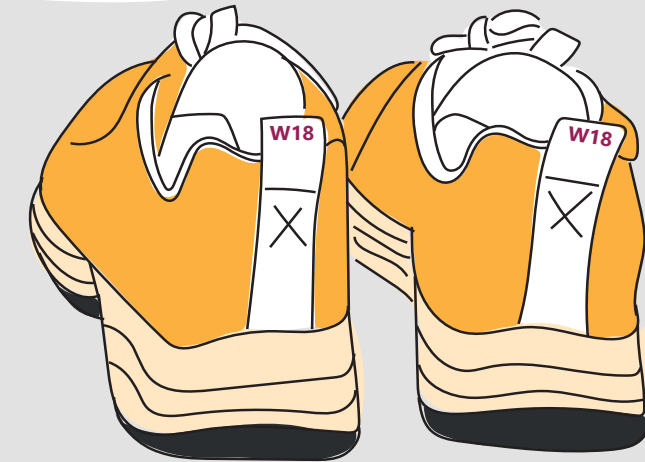


Changing **perspective** in the transition from Youth Care to WMO

Reimagining the role of the municipal public service to improve the perspective of young adults who are temporarily unable to study or work



Changing perspective in the transition from Youth Care to WMO
**Reimagining the role of the municipal public service to improve the
perspective of young adults who are temporarily unable to study or work**

Master thesis for the master programme **Design for Interaction**,
submitted to **Delft University of Technology**, for the degree of
Master of Science

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Executive summary

This study is about young adults who cannot work or study due to mental health problems. When they turn 18, they have to wait for new care because of the transition from youth care to the adult social domain. This is why they are referred to as the W18 (waiteen) in this report.

Besides waiting time, this study outlines four other problems that make this transition difficult: (1) Budget deficits in the social domain and a sharp drop in the young person's budget after the transition from youth care to WMO; (2) There is a different human view (mensbeeld) per law and organisation, complicating transitions between services; (3) If a citizen has a complex problem, more domains, laws and counters are involved and (4) The W18 do not understand why the system is so complex, which leads to distrust towards the government.

The **research question** of the thesis is: *How can the municipality of The Hague improve its interaction with mentally vulnerable young adults around the life event of turning 18, using proactive design principles?*

The research was conducted from the human-centred design perspective. Six needs were defined from interviews with 3 W18'ers and 2 parents of W18'ers.

The W18 need:

- Someone to help and guide them;
- Information on what to expect;
- Customised contact;
- More room to make and fix mistakes;
- A positive approach during the conversation with a focus on what they can do;
- To be treated as human beings by the system.

The **design goal** is to improve the perspective of young adults with mental health problems by creating clarity in their interaction with the municipal service. A journey of the current interactions was made. In examining the current journey, it was visible that the intake interview in particular evoked many negative feelings.

As a result, the IMprint was developed: a matrix that can be used as a conversation tool and indication tool during intake interviews (Figure A). A score from 1 to 5 can be given on 5 life areas:

1. Social support,
2. Housing,
3. School and work,
4. Income,
5. Well-being.

In addition to the IMprint, the Mlrequest website has also been designed for making a notification or application for care (Figure B). All notifications for care and support can then be made through one digital portal. On this portal, the young person can do a kind of self-test. The result is a completed IMprint. Based

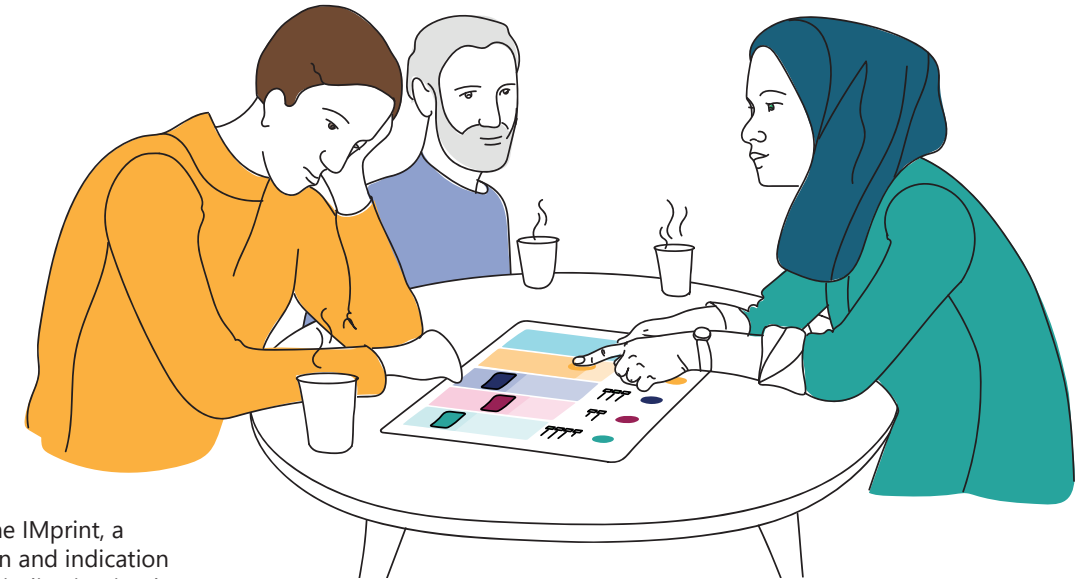


Figure A: The IMprint, a conversation and indication tool for the indication intake.

on the score in the 5 areas of life, the young person is referred to the appropriate counters and facilities. This 'self-test' could also be the start of a single file that grows with the young person over the years.

The IMprint could be implemented in the current system as a conversation tool at an intake interview of the WMO or youth care, or at a cross-domain special case manager for the 16-23 years target group. The next implementation step is to start using the digital portal. Per area of life, the young person can find facilities. In this way, they can search by type of age, life area and problem for facilities.



Figure B: The Mlrequest, a website for defining the care request, finding facilities, the right counters and opening a dossier.

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Introduction

Anne receives youth care. The benefit greatly from their psychologist. Now Anne is turning 18 and a lot is going to change. They are no longer covered by youth care and has to find other forms of support. They do not know what they are entitled to and Anne actually has too much on their mind to figure it all out. It all causes a lot of stress and Anne's mental problems worsen. She sees little prospect.

The transition from youth- to adult care when a young person turns 18 has garnered social and political attention for quite some time. Various studies and parliamentary letters show that the transition can be disruptive to a young person's life (Overheid.nl, 2022). This, among other reasons, prompted the government to work on decentralised legislation and regulations concerning youthcare and social support since 2015. One of the intended outcomes was to bring regulations closer to citizens and to make more space for customisation in the service towards citizens (Kcbr, 2019). In practice, however, there is a shortage of resources in care and services. The result is that waiting times are still (too) long and there is no space for custom care (SCP, 2020).

