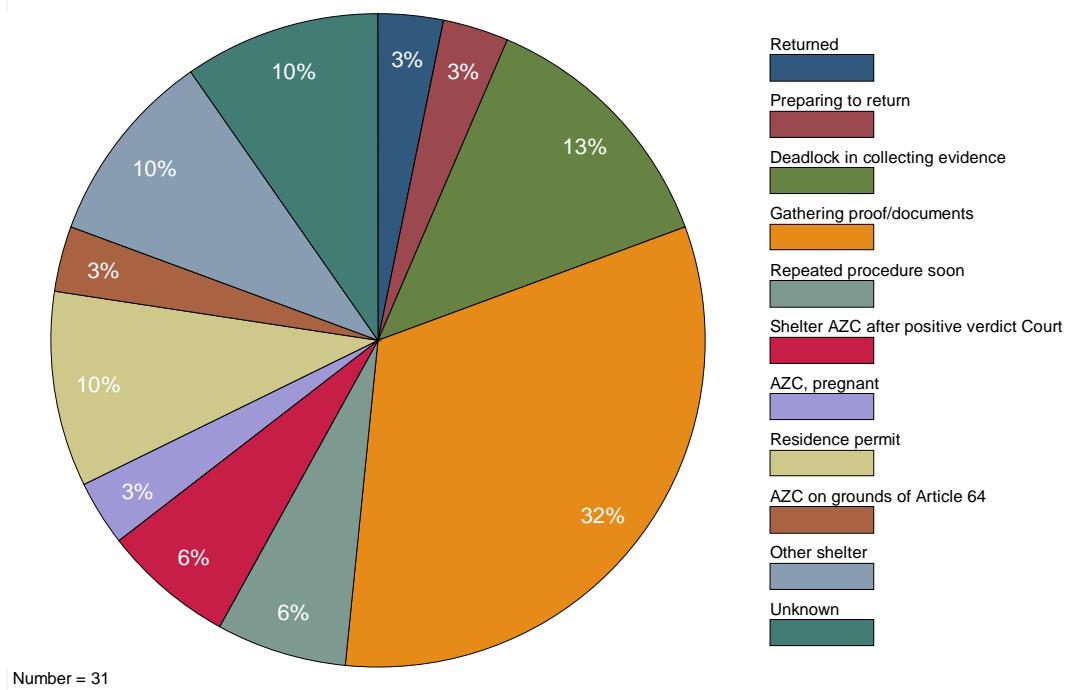
*The result is that DT&V will try to deport the boy to South/Central Somalia, where he after all originates from, while the IND never has examined if he is at a real risk to be killed, kidnapped, or tortured in case he returns. This boy falls in the gaps of the asylum system and for the time being can do nothing except trying to survive on the streets.*

#### **4.3 Eritrea & Ethiopia: the juridical situation**

In the Vluchthaven there is a significant group from Eritrea (19 percent) and Ethiopia (17 percent). The diagram below shows in which phase the two groups are.

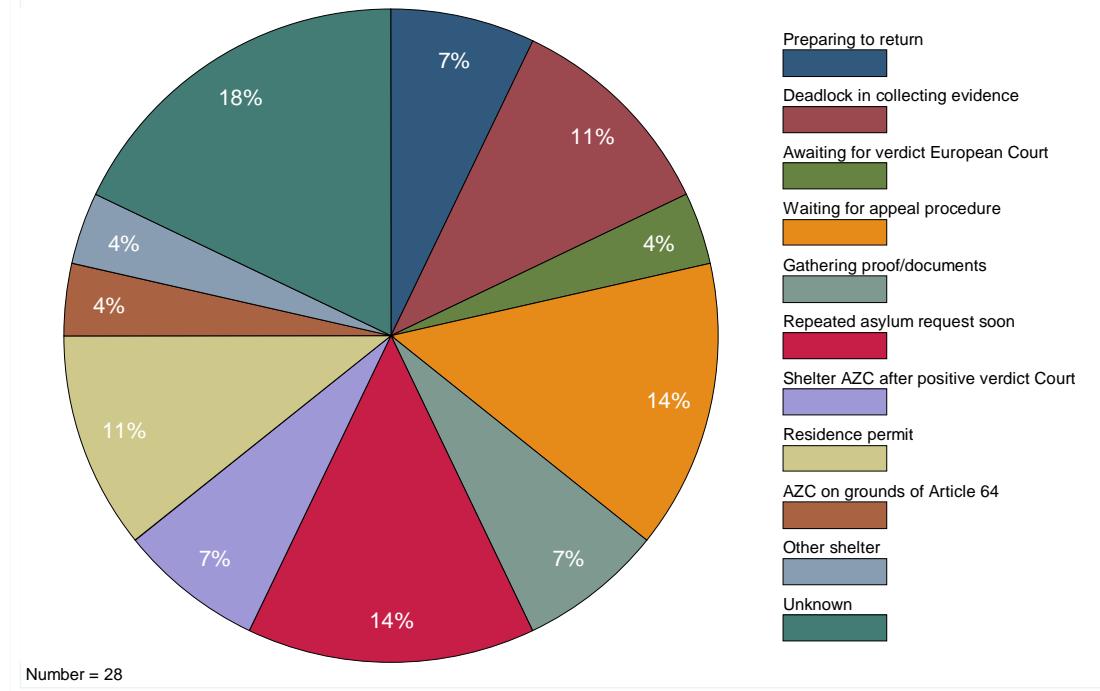
From the group from Eritrea (pie chart 2) 3 percent has returned and 3 percent is working on return. 13 percent has reached a deadlock in collecting evidence (see 3.3.2 for the difficulties with the Eritrean embassy), 32 percent is currently collecting evidence, 6 percent has been given shelter in an AZC after a positive verdict of the court, 3 percent has been given shelter on grounds of article 64, 6 percent will start soon its HASA and 10 percent (three persons) has been given a residence permit.