Another issue is the mismatch between the government's expectations of citizens and reality. For several years, the government has worked on shifting responsibilities from government to citizens, entrusting citizens to fulfill their duties as well as their rights (Veldheer et al., 2012). But, as the Wetenschappelijke Raad voor het Regeringsbeleid (WRR) concluded in a 2017 study by Boot et al., a citizen's 'capacity

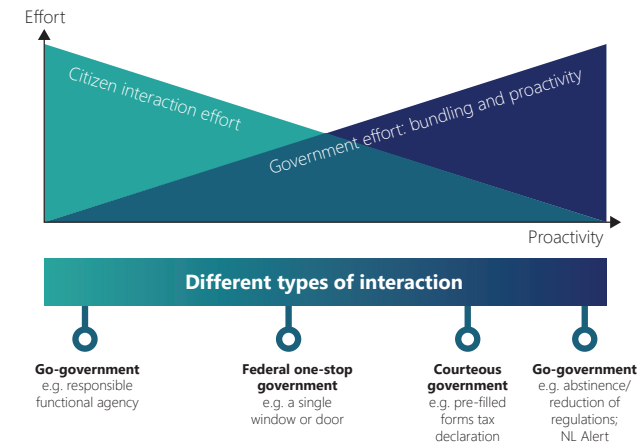


Figure 1: Different levels of proactivity in public services.

to do' (doenvermogen) does not always match the government's expectations. The mismatch between the government's view on humanity (mensbeeld) and reality manifests itself in legislation that is hard to enforce and insufficient government services. Thus, this thesis aims to improve government services by starting from a realistic perspective of the citizens who are involved.

Proactivity in public services

One direction to improve the nature of interactions between the government and citizens is to increase the role of the government, thereby relieving citizens. According to Brüggemeier (2010) there are different types of interaction with several levels of proactivity for the governmental party, which ask different levels of effort from citizens (Figure 1). An example of an effect

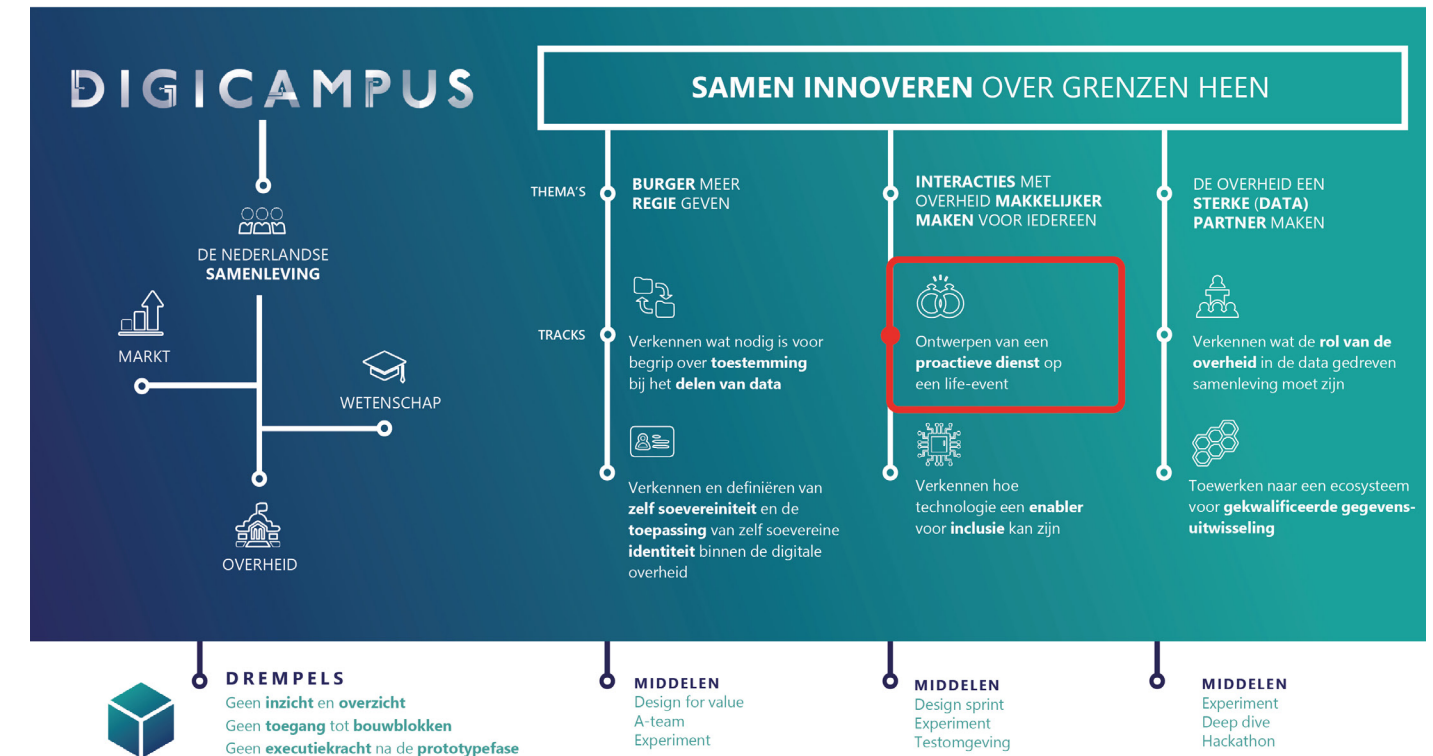


Figure 2: The different missions and tracks of Digicampus.

of a proactive government would be that citizens would be informed of the services they have a right to, when they need it. Another example is the 'no wrong door' principle, meaning citizens are helped, no matter where they start their interaction with the government. For citizens in youth care who turn 18, a more proactive government would be beneficial, since these youth are unable to put sufficient effort in the interaction.

Oude Luttighuis et al. (2021) also conclude that

proactive public services can improve the quality of interactions. They recommend that more research be done into evaluating the possibility of proactive services with real citizens. Furthermore, a desired new interaction could be visualised to define the roles of the citizen and governmental organisations. This thesis follows up on these recommendations and visualises an interaction with a proactive government for a specific group of citizens: the W18.

Master thesis goal

The goal of this master thesis is to investigate the interaction of the municipality of The Hague with young adults who can not work or study due to mental health problems. The focus will be on the life event of becoming 18 years old, when these young adults have to change from Youth Care services to Social support Law (wmo).

For convenience and clarity, this group will be referred to as the W18 (Waiteen) and individuals of the group as the W18'er.

The Waiteen (W18)

Turning 18 often leads to waiting for new care (chapter 3). Most of the W18 are not ready for the responsibilities of adult life by 18, and it can be better to wait and give them time to adjust to adulthood in their own pace. The W18 is a subgroup of young adults who are Not in Education, Employment or Training (NEET), for these young adults specifically are NEET due to mental health problems (16-27.nl, 2017).

In this master thesis, the needs and wants of the W18 are made central to the research and design process. This provides a clearer image of their needs and wants, which can lead to better ideas for how a more proactive service could be provided. To get insight into the current public service of The Hague, several officials of The Hague are involved during the project (chapter 1).

In collaboration with

This graduation project is a collaboration of the TU Delft with Digicampus (Figure 2). Digicampus is a collaboration platform of several universities



Figure 3: TU Delft Design for interaction master program.

and government organisations of the Netherlands. They have 3 missions: (1) empowering the citizens in their interaction with the government (2) make the interaction with the government easier and (3) make the government a stronger data partner. This graduation will be part of Digicampus' second mission, within the track involved with designing proactive services to make the interaction with the government easier. This master thesis will be focussed on government interactions on a municipality level.

The master thesis is done for the master programme of Design for interaction at TU Delft (Figure 3). The goal of the Design for interaction degree programme is to train designers who understand what people do with and expect from products or services and their underlying principles and processes. And that they are able to design products and services that are aligned with user needs, concerns and capabilities and the impact you want to achieve in their behaviour (MSc Design for interaction, n.d.).

Reading guide

The report consists of three parts: Approach, Research and Design. In Figure 4, the set-up of the report is

explained in more detail. The research part of this thesis is extensive, as the context is complex.

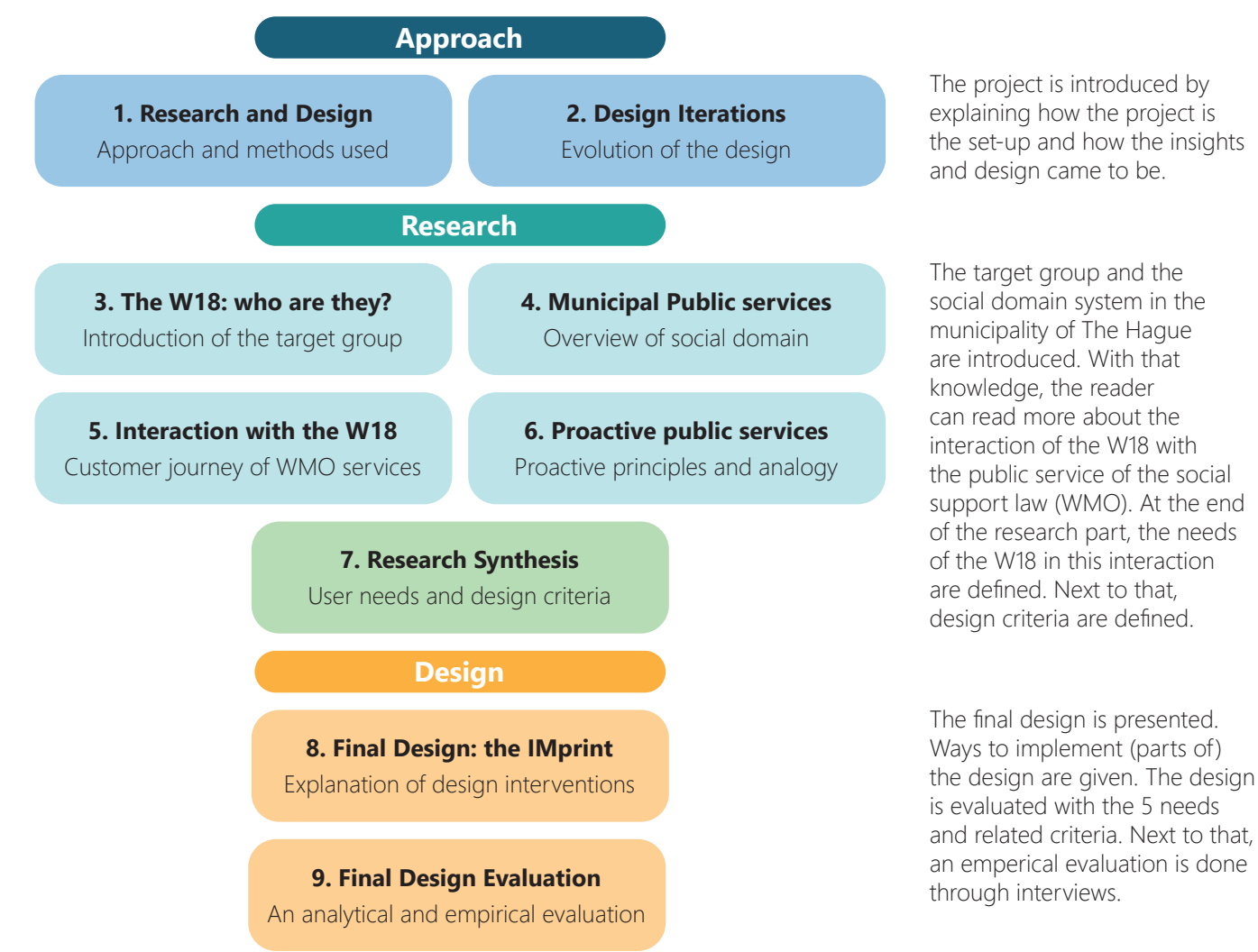


Figure 4: Reading guide.

1. Research and Design

APPROACH

This first chapter describes the approach and process of research and design. Several methods were used in the thesis. These are explained in this chapter.

- 1.1 Project Brief**
- 1.2 Approach**
- 1.3 Design process**
- 1.4 Methods**



1.1 Project brief

The aim of this master thesis is to redesign the interaction moments of the public care services of the municipality of The Hague with young adults who are not able to work, study or follow training due to mental health problems (the W18) around the life event of turning 18.

The main goal of this graduation project is broken up into the following sub-goals:

1. Create an overview of the current interactions of the W18 with the municipal public services to create insight into their needs and desires.
2. Define a list of criteria for the interaction, through interviews and generative sessions with stakeholders.
3. Design a concept in the shape of a product, tool, service or otherwise that benefits the interaction.
4. Evaluate the concept.

The main Research and Design question is:

How can the municipality of The Hague improve their interaction with mentally vulnerable young adults around the life event of turning 18, while using proactive design principles?

To be able to answer this question, the following questions need to be answered:

1. What is the current state of contact of the municipality of the Hague with mentally vulnerable young adults around the life event of turning 18?
2. What are the needs and desires of young adults with mental health problems when it comes to the interaction with their municipality?
3. What proactive design principles for services are helpful for the context of this design project?

1.2 Approach

The **double diamond** approach is used as the basis for the design process. First, the context is explored (discover), after which a problem statement, design goal, and design criteria are defined (define). From there, ideas are created (develop) and one design concept is chosen and detailed (deliver), see Figure 5 (Design Council, 2005).