**Pie chart 2**  
Overview Procedures - Eritrea



Within the Ethiopian group there are 15 Oromo's. Pie chart 3 shows the situation of the Ethiopian group in the Vluchthaven. 7 Percent is working on return, 11 percent has reached a deadlock in collecting evidence (because of several reasons), 4 percent is waiting on the verdict of the European court, 14 percent is waiting for the verdict of the appeal procedure, 7 percent has been given shelter in an AZC after a positive verdict of the court, 4 percent has been given shelter on grounds of article 64, 7 percent is collecting evidence, 14 percent will soon start its HASA en 11 percent has been given a residence permit.

**Pie chart 3**  
Overview Procedures - Ethiopia



#### 4.3.1 Ethiopia and Eritrea: a complex history

Ethiopia and Eritrea are arch-enemies and are at a state of war with each other. In addition, there is significant human trafficking from Eritrea and Ethiopia which involves gross exploitation and sexual abuse: a modern variant of the old slave trade. A number of asylum seekers of Eritrean and Ethiopian descent that are living in the vluchthaven seems to have been victim of this and fled from Sudan or Kenya, where they had been sold to families by human traffickers.

It is difficult to reach them and to get to know their true stories. They carry a past of long-term exploitation, often along with sexual abuse and do not trust anyone. For part of them there is no solution yet and a period of six month is not enough to win back their trust.

#### 4.3.2 Ethiopia and Eritrea: identity and return

In addition, some of the asylum seekers of mixed descent – for example an Eritrean mother and Ethiopian father, or born in Eritrea but raised in Ethiopia – are accepted by neither country as a national. It is not in the interest of Ethiopia or Eritrea to take back an asylum seeker that may be loyal to the arch-enemy. Neither Eritrea nor Ethiopia will take them back, but also the Netherlands does not accept them.

#### **4.3.3 A woman who speaks Tigrinya**

*A woman who claims to come from Eritrea and who speaks Tigrinya is not believed by the IND. The Court has doubts about the judgment of the IND and founded her appeal. The IND appeals against this decision and wins the case. By law is established that it is not credible that Mrs. is from Eritrea.*

*The woman is taken into alien detention and the DT&V tells Mrs. that there are no impediments with regard to her deportation to Eritrea. The situation is incomprehensible for the Mrs.: The IND did not believe that she originated from Eritrea, and yet she is at risk to be deported to Eritrea.*

*The DT&V answers that a procedure for return will be launched at the Eritrean Embassy, because she speaks Tigrinya, which is especially spoken in Eritrea. The Court notes that there can be no question of deportation to Eritrea, because Mrs. is at serious risk once she would be deported to Eritrea. Mrs. is released and left on the street.*

*The IND claims that it is not certain that Mrs. comes from Eritrea and that the DT&V should have tried to deport her to Ethiopia. Therefore, mrs. is not granted a residence permit. Mrs. then attempts to obtain documents from her country of origin and receives a school statement of her old school. She takes the document to the Ethiopian and the Eritrean Embassies, hoping that one of these countries will issue an affirmation of her provenance.*

*Neither Embassies wants to grant affirmation on the basis of the school statement. She doesn't know what other actions she can start, in order to receive a determination of her nationality. Her parents are from Eritrea; they were deported from Ethiopia to Eritrea, while she, as a child, was at school at that time. Since then, she is does not know what happened to her parents and states that she grew up in the house of her schoolteacher.*

#### **4.3.4 Ethiopia: Oromo's and their vulnerable position**

Most people in the Vluchthaven coming from Ethiopia belong to the tribe of the Oromo. The Oromo constitute a large population group in Ethiopia, and are perceived as a threat by the ruling tribe (Tigray). In May 2014, Oromo students demonstrated for equal rights in Ethiopia. At least 47 students were killed by security service; many other students were mistreated and detained.<sup>17</sup>

Both at home and abroad, the Oromo have united to stand up for their rights, among others by setting up and joining the OLF (Oromo Liberation Front). By the Ethiopian Government, this party is seen and condemned as a terrorist organization. The authorities therefore persecute any person that is associated with the party, or who is a member of it.

---

<sup>17</sup> <http://www.amnesty.org/en/library/asset/AFR25/002/2014/en/f4f5e9f9--ee7a--47a6--8257--11208e8364eb/afr250022014en.pdf> als ook op de site van de BBC  
<http://www.bbc.com/news/world-africa-27251331>

Some Oromo in the Vluchthaven are very active in bringing attention on the disadvantaged position of the Oromo in Ethiopia. They organize meetings, demonstrations and cultural events to ask for attention to the position of Oromo in Ethiopia. According to country of origin information, the Ethiopian government keeps a close eye on these activities.<sup>18</sup>

For a few of these Oromo in the Vluchthaven repeated asylum applications have been lodged, because upon return to Ethiopia they run a serious risk of being associated with the OLF and of being detained and/or tortured on that ground. Due to the complexity of these cases, the Court provisionally ruled that they are allowed to stay in the Netherlands until a multiple chamber of the Court has reached a conclusion.

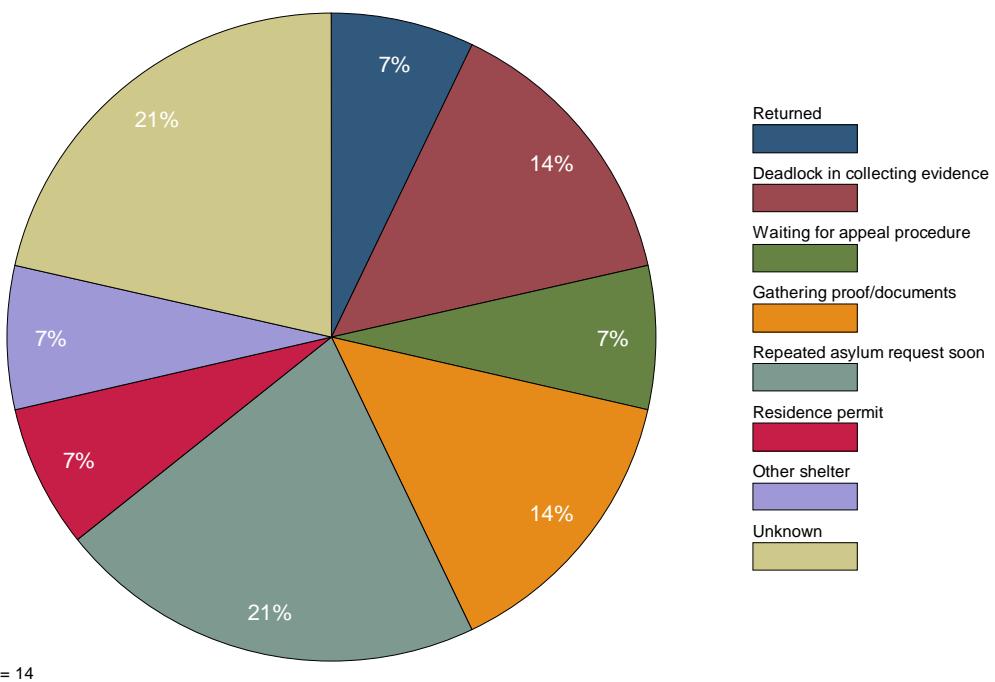
---

<sup>18</sup> The structural data shows that the Ethiopian authorities are very active on the internet. The internet is monitored, websites blocked, advanced spyware programs are used and computers are hacked. Check [www.cyberethiopia.com](http://www.cyberethiopia.com) and [www.privacyinternational.org](http://www.privacyinternational.org). This shows that the Ethiopian authorities infiltrate the computers of foreign opponents.

#### 4.4 Sudan and South-Sudan: Legal Situation

A last large group of asylum seekers within the Vluchthaven, originates from Sudan and South Sudan, (9 percent). Pie chart 4 below shows that 7 percent has returned<sup>19</sup>, 14 percent is in the process of collecting evidence, 1 person has received a residence permit in the mean time, and no less than 21 percent soon has a HASA.<sup>20</sup>

Pie chart 4  
Overview Procedures - Sudan



On the 7<sup>th</sup> of January, 2014, the European Court of Human Rights ruled in a case against Switzerland that the security situation and the human rights situation in Sudan is alarming. International reports confirm this. With regard to the political opponents of Sudan, the Court found that there is a risk of torture and persecution upon return. The Court noted that this is not only in the case of high-profile political activists, but for every (alleged) opponent of the current regime. Finally, the Court stated that Sudan monitors political opponents outside Sudan.

Some of the asylum seekers in the Vluchthaven who originate from Sudan, fear to be considered as a (supposed) political opponent. A report by the *Waging Peace* 20<sup>21</sup> shows that

<sup>19</sup> One during the Vluchtkerk: this person claims to be imprisoned and mistreated upon return. Research is done by the UNHCR and the IND to his story

<sup>20</sup> Please note that the total is 14, the percentage should be interpreted accordingly.

<sup>21</sup> <http://www.wagingpeace.info/>

this suspicion takes place easily and almost everyone from the West returning to Sudan, voluntary or forced, is being held and questioned at the airport, which may involve torture and/or abuse. Speaking a dialect or accent, belonging to a non-Arab tribe, politically active family members, or origin of Darfur can be sufficient reason.

It is difficult for an asylum seeker to submit proof that show that upon return, precisely he will be classified as a (supposed) opponent by the Sudanese authorities. However, this burden of proof lies by the applicant concerned.

Another part of the asylum seekers originates from South Sudan. On the 11<sup>th</sup> of February, 2014 the UN Refugee Agency called out to suspend return to this area because of emerging serious violence. One resident of the Vluchthaven from the South Sudan has received shelter of the Government on these basis.

#### **4.4.1 Sudan and South Sudan: collecting evidence**

In the group from Sudan 14 percent is stuck gathering evidence. A small part of this group has in the past period hardly worked on their procedure. However, the vast majority has tried to obtain documents, but the new evidence needs be accommodated with authenticity marks to be considered valid by the IND. These authenticity validations should be obtained through the Sudanese Government: through the Embassy or the Ministry of Foreign Affairs. However, many Sudanese have fear to turn to their authorities, as they were the reason for their flight.

#### **4.5. The total Group: the legal procedures and two cases**

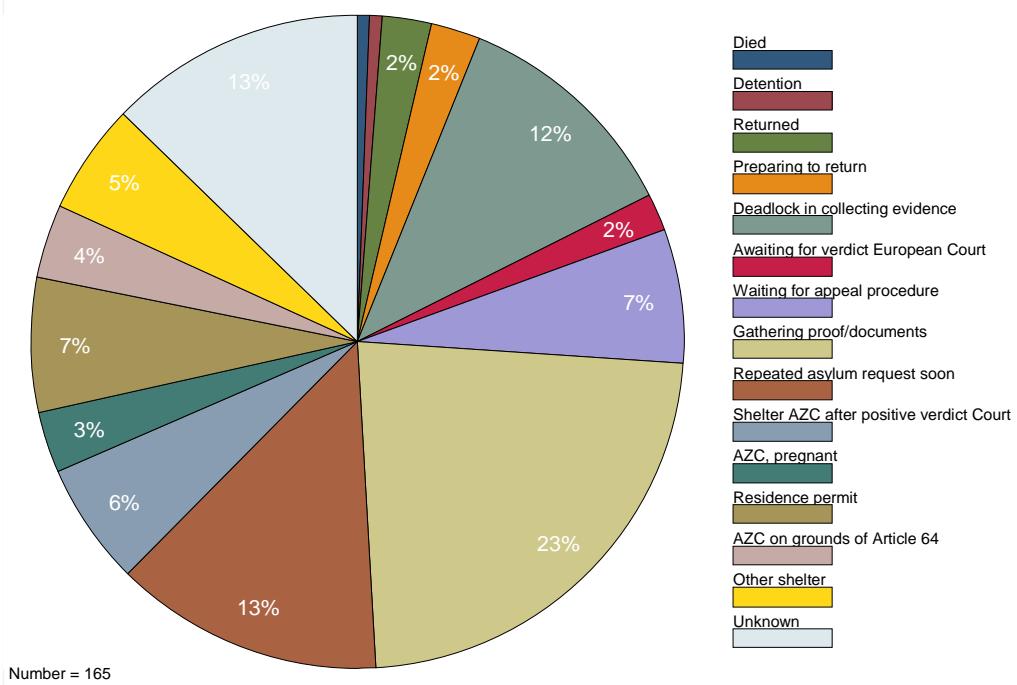
The period of shelter of the asylum seekers in the Vluchthaven has made it clear that to obtain evidence that make the fear of prosecution upon return plausible, is highly time consuming. Pie chart 5 shows the situation of the whole group, from which it can be concluded that many people still are in the process of gathering evidence in order to start a new procedure (23 percent) and that many people will soon lodge a repeated asylum application (13 percent).