Research through design is used in the define and develop phase. While diverging ideas, these ideas were presented to different stakeholders to make the

problem definition even more concrete and the design more attuned to reality. The problem definition and solution scope evolved iteratively.

The research phase of this project is more extensive to have a more solid understanding of the challenges, to create meaningful interventions. In **service design**, a comprehensive understanding of the user's context and insight into the organizational structure are required, to identify the needs of the different stakeholders.

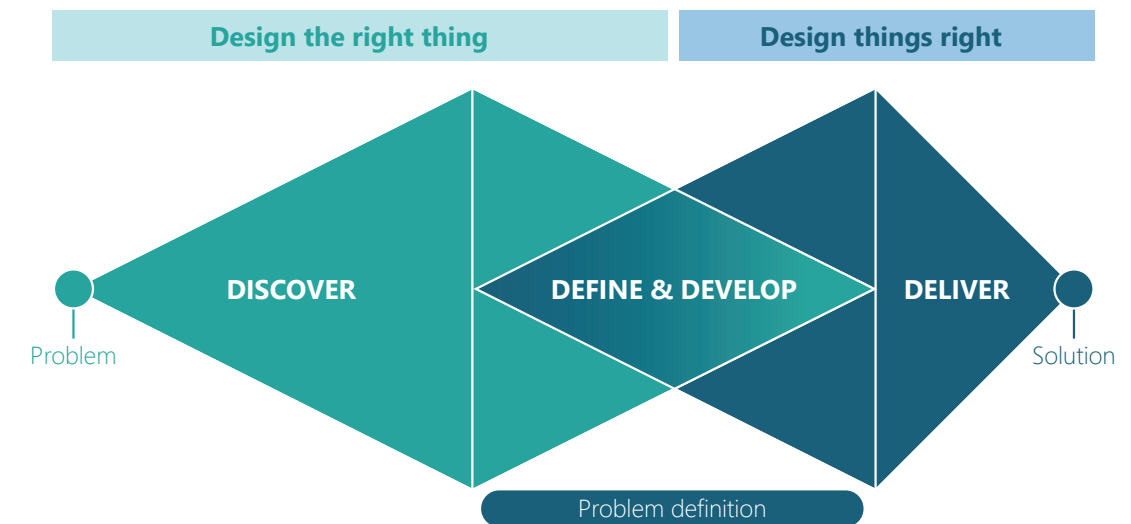


Figure 5: A variation on the double diamond with overlap of research through design.

Because services continue to evolve, the lines between conceptualization, implementation, and use stages are blurred. Solutions frequently include a combination of organization, technology, and people. The end outcome might be a product, an organizational transformation, or a new business strategy. In this project the outcome is a combination of an organizational transformation and a conversation manual and tool.

The user is central

The user experience is fundamental to service design since it is the ultimate objective that connects all of the system components.

To identify the needs of the stakeholders, the design approach is **Human Centered Design**. At the centre of this approach is anticipation on the human needs of the users when designing systems and products.

Designers need to understand the user experience. keeping the user as a human central, accounting on various states of minds and situation they can be in. Space for mistakes and misunderstanding of the service should therefore be included. The goal of this approach is to create a great product or service that is succesful (Interaction Design Foundation, n.d.).

The approach has four main principles:

1. Focus on the people
2. Solve the right underlying problem
3. Think of everything as a system
4. Do iterative work

Active participation of stakeholders in service design is important to understand their needs and the complexity of the system and to design for that. The W18 and municipal professionals were involved during important moments in the design process like the problem statement, finding evaluation, idea generation and reflection and concept evaluation through forms of **co-design**.

The trouble with 'Users' is: they're only human. -

Interaction Design Foundation

Iterations

The problem defition is iterated simultaneously with the solution scope. At the basis of many design methods is the principle of iterating. A cycle can be followed to create a great concept. Most cycles follow similar patterns. Here, the basic design cycle of Roozenburg and Eekels (1996) will be used.

The **Basic Design Cycle** is a model that describes five reasoning steps a designer can go through to solve the design problem in a conscious goal-oriented design process (Figure 6). The designer can go through the design cycle once or go through the cycle several times in various phases of the design process. The cycle helps to organise the design activities.

The five steps of the basic design cycle are:

1. Analysis: Find information and analyse it to inform your design criteria and requirements;
2. Synthesis: Generate possible solutions or elements of possible design proposals that could be valuable;
3. Simulation: Create imagined, digital or physical design proposals to evaluate their potential value;
4. Evaluation: Reason what the potential value is of the design proposals in relation to the criteria to inform design making;
5. Decision: Decide how to proceed in a next cycle whether to build on the current design proposal, one of its elements or focus on another element or proposal instead.

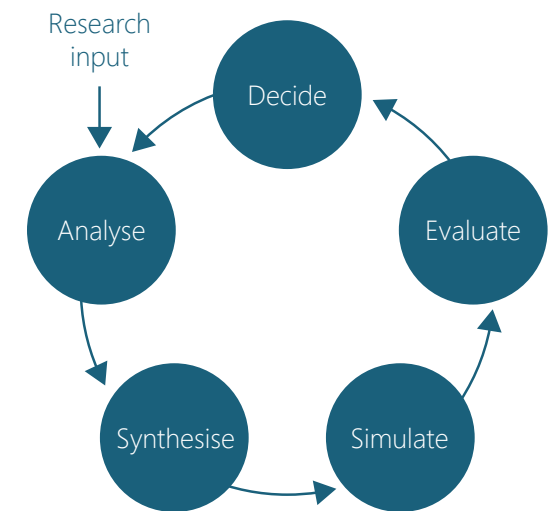


Figure 6: The 5 steps of Roozenburg and Eekels (1996).

1.2 Project Activities Timeline

In the timeline below, the phases of the design process are visualised. A reference to the chapter(s) where the outcomes or results can be found of each phase is included in the timeline.

During the process, several (design) methods have been used. the name of the method is printed in *italic* and will be explained in the next subsection.

Suitable methods for service design and human centered design, such as journey mapping and co-design are used.



Digital context exploration

In order to define the problem, scope the design domain, and find initial answers to the research questions, **desk research** has been done.



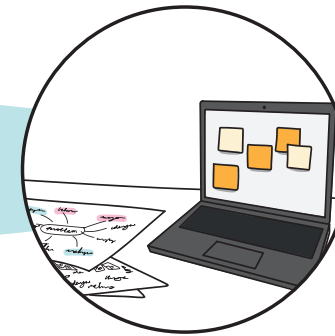
Context exploration through interviews

In order to get to know the context, **interviews** were conducted with experts: parents of W18-year-olds, professionals working with W18-year-olds and people working to improve services



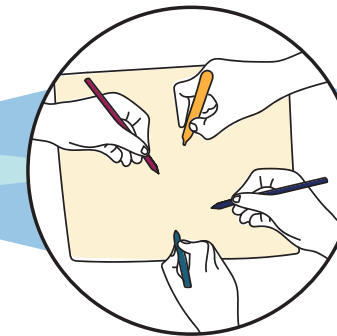
Experience exploration through interviews

Interviews were conducted with the use of **sensitising material** to gather the experience of the W18'er and their contact with their municipality.



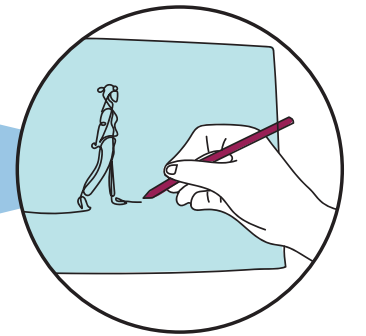
Data analysis

By means of **thematic analysis**, the insights from the interviews and the research were combined into insights and a **user journey**.



(Co-)Design

By means of a **co-creation** session with students and a session with a W18'er and **mind mapping**, different ideas for interventions were created and **visualised**. In the nex chapter the iterations of the concept can be found.



Evaluating the concept

The journey map and concept have been presented through **visualisation** to the W18 and municipal officials to make final improvements and write recommendations.

1.3 Methods

Desk research

Desk research was conducted at the start of the project to get more insight into the context. This research method involves sourcing existing data and verifying and analyzing the data to validate the goals of the project. Topics should be defined to identify relevant sources to answer the research questions. Then the researcher collects and combines the data and decides whether the research questions have been answered (Qualtrics, n.d.). Desk research is also referred to as secondary research.

Throughout the project, desk research is used to continuously explore the digital context in order to support new findings and serve as the foundation for design decisions.

Interviews

As a form of primary research, interviews have been carried out. The interviews are done in a semi-structured manner to explore the context and investigate deeper into the interaction between the W18 and the municipality while looking at different facets. This method was chosen because the interviews were exploratory in nature and it was a way to create two-way communication (George, 2022).

A framework with four themes was defined: to ask about their relationship with citizens and/or the municipality; to ask about their knowledge on the interaction journey the W18 makes in the Hague; to

define the network of stakeholders involved in the journey and to ask what they thought of the way things were going and where they thought things could be improved. A short list of guiding questions were included (Appendix A). the lists are in order of interview date.

Interviews with W18'ers

- Rebekka (20), Dordrecht
- Sander (24), Delft
- Rick (18) and mother Eline, Geldermalsen
- Mother Lena on behalf of Tijmen (19), Rotterdam

Pseudonyms have been used to ensure the privacy of the participants. The real names are known to the author of this thesis. The W18'ers and their parents do not live in the municipality of The Hague. Due to the nature and duration of the project, it was not possible to target that group. However, the participants still address insights in how they would like the municipal service to act, which provides insights in the needs and wants of the target group.

Interviews with municipal employees of The Hague

- Anne-Marie Wiersma - case manager pgb, Centrum Jeugd en Gezin
- Senour Ismail - LeerWerkmakelaar, Jongerenpunt 070
- Britta Regeer - Casemanager wmo, wijkteam Segbroek
- Rogier van 't Klooster - Case Manager Participatie, Jongerenpunt 070
- Samira Fakher - Regisseur Jeugd en

- Maatschappelijke Ondersteuning (JMO)
 - Lesley Steijn - Regisseur Jeugd en Maatschappelijke Ondersteuning (JMO)
 - Ingrid Leentvaar - Domein Adviseur financiële hulpverlening
 - Pamela van der Vliet - Leerplichtambtenaar
- Interviews with employees of JIP and JIT
- Simone van der Pol-Jongeren Informatie Punt (JIP)
 - Philip Veerman - Jeugd Interventie Team (JIT), GGZ psycholoog

Interviews with other experts

- Bill Kuipers - Project Manager personal arrangements assistant at ICTU
- Koen Hartog - Program Manager Blockchain & AI for Governmental Organisations at Dutch Blockchain coalition
- Simon Steenhoek- Consultant Public services The Hague and Trainee VNG
- Jan Hein Pierik - Consultant Public services The Hague, Project about Jongerenpunt070
- Thijs Duysens - Consultant Lost Lemon, Vision development on integrated services for young people by municipalities
- Thijs van den Enden - Action researcher and teacher at Instituut van Publieke Waarden
- Olaf Smit - Policy officer regulatory pressure at Binnenlandse Zaken en Koninkrijksrelaties
- Eric Hoogenboezem - Project manager life events approach at Mens Centraal at Ministerie van Algemene Zaken.
- Nicoline den Ouden - Social domain change agent from Ondersteuningsteam Zorg voor de Jeugd (OZJ)

The conversation with these experts revolved around projects that are similar to this master thesis or about their knowledge and expertise when it comes to the public services of The Hague or other cities.

Sensitising material

The generative method of sensitising booklets (Appendix B1) was used for contextmapping. These booklets enable deeper interviews with W18'ers and/or their parents. A sensitising booklet is a booklet with questions and assignments for the interviewee to make before the interview. It can help them come to the tacit and latent knowledge of how they feel in certain situations and how they would like the situation to change (Sanders & Stappers, 2012).

However, the questions and assignments in the booklet were too complex and extensive for the W18. From this, it can be concluded that the questions should be straightforward and the goal of the assignments should be clear. The participants now felt insecure about what to do and because they wanted to do it right, they felt stuck. Instead of the booklet, a short questionnaire was made to prepare new participants for the interview (Appendix B2). It could, however, not be tested whether a short list of clear questions would have suited better as sensitising material for the W18. Due to personal circumstances, the final two W18'ers could not participate. From this, we can conclude that it is important to adapt the design process to the target group; some methods are more suitable than others for certain target groups.

Thematic data analysis

The analysis of the data is done by clustering insights, creating webs of information on Miro, an online whiteboard tool, using an inductive thematic approach. Thematic analysis allows to approach a big set of qualitative data, to find out more about peoples experiences, views and values e.g. However, this approach has the risk of missing nuances in the data. Therefore, the conclusions of the analysis have been verified with the target group (Caulfield, 2022).

Co-creation with students

Time was spent at the start of the sessions on personal introductions to get the group comfortable. A project pitch was given to explain the problem statement and the goal of the session: to get a fresh perspective on the problem and design directions. Next to that, the method of devil's and angel's advocate was done to see whether the method would be helpful in evaluating the concept in a later stage. The book 'Road Map for Creative Problem Solving Techniques' (Heijne & van der Meer, 2019) was used to plan the session. The following methods and activities were selected:

- Personal introduction
- Project pitch
- Flower association
- Creating "How tos" (H2s)
- Break (incubation)
- Association cards as energizer. During the break and energizer, the H2s were clustered
- Dot voting on the winning clusters for relevance

- Quick idea generation with traditional brainstorming around the chosen H2s
- Devil's and angel's advocate roleplay to discuss the promoting ideas

In Appendix C a summary of the session planning. Figure 7 shows a photograph of the session.