To this, it is important to mention that a number of people was allowed only later in the Vluchthaven. These are the people who came from the Surinameplein in February 2014.<sup>22</sup> This means that these people (six from alien detention and 26 people from Surinameplein) have had considerably less time to work on their future. Especially alien detention has its impact on the wellbeing/condition of the people; this could hinder their ability to work on their future. Next to that, the release of these people from alien detention shows that deportation to the country of origin failed.

---

<sup>22</sup> the municipality was helpful to prevent people of the Vluchthaven group to be placed in foreign detention in this period.

Pie chart 5  
Overview Procedures - Vluchthavengroup



The current eight-day asylum procedure is too short to be able to provide enough evidence for the asylum request and the asylum seekers can rarely work on this when living on the streets. They are predominantly concerned and engaged with surviving and have no time and opportunity to engage in collecting evidence to support their asylum story.

To illustrate this, two examples from the recent period are described below in which bottlenecks as well as opportunities come forward.

#### 4.5.1. A Fulbe from Conakry

*It concerns a male asylum seeker from Conakry, Guinee. He is Fulbe and has been in prison for fourteen months in Conakry in 2011 because of his political activities. While there, he has been subjected to torture. The man escaped from prison and fled to the Netherlands in July 2012.*

*At arrival in the Netherlands he ends up in the shortened procedure. He tells the IND-employee he wants to talk about his time in prison but he does not get the chance to tell his story. His asylum request is seen implausible, especially because his statement about a particular experience is said to be in contradiction with what is described in the general official notice. Also, the appeal filed by his assigned lawyer has been rejected.*

*In September 2012 he loses his right to stay in an asylum centre because of his obligation to leave and he ends up on the street. After a lawyer change, an application is filed at the*

*iMMO<sup>23</sup> in February 2013. However, it takes up to the 19<sup>th</sup> of September, 2013, before he undergoes psychological and medical examination. Subsequently, several months pass by before the results of the iMMO examination are disclosed.*

*Meanwhile, he finds, due to the help of a volunteer, a list online on which all names are displayed of people who are either murdered or injured since the appointment of current president Alpha Conde in 2010. His name is not on the list but he recognizes a large part of the names; the majority is Fulbe, the same ethnicity as himself.*

*On the internet an interview with the father of his murdered friend is found. The father explains in the interview that the government pressured him to lie about the circumstances of his son's death. The government wanted the father to state that his son committed suicide, although, according to the father, he has been killed in a demonstration by the army.*

*The man has constantly stated that he was involved in the demonstration at which this friend was killed. This involvement has been questioned by the IND because his statement differed from what is said in the general official notice about the demonstration and the course of the demonstration. Via the Dutch Council for Refugees an official acknowledged eyewitness account is found. This eyewitness account corresponds to the man's asylum story. The iMMO has irrefutably determined that the man could not certify properly during his first hearing because of his posttraumatic stress disorder. His mental condition has never been examined by the IND.*

*After a year of intensive cooperation, the new evidence and the iMMO report are enough for a second asylum application. In April 2014, the man is told by the IND that he is assigned a residence permit for a fixed period on the basis of article 29.*

#### **4.5.2. An asylum seeker from Jemen in detention**

*An asylum seeker from Jemen who stayed at the tented camp in Osdorp was held in detention after the evacuation of the camp in November 2012. An employee of Amnesty International visited him to talk about his experiences in detention, during which his asylum story also came up. As a rare exception, she contacted a to her known asylum lawyer and the main office of Amnesty International in London where a woman was employed who had lived in Jemen. The man, the lawyer and the employee of Amnesty International have been working for six months to collect evidence. During the whole process the asylum seeker was in detention.*

*A human rights organisation in Jemen and a journalist have researched the asylum story of the asylum seeker on request of Amnesty International. After six months convincing evidence*

---

<sup>23</sup> The iMMO contributes to the protection of human rights, in particular by conducting investigations of suspected victims of torture and inhumane treatment and the transfer of this expertise. This is done in particular in the context of an asylum procedure. This supports the implementation of laws and regulations regarding a careful asylum procedure.

*emerged from this research, which enabled the man to lodge a second asylum application. Six weeks later he received a residence permit asylum after all.*

*In principle, Amnesty International does not deal with individual asylum cases. Therefore, this possibility occurred by high exceptionality within the context of publishing a general report on alien detention. In most cases the asylum seeker and the lawyer do not have easy access to local human rights organisations because of which it takes much longer to obtain evidence.*

#### **4.6. Short asylum procedure**

Next to the fact that evidence cannot or hardly be obtained in the short regular eight-day asylum procedure, many asylum seekers cannot overcome their shame to talk about sexual violence or their sexual orientation in such a short period of time. Many women in the Vluchthaven are found to have endured sexual violence of which they did not dare to account when applying for asylum.

In these situations it is not possible for them to apply for asylum again because the IND assumes that the asylum seeker trusts the Dutch authorities enough to immediately talk about endured sexual violence. Unless this matter is stated in the eight-day procedure, it cannot later be appealed to in most cases.

## **5 Mainline 2: reducing the psychological issues – the health services**

### **5.1. Medical care in the Vluchthaven**

In the Vluchthaven healthcare is organized by the GGD. Two times per week a consultation hour has been held: once a week by a nurse from the GGD and once a week by a doctor. Every time the consultation hour took place in the same recognisable room in the Vluchthaven.

At the start of the pilot project Vluchthaven, cooperation with volunteers and Dokters van de Wereld took place to ensure a good transfer and to establish the organisation. For example, the suitcase which contains medical records built up by professional volunteers (with permission of the patients) has been shared with the new nurse(s) and doctor(s). Next to that, an oral transmission has taken place.

This accessible type of health care in the form of consultation hours worked out very well. People could receive the care much quicker than before. Fewer volunteers were needed to help people in the medical field, except in some cases of chronically ill people and several people who received secondary care and already got support from volunteers for that. Guidance/accompaniment and referral to secondary care existed when needed. Medication was provided and when needed the costs of these medicines were covered by the municipality (a five euro personal contribution for medication is asked for since January which can be declared at the CVZ-fund).

A personal place to sleep, a permanent residence, rest, less insecurity, the possibility to cook and different pursuits has its positive impact on the health condition of the residents. It enabled people to work on their case. Both hygiene and nutrition (both qualitative and quantitative) improved, and people were less stressed. However, doctors observed that the stress increased again among many people in the last period of the Vluchthaven.

Additionally, the knowledge about the residents' medical files has improved. It has become especially clear that people have had contact with different doctors since their arrival in the Netherlands. There is rarely just one place where the medical file is build-up. On the one hand, this is caused by the fact that the people do not have insurance and mostly only receive medical care in emergency situations. This mostly happens through emergency care or aid agency services like the Kruispost ,which delivers care per episode.

Also, people rarely have a permanent doctor in the second line or – more importantly – a permanent doctor in the first line. It is hard to get a good and complete overview of the medical files because the contact with the doctor is mostly occidental and there is no long-term care and moreover, often there is no permanent doctor to whom the medical correspondence can be sent to. The transfer of the medical file from the COA to a new general practitioner or treating doctor also does not always take place. Furthermore, the file is often fragmented because many residents have lived a nomadic life. These barriers for building a

good and complete medical file impede in some cases the assessment of the vulnerability of asylum seekers. Doctors and nurses often had to rely on the memory and saved correspondence of the residents.

The municipality mostly discusses the chronic and more complex medical issues within the group and views this in the light of possibilities to return. We want to emphasise that also the simpler but common health problems caused by street life – as well in terms of health risks as the accessibility of health care – have decreased considerably in the period of shelter/support in the Vluchthaven.

In general, the Vluchthaven shows that the somatic medical condition of undocumented people can be improved strongly by providing accessible care and basic facilities. Seen in the context of the tax for care and overall to the creed ‘prevention is better than cure’, this is a relevant finding when it comes to care for undocumented people in the Netherlands.

## 5.2. Psychological care

Several residents have been referred for psychological support during their stay at the Vluchthaven, for example to I-Psy, Equator and TOV, or were already in treatment there. Although at the start of the Vluchthaven consensus existed between the municipality, GGD and volunteers about the need of starting psychological support early, we were unsuccessful in providing this treatment for the people from the start. At the start it was estimated that around fifty to sixty people would be eligible for (trauma) treatment. Permanent housing is regarded as boundary condition for this.

Many asylum seekers suffer from psychological issues; mostly chronic and posttraumatic stress disorder (PTSD) due to experiences in the country of origin, street life, life in alien detention and comorbid depressions. Because of the influence these disorders have on the ability of the asylum seekers to reflect, conversations about the future –wherever that may be – are difficult. Vital functions, like sleeping, eating pattern and appetite and energy level are often disturbed.

When the mind is predominantly influenced by fears, sorrow, reliving experiences, avoidance, for example of memories and everything they might call up, and excessive vigilance –the feeling to always have to be alert, startle and being suspicious –this will negatively influence the refugee’s reflectivity and decision making. Current fears because of media coverage, politics and the network concerning the situation in the country of origin or the position of foreigners in the Netherlands, will heighten the stress level of individuals; the asylum seeker then experiences powerlessness. Fears in the here and now because of media reports, politics and the network regarding the situation in the country of origin, or the position of aliens in the Netherlands, will make the stress level increase: the asylum seeker experiences feelings of powerlessness.

From the beginning of March 2014, Equator Foundation, partner in Arq Psychotrauma Expert Group, has been present in the Vluchthaven. Because of their involvement in such a late stadium, it was only possible to see and speak to the inhabitants regarding diagnosis and intake, and it was not possible to start psychological treatment. This is actually contradictory to the conclusions of the Amsterdam Municipality in the evaluation of the Vluchthaven, in which it says that: ‘the necessary care was offered to all persons of whom there was concern about their psychological and/or physical state.’

In response to a request from the Amsterdam Municipality, Equator has carried out diagnostics for psychological/psychiatric problems and an indication (assessment/referral) for treatment and a DSM IV classification has been given for 45 people. The *Global Assessment of Functioning Scale* (GAF-score) within this DSM IV-classification has been the guiding principle for indication (assessment/referral) for treatment (in case of a GAF-score lower than 60).

At the closure of the Vluchthaven, it has become known that the Municipality of Amsterdam, in consultation with the GGD, has decided to offer shelter to the 45 persons with an indication for treatment and a GAF-score lower than 60, on the condition that they give permission for insight into their medical files. If this does not happen, it is to be expected that a large number of the people will drop back to a lower level of functioning, due to the loss of basic facilities.

### **5.3 Use of medical information for indication of basic facilities**

Already before moving into the Vluchthaven, there was discussion between the professional volunteers (medical en psychological/psychiatric assistance), the GGD, some care organisations and the Municipality of Amsterdam, about how to deal with medical information of individual asylum seekers. This resulted in a complaint at the Medical Inspection, lodged by Mister K. Aalbersberg, psychiatrist and already for some time involved with the group of asylum seekers, some of whom stay at the Vluchthaven.

The cause of the complaint – which was not followed through<sup>24</sup>- was the use of medical information with the goal to make a distinction between people who are especially vulnerable- and the people who do not (or are not said to) fall into that category. This distinction has as a main goal to decide who needs to be given basic facilities, and who shouldn't. The idea behind this was, according to GGD and the Municipality, that the national state poses restrictions when it comes to shelter, and therefore they use medical criteria in order to be able to create an exception for those who are most in need. Without a medical assessment, the Municipality would not be able to make the exception.