Co-creation with W18'er

A list of four H2s was introduced to Sander. The most relevant ones were chosen to brainwrite ideas with (Heijne & van der Meer, 2019):

1. How to communicate clearly?
2. How to organise tasks?
3. How to tell your story in a comfortable way to a stranger?

The H2s were written in the middle of a sheet of A3 paper. Both Sander and the designer generated ideas in silence, enabling to build further on each other's ideas. The three H2 A3s were rotated. After creating ideas, the participant, Sander, was asked to select ideas that were relevant and would help to improve the current interaction with their municipality.

Silent brainwriting was chosen to enable Sander to generate ideas on their own pace. And to decrease energy needed, by limiting the amount of time they had to explain themselves. Only the chosen relevant ideas were discussed at the end.

Figure 7: Co-creation session with students.



Mind mapping

During the research and design process, findings have been externalised and structured using mind mapping. Ideas and aspects or findings are organised around a central theme, showing correlations. (Buzan, 1996). Mind maps are made of what the interaction looks like currently; what object and factors influence this interaction; the problems of the W18; the problems in the system; the needs of the W18 and design directions and ideas.

Visualisation

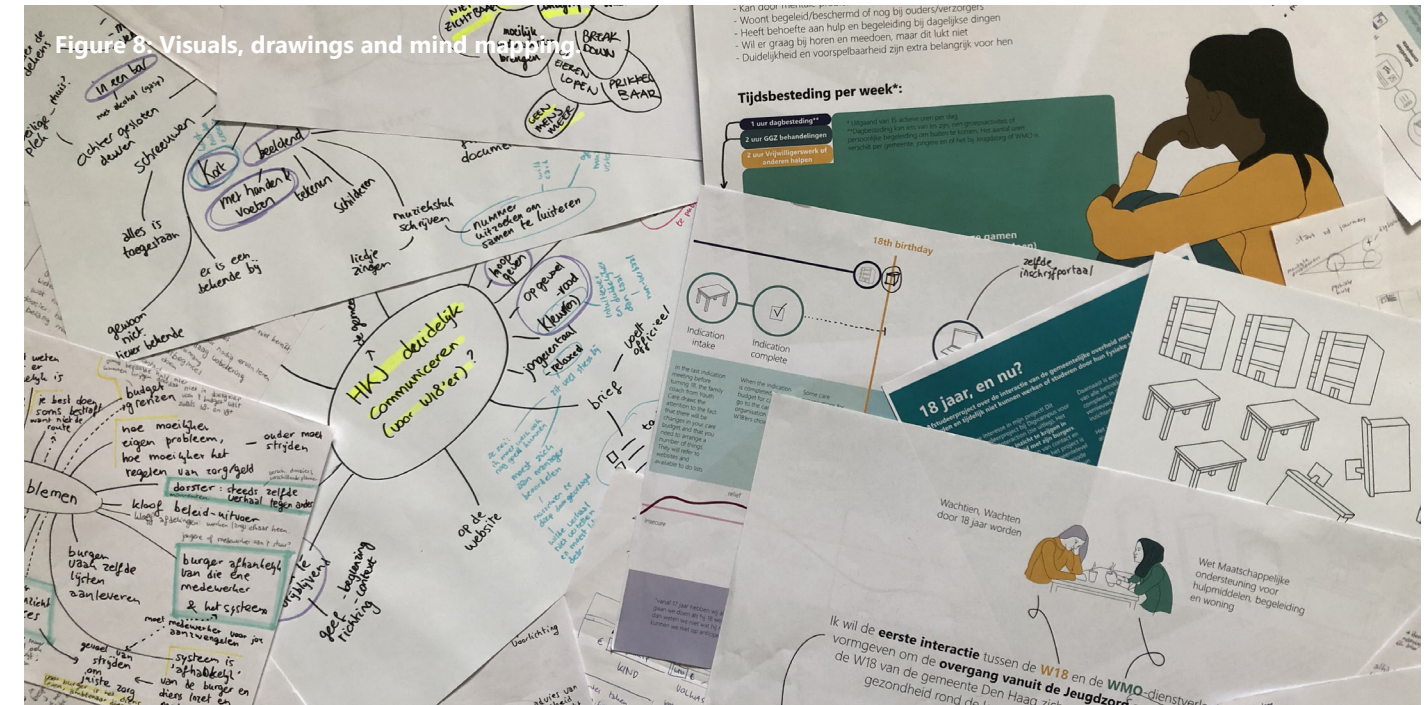
Throughout the project visualisation methods have been used to get better understanding of the context and the solution space (Figure 8).

Design Drawing to Discover, Define and Develop

By thinking visually, both the design domain and problem factors can be analysed through envisioning a potential design in the context. Sketching encourages to reflect and inspire to develop ideas. This is done throughout the research and designing phase, especially when interacting with stakeholders. Drawings are used to communicate and present the evolving concept and findings, to define and refine it with stakeholders (Eissen & Steur, 2007).

Journey mapping

Mapping the experiences of the user of the service over a certain amount of time can help the designer understand the user's experience and communicate this to relevant stakeholders. The stages are mapped on the horizontal axis. Themes regarding the experience, such as emotions, activities and aims are mapped to the vertical axis (Howard, 2014). For this project a journey map is made to show the interaction of the W18 with the municipality.



Conclusion

This chapter provided the project brief around the following main research question: **How can the municipality of The Hague improve their interaction with the W18 around the life event of turning 18, while using proactive design principles?**

In the research and design process, the perspective of design for Health and Wellbeing is used: the research phase was extended to get

better insight in the context and the problem. The design approach of Human Centered Design is the central approach, placing the user as human central in the project. The findings and design have evolved with co-reflecting and co-designing with the target group, the W18, in an iterative way. An overview is given of all the design and research activities that are done with the methods used during those activities.

2. Design Iterations

APPROACH

In the design process, the picture of the current situation and the problems in it evolved. As insights evolved, the picture of what would be the right solution to the problem also changed. Through conversations with the target group, experts and municipal officials, both the current context and the design were evaluated. This chapter describes this co-evolution of problem and solution.

2.1 Design Goal

2.2 Co-evolution of problem and solution



2.1 Design Goal

To **improve the perspective** of **young adults suffering from mental health issues** by creating **clarity in the interaction** with the municipal service.

Improve the perspective

The perspective of the W18 is narrow: they have no starting qualification or work and thus a great distance to society and employment. When they turn 18, their care budget is greatly reduced, which may worsen their mental problems and situation.