---

<sup>24</sup> The complaint with the inspection was not followed through after the inspection had conversations with Mister Aalbersberg and GGD and there seemed to be an improvement in the way the GGD policy was carried out in Amsterdam.

Basic facilities, however, are necessary for everyone in order to be able to lead a life in human dignity. The basic facilities that the most vulnerable received were not related to a specific medical shelter or treatment for which information from a medical file would logically be necessary. The use of a medical file to determine who is a candidate for basic shelter, means the use of a medical file to determine who will sleep on the street (*fit for the street*).

The request for a ‘Top 10 of harrowing cases’, which the GGD has made previously, therefore met with quite some criticism, based on the professional guidelines for BIG-registered care professionals such as medical doctors, psychiatrists and (clinical) psychologists, and the professional ethics that are supposed to be part of that. We include some points in this evaluation because decisions which can be taken at the time of closing of the Vluchthaven can have far-reaching consequences for the lives of the inhabitants, namely: basic facilities, or no basic facilities. The position of the asylum seeker is always exceedingly vulnerable and he or she therefore should be given protection, regardless of the medical condition or the person.

### 5.3.1 Critical remarks

- A patient should give permission for the sharing of parts of information from his or her medical file. The patient should be aware that the information will be given, for which purpose, and that the information will be used solely for that purpose. A separate, specific permission is needed for use for other purposes. The residents of the Vluchthaven, and at earlier locations, have been asked to share their medical files with the GGD and other care services, with the purpose of informing the Municipality of Amsterdam about the need for shelter. In this context, the request satisfied the requirements – as opposed to earlier experiences- but the statements of permission were distributed without explanation on the afternoon before the closing day. The statements had to be signed within a short period of time. A large number of the inhabitants is illiterate, does not speak the Dutch language, and does not have another option than signing the statement, since not signing means an end to the basic facilities.
- A list was put up in the central hall with the full names and countries of origin of the people whose medical files were requested, which is contradictory to the right to privacy.
- When doctors give a medical assessment outside the context of an indication for treatment or a relationship of treatment, this in itself is dubious. A doctor should put the interests of their client first, should use an attitude of transparency and be open for verification, and should not abuse their medical knowledge. This is in contradiction with giving a medical assessment of a patient in order to serve the political or policy-related goal of deciding whether or not basic facilities should be offered. The criteria which have been used for making the aforementioned distinction have been subject to change, and are therefore not transparent and cannot be checked. In the case of the Vluchthaven, the GAF-score was used; earlier, criteria of the GGD – hospital-ward criteria – were used, which has caused much discussion. For example: a diabetic who injects insulin receives shelter, a diabetic

who takes insulin orally has to live in the street- but both need regular intake of food in order to minimize health risks.

- Also, this screening is in contradiction with the verdict of the Amsterdam court (8<sup>th</sup> of May, 2014) and the European court, that the undocumented should receive bed, bath and bread. It follows that it is absolutely unethical to say that a person should first develop an illness or disorder so that they will be considered for basic facilities;
- Finally, the point of departure just described is diametrically opposed to the assumptions in the medical care profession that prevention is better than cure. The ombudsman and the politicians in The Hague<sup>25</sup> have often underlined the point of departure that living in a situation of illegality results in bigger risks for the overall health situation of the asylum seeker. The current way of doing things is therefore unnecessarily expensive because of a delaying of costs, it increases the risks for the life of the asylum seeker and it also increases the risk for nuisance to society.

---

<sup>25</sup> F. Teeven: ‘a number of the aliens chooses life in illegality above return to the country of origin. Life in illegality, however, brings with it risks, amongst which the health risks mentioned by the ombudsman.’  
<http://www.rijksoverheid.nl/bestanden/documenten---en---publicaties/kamerstukken/2013/12/03/kabinet/reactie---onderzoek---nationale---ombudsman---naar---de---medische---zorg---voor---vreemdelingen/lp---v---j---0000004614.pdf>.

## **6 Main line 3: revitalisation and obtaining useful skills for building an independent life**

### **6.1 Activation and progress of courses**

In March, the fourth month of the Vluchthaven, there was consensus from the Municipality about a large number of courses, which took place in the period end of March until April, or April until May. There was a wide variety on offer by professionals, but the number of lessons was limited. Thanks to much dedication from volunteers, there had been a wider offer of work experience placements, but the Municipality did not agree with all the placements for courses and work.

At some of the lessons, not all the participants were present, which appeared to be due to fear. The Municipality spread the message that participation in a course meant preparation for a return to the country of origin, which a number of the inhabitants interpreted as ‘signing for return’. As soon as this misunderstanding was solved, the courses started well.

The participants were enthusiastic and showed to be hard-working students who were eager to learn. All of the teachers were very enthusiastic about their motivation, dedication and industriousness. A car company proposed to take two people as interns, and a number of teachers said they would have liked to continue the course. Part of the reason for this was the fact that the courses did not satisfy the students’ eagerness to learn: the courses were limited, and only taught the basic principles of a profession.

The volunteers who were involved describe the effect of the courses as overwhelming. They saw how people, who previously reacted mostly on the basis of their emotions, developed more strength and therefore thought more rationally and became more reflective. That the basic facilities and the offer of activation had a positive effect on people’s wellbeing is an absolute fact for those involved.

That this positive development has not always lead to finding a solution for the individual problems and to a decision about the future, is only logical. That someone functions better and is more able to take control of its own life and position, does not take away external problems – such as the safety situation in a country of origin.

At the start there was some doubt whether the many people in the group that are ill, would be able to take part in the courses and training. However, the opposite proved to be the case. They, too, participated enthusiastically; for them, too, this had a positive effect on their wellbeing, even though the psychological treatments had not started yet.

## **7 Main line 4: activities aiming for return or stay**

The personal conversations which were organised by Vluchtelingenwerk Nederland, during the process, have been attended by everyone- save a few exceptions. Discussion of the individual file was the central theme. The high percentage of attendance during the conversations points to an active participation and a motivation to find a solution. An opportunity was offered to lodge a repeated asylum application, as well as the opportunity to work towards return or travel to an onward destination.

Many activities that were essential for the possibility to work on return, started later than planned. The activation courses did not start at the beginning of January, but only at the end of March. Psychological screening only started in March- therefore treatment could not be started anymore before the 1<sup>st</sup> of June- and the Dutch Council for Refugees needed the first months to acquire an overview over all the files before being able to give a consistent advice. Because of this, there has been insufficient time in the last phase, in which the results of the activation could be transformed into decisions and efficient action regarding return or stay.

Both the number of people that can stay, as the number of people with an option for return, could have increased substantially if more time had been available. Discontinuing these processes in an early stage does not serve anyone.

### **7.1 De Vluchthaven: a non-average pilot group**

The group of people in the Havenstraat had already been staying together in various squatted buildings in Amsterdam. In doing so, they received support from a large group of people: from Amsterdam and from elsewhere; activists, Christians, Muslims, students, politicians, lawyers and many others who thought that they had a right to shelter that is compatible with human dignity – ‘no refugee on the streets or in jail.’ Initially, the group refused individual assessment and requested shelter as a group.

The sometimes extremely poor circumstances caused a lot of conflict within the group and there was a great lack of trust, also towards the volunteers. Still, there was a strong sense of cohesion in the group, all came from the same situation of homelessness and all were making a stand for their rights. At first, if someone wanted to return, there were no possibilities for the person to communicate that freely. Back then, the group pressure did not allow that. As the time passed, and there still was no solution, the group pressure subsided.

At the end of the stay in the Vluchtkantoor at the Weteringschans, the building where people stayed before the Vluchthaven, there were already some people who were the first to publicly declare they wanted to return. Most of the volunteers have never held people back who had a safe return option; actually they supported them in this. Moreover, it was always clear that at

crucial moments the asylum seekers took decisions, and the volunteers could at most offer their advice.

Since the arrival in the Vluchthaven, the improvement in the living conditions has brought more peace. The result was fewer fights, a more relaxed atmosphere and emerging personal interests. The group bond has strongly decreased, and people are more on their own, or only with the people of their floor, and they also go out more during the day. There have hardly been any communal meetings. The moment the stress increases, or the thought on returning to the streets becomes more realistic, people seek each other, and then the communal struggle for basic rights creates a team spirit that transcends the conflicts and differences that in their own countries of origin has such a dividing effect.

## **7.2 Return and group pressure**

After a short period of the Havenstraat, the group pressure had disappeared for a large part. Everybody was free to make his or her own choices and repatriating could be discussed more freely, especially when you compare it with the period before the Havenstraat. The statement of the municipality that people do not return because of the group pressure or pressure from volunteers is not correct.

Also on the individual level big changes in thinking have occurred. People who previously raised their voices out of despair, without any perspective on a future and a dignified existence, who mainly reacted impulsive and on their emotions, have found back their dignity through this shelter and education. This made it possible for people to think about a profession and a personal future, a huge step for people who are driven from their land by war or otherwise.

The difference becomes truly visible when the residents of the Vluchthaven are compared with the residents of the Vluchtgarage. They were part of the same group, but were divided by the selection made by the municipality. Now there are great differences in thinking and behaviour between the two groups, only because of the difference in living conditions.

## **7.3 Perspective**

However, many who live in the Vluchthaven do see that a realistic solution has not been found yet, not here, nor in their country of origin. By ending this shelter before a solution has been found, the asylum seekers have been thrown back to their old thinking pattern. People become angry and impulsive again, and achieved results are at least partly overthrown.

## **8 Conclusion, bottle-neck and recommendations**

### **8.1. Conclusion**

The Vluchthaven has been a pilot project of the Municipality of Amsterdam. The project shows the ambition and the sense of reality of the municipality with regard to the necessity to offer basic facilities to people – undocumented and asylum seekers especially – who according to the government reside illegal in the Netherlands.

#### **8.1.1. More hurry, less speed**

The pilot project has been set up in a hurry, and therefore a few essential things have started late, or were realised late. In the first place, this concerns practical matters. One example is the possibility for women to lock their room from the inside when they would go to bed, which created a feeling of unsafety. Also the activating programs started only in the fourth month of the stay. Also determining the treatment indications for psychological treatment for 45 inhabitants started late, which made that nobody could start with its treatment within the test period of six months.

#### **8.1.2. Policies delayed are policies denied**

We have the opinion that the processes and procedures in which the asylum seekers found themselves - whether they were directed on resettlement or on transit, or on the obtainment of a residence permit – where progressing at a slower pace than expected, because of the hasty start of the project. Therefore, not all people could make a decision with regard to their own situation and future in the final phase of the Vluchthaven. Not one specific person or party is to blame for this, and especially not the asylum seekers themselves. The pilot project was new, and much had to be reinvented during the project. Furthermore, it concerned a non-ordinary pilot group, with many traumas and stress related complains. The project could also not ban out the effects of outside factors. The asylum policy, from the asylum request until the departure order and the period afterwards, is a complex system of rules and laws that is constantly changing because of the changing situations in the countries of origin, and because of changing rules.

#### **8.1.3 Unsafe countries**

The greater part of the inhabitants of the Vluchthaven originates from countries that are unsafe, and to where people cannot or do not dare to return to, and often cannot be expelled by force: Somalia, Eritrea, Ethiopia (for Oromo's and mixed Eritreans) and Sudan and South-Sudan, and different countries in West- and Central Africa. Reports by the Dutch government (ambtsberichten), Amnesty International and Human Rights Watch describe the human rights situation in these countries as alarming and critical.

#### **8.1.4 The Asylum procedure**

Many of the inhabitants of the Vluchthaven have used the past period to collect evidence, and by now they have lodged a repeated asylum application. Some have gone through the procedure, and have received a residence permit; others are in the procedure at the time of writing, and others are collecting evidence, or got stuck. Collecting evidence takes time, and this is hardly possible from the street. Beside this, there are people who have returned on their own initiative, or left to another country.