The W18

The W18 are young adults that do not attend school nor have a job and are in contact with youth care services. When they turn 18, they have to switch to adult services like WMO, since they still require financial support for daycare, personal coaching for daily tasks and/or assisted living. More can be read in chapter 3.

The scope of this project is constrained to one city, since the shaping of services in the social domain can differ per city, partly due to the decentralisation in 2015. The city of the Hague is chosen, for the city is currently active with projects around the life event of turning 18.

Clarity in the interaction

The transition from Youth Care to WMO is currently not without obstacles (chapter 5). Many things are unclear: where to go, what to expect and what rules apply in which situation.

More clarity in the interaction means that it is clear what the role of the municipality is and what the W18'er has to do and what they can expect. An overview is given of contact moments and the W18'er is reminded and prepared for the moments of interaction.

2.2 Co-evolution of problem and solution

Approach

The co-evolution model of Maher et al. has been applied in this project (Figure 9). The problem space and solution space have evolved together. Based on insights in the problem space, solutions were created. Both the problem findings and ideas for solution have been presented to relevant stakeholders.

The model is created and connected to Darwinism for natural selection of ideas. Random crossovers between problem and solution can appear, but the strongest will survive. It states: 'In the context of design, a fitness function representing the design requirements determines whether a design is suitable or not' (Maher et al., 1996).

A moment of insight appears when a problem-solution is paired, called 'problem framing'. Clusters of related information are recognised, enabling the

designer to partially structure the problem statement to build a general image of the assignment. and find interesting points: a surprise. The selection of information leads to the core idea of the design: turning the problem around to arrive at a solution. If 'problem statement' X is not desired, then 'solution' Y would be desired. This solution and the problem frame co-evolve and solution Y' emerges (Dorst & Cross, 2001).

The pages that follow detail the evolution of this project's issue space and solution space. In Appendix D all steps are described in detail and the images are given in full size. The following pages intend to give a quick overview of the process. It also displays which stakeholders participated in specific steps and offered feedback. The design came as a result of a gradual study and design process.

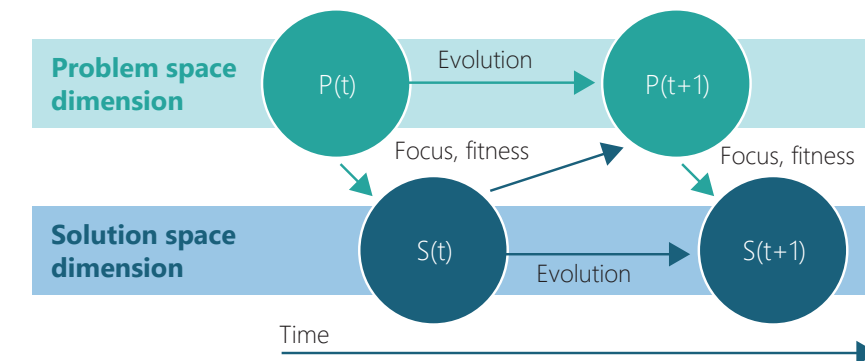
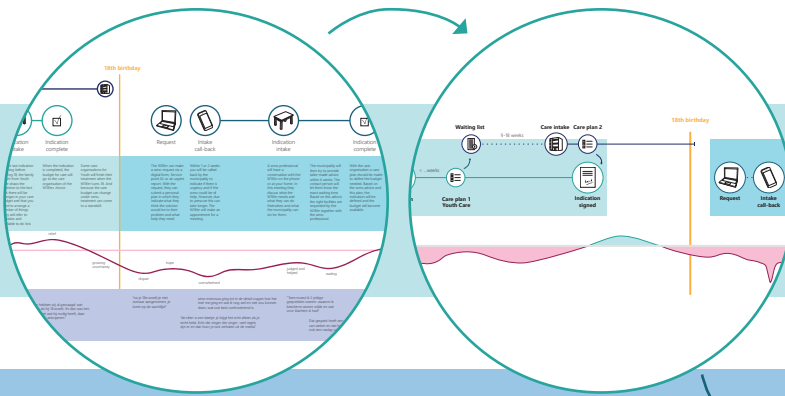


Figure 9: The co-evolution model (Maher et al. 1996).

Problem space P(t)

Solution space S(t)

Interventions



P(1): Journey map

Based on expert interviews and interviews with two W18'ers and two mothers of W18'ers, a journey map was made showing the current contact moments of a W18'er with the municipality.

Journey map and insights are evaluated with Eline and Lena (mothers of W18'ers)

P(2): Emotions

The emotion line is adapted based on feedback and the waiting time for the care intake is added in the journey, because it influences the experience of the W18'er. Next to that a list of needs for the interaction are formulated (chapter 7).

S(2): Continuous care

A new journey is proposed where the intake into WMO is automatic when turning 18 years and youth care continues until it ends or new care is found. To enable this the 16-23 budget could be used to remove the budget gap that currently holds care organisations back to continue youth care.

S(3): 3 more options

Three other journeys were created in which the role of the municipality is more proactive than it is now: (1) a multi-annual domain overstepping plan (2) one counter for all services (3) the care organisation facilitates contact and (4) the automatic intake into WMO.

Evaluated with N. Bharosa (prof. GovTech) and Lena (mother of W18'er)

P(4): Request journey

When turning 18, the problem is that the W18 has to do many requests at several counters. By zooming in on the part of the journey from filing a request to when they first receive their care, the problem scope becomes smaller. By redesigning their first 'request journey' at the municipal service, an abrupt transition between services could be prevented.