#### **8.1.5 Wellbeing**

Besides the effects within the juridical area, the Vluchthaven also had the effect that people who initially raised their voices without any perspective on the future and a dignified treatment, who especially reacted impulsive and to their emotions, have found back their human dignity during this shelter and education. Therefore, the inhabitants and the volunteers have the opinion that the offered basic facilities and the assistance during the six months, has had a strong and positive effect on the wellbeing of the inhabitants. Even though there were still many limitations, and the start of the project had been slow, many inhabitants during the six months were better able to get clarity on their future and were showing more decisiveness.

#### **8.1.6 Social Care**

The Municipality of Amsterdam has made the right choice to give shelter to his group of asylum seekers, and to stand next to them, rather than repressively above them. By not seeing these people as stubborn people who do not cooperate, but to see them as people of flesh and blood with a story. Because the asylum policy is not watertight – even State Secretary Teeven agrees with that – there has to be someone who shelters those who fall between two stools. The Municipality of Amsterdam has done so, and because of that we want to compliment the Municipality, and especially the major, as he showed the ambition to offer social care and to learn together with the residents from this project. Thereby he gained experiences that can be helpful for others in the future.

#### **8.1.7 We are not there yet, but we are on the road**

The desire for change is present among the residents, the volunteers, and the municipality. However, after six months we are not there yet. Much has been sowed on fertile ground, however there was too little time to harvest. To put an end date to the project is logical looking at the current political atmosphere, but limited the asylum seekers' changes. As not every file is captured by rules and laws, also complicated individual asylum request and outside factors such as war are not guided by an imposed end date of the 1<sup>st</sup> of June.

#### **8.1.8 Basic facilities**

At last: Basic facilities such as bed and bread are called basic facilities for a reason. They are needed simply to keep up standing, and everybody is entitled to them, simply on the ground of being human. A human right is not bound by conditions, actions, or certain qualities.

Therefore, a human right is also not bound by a persons' residence status, the direction in which he or she moves, the future that he or she imagines, the amount in which he or she disappoints somebody, or exactly does what the State Secretary expects. Basic facilities should simply be accessible to everybody.

## 8.2. Bottlenecks

An evaluation should always consist bottle-necks and recommendations. They will be summarized below, however, they also refer to the chapters in this report.

### 8.2.1 Asylum procedure

As described in chapter 3, the most important bottlenecks are the holes in the asylum procedure, meaning that it is not watertight, the security situation in different countries of origin of the residents of the Vluchthaven, the cooperation of countries with regard to return, the collection of documents and other proof.

### 8.2.2 Planning

Furthermore, bottlenecks were experienced, with regard to the planning of the pilot project of the Vluchthaven. When the Vluchthaven was ended, there was little self-criticism among the Municipality with regard to the belayed start. The Municipality did connect conclusions to the beforehand set-up plan of action, and also measured its successes of the pilot project to this set-up plan of actions. To our proposition to also incorporate the conclusions and findings of volunteers and lawyers was decided negative.

## 8.3. Recommendations

### 8.3.1 Asylum requests

- Before the asylum procedure starts, there should be done more thorough investigation to the psychological, medical and intellectual limitations of the asylum seeker to make a consistent and detailed declaration.
- Do not settle the asylum requests of vulnerable people or asylum seekers from 'difficult countries' within the eight-day procedure. The assumption that somebody who asks asylum has thus enough confidence in the Dutch authorities to be able and to dare to speak about everything is not realistic when the asylum seeker suffers trauma for example because of sexual violence or torture.
- Documents that are issued by diplomatic representatives should in principle be accepted by the IND as legitimate proof. The IND should not be able to replace this with its own judgement.

- Do not deny asylum seekers shelter as long as they are in procedure. In the case of the regular asylum procedure, the shelter does not take longer than two months after which the asylum seekers are left on the streets. This is damaging the asylum procedure.

### **8.3.2 Return**

- With regard to the determination of the nationality all services should follow the same guidelines. IND & DT&V should co-ordinate with each other, in order to prevent contradictions and catch 22 scenario's for asylum seekers.
- Adjust the return policy to the reality and the risks asylum seekers actually face when they return: Too fast countries are determined sufficiently safe for return.
- Make accuracy the point of departure, in stead of strictness and deterrence: Give asylum seekers the benefit of the doubt.
- Revise the statement that ‘anyone who wants to return can do so’. Arguing that asylum seekers can return after a procedure, but do not want to – and at the same time claim that the asylum policy is not watertight – will not hold.
- Take the fears of asylum seekers with regard to their return more serious, and thus do not talk solely of the financial aspects. Although the government has determined that rejected asylum seekers are not refugees, and thus ‘bogus,’ in the reality they are hardly ever tempted to return by the offered money.
- Lower the threshold for return by monitoring in the country of origin or transit destinations, or by creating safe houses for returned asylum seekers.

### **8.3.3 Shelter**

- Give shelter to asylum seekers who are out of procedure, but cannot be deported. At any rate, they have the right to receive bed, bath and bread, in accordance with the international treaties. When shelter is absent, asylum seekers are not able to develop future prospects – wherever that future will be. Shelter protects asylum seekers against criminality, such as sexual abuse, and against the development or worsening of illnesses and disorders.
- By offering shelter, you make it possible for asylum seekers to get psychological and medical treatment, something that cannot be started without a roof, hygiene, and food. From the start medical and psychological diagnose should be possible, so that the treatment can be started quickly.
- When providing shelter, start immediately with activating, and increase the number of offered courses and work places, in order for people to be truly educated enough to exercise a profession, whether this will be in the country of origin, a third country, or in the Netherlands itself, after the (repeated) asylum application is granted.
- Stimulate the creation of small groups of fellow sufferers among asylum seekers and promote cooperation between the Municipality, societal organisations and volunteers

to increase the chances for success, both with regard to return as to the granting the permissions to stay.

- Take care of a human friendly door policy, in order for the positive effects of the shelter on the rest and wellbeing of the asylum seekers to increase, and in order to not deter volunteers from coming, which is important for the improvement of the guidance.
- Individualize the planning with regard to decisions on the future, and adjust this to the personal circumstances of the concerning asylum seekers.