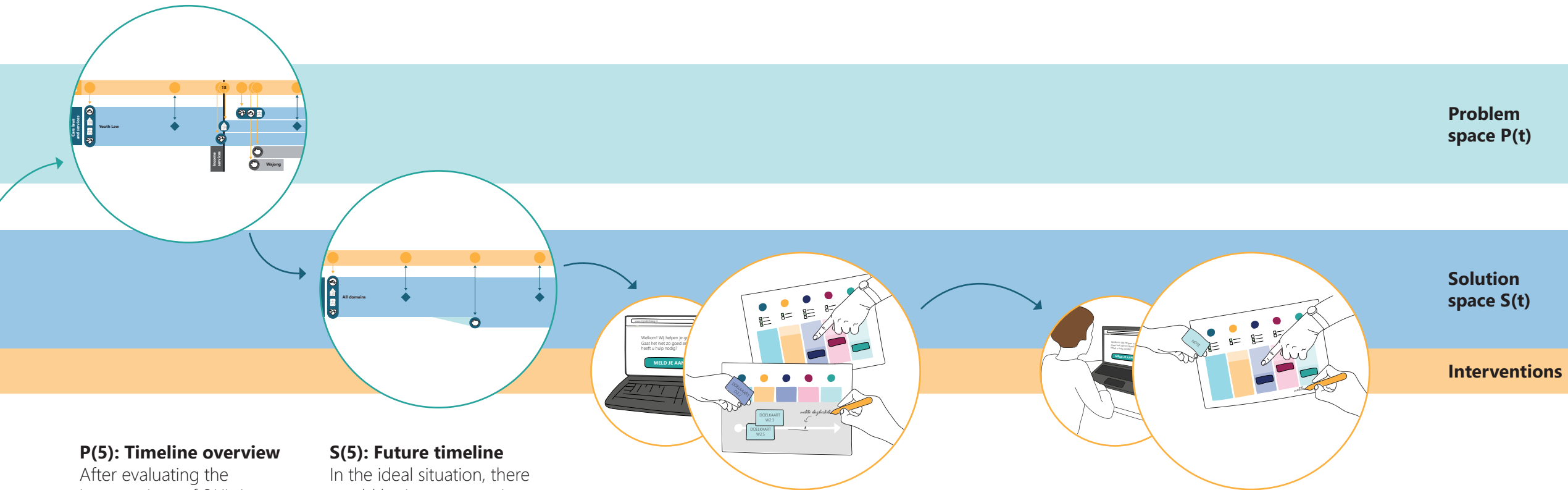
Evaluated with Rebekka (W18'er)



S(4): A matrix dossier

To prevent an abrupt transition, the dossier of the W18 should be filed in a way that all public services can use it. In the dossier, the current situation could be communicated with the ZRM-matrix (Kamann et al., 2020). During the intake interview, the ZRM-matrix can be a visual tool to structure the conversation. Cards with results or goals could be used to help the W18'er to choose on which goal they want to work.

Evaluated with Samira (director JMO) and Nicoline den Ouden (Social domain change agent of OZI)



P(5): Timeline overview

After evaluating the interventions of S(4), it was found that the connection to the whole process was unclear. An overview was made of the different services of different laws with which the W18'er could have contact. This contact starts with a request journey and is followed up by an annual check-up meeting.

S(5): Future timeline

In the ideal situation, there would be just one service that could direct citizens to all the schemes from the various laws. The case manager of that service would then need support from computer systems and there should be experts on legislation to fall back on. Also, the case manager would need to guide a narrower target group so that the cases are similar.

S(6): A self-test

In this future timeline, the request will be like a self-test where W18'ers can see for themselves how they are doing now and what they want to work on. The municipality can support to help them set goals and refer them to the right organisations.

Evaluated with Eline and Lena (mothers of W18'ers), Sander (W18'er) and Britta Regeer (case manager WMO)

Final Design: the IMprint

Based on the evaluation with the W18 and/or their parents, it emerged that setting personal goals is difficult for the W18 and is already done with care professionals. The role of the municipality is more to refer to the right facilities and inform citizens of their right for financial support. Therefore, the goal cards were changed to cards with the facilities the municipality can offer.

Evaluated with Lesley Steijn (director JMO)

**Problem
space P(t)**

**Solution
space S(t)**

Interventions

Conclusion

The design goal is 'to improve the perspective of young adults suffering from mental health issues by creating clarity in the interaction with the municipal service.' To answer to this goal, several design iterations have been done, using the method of co-evolution of problem and solution space to finally come to the final design: the IMprint.

3. The W18: Who are they?

CONTEXT

At the basis of the study are interviews with the 4 W18 and/or their parent concerned. This chapter builds a picture of who this target group is.

3.1 The W18





Anne is 16 years old and has been bullied since high school because they behave differently from the other children in their class. They do not feel comfortable in their own skin and suffer from depression. The psychiatrist diagnoses autism and gender dysphoria. Anne begins a period of transition. Anne is very depressed and has suicidal thoughts. For this reason, they are admitted to a closed institution. It is decided that it would be better if Anne stopped attending school, to relieve some pressure. When they come home again from the institution, they receive day care from youth care for 4 days a week. The day care consists of doing activities together with other young adults with mental and physical disabilities, such as handicrafts, gardening and a form of education.

In the run-up to turning 18, there is a lot of uncertainty; Youth Care ends at the age of 18. In addition, the day care centre is only aimed at young people under the age of 18. Anne has to find a new day care centre. Anne and her parents are not sure to which service they should turn to in the municipality for new day care budget. After a tip from Anne's old school, they end up at the wmo counter. There they receive an indication for day care. However, it turns out that this is only for one hour a week. What type of day care would then be most suitable for them? What should Anne do?

3.1 The W18

There are more young adults like Anne, who are struggling with the domains of learning and working, social relationships and self-reliance. Approximately 15% of all young adults between the ages of 16 and 27 in the Netherlands are in a vulnerable position because they have problems in one or more areas of life (Gemeentelijke werkgroep 18-/18+, 2016).

The target group of this graduation project are young adults between the age of 16-23, who are temporarily unable to work or study because of mental health problems. 'Temporarily', since the target group has a form of perspective on improvement. For this project, a minimum of a period of 5 years is taken. With this, the focus is on a group that has the same care request for a longer time than the span of a year, for which an indication is valid. In Figure 10, the scoping is visualised.

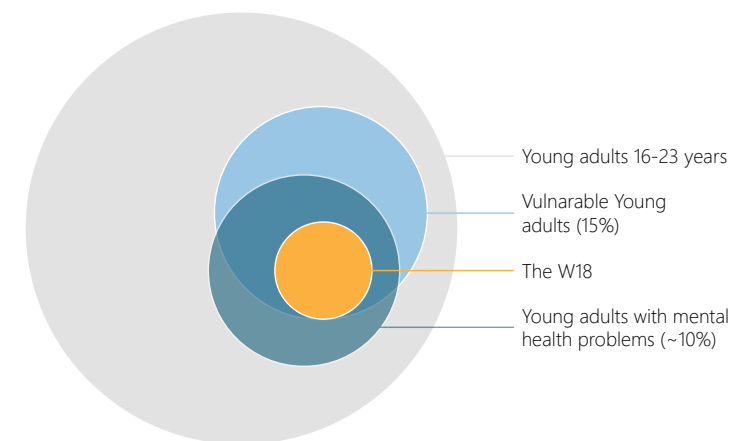


Figure 10: Target group scoping

Around the time these young adults turn 18, they have to make the transition from the juvenile public services to the adult public services. Around this life event, one of the most significant problems is that they have to wait for new care after turning 18. This is an unfortunate and undesirable state of affairs, especially since turning 18 is not exactly unexpected. They wait, becoming known as: the W18 (waiteen).

Mental health problems

The group is defined by the shared characteristic that the young person has mental health problems and can therefore not work or study. These young adults often receive day care. In addition to- and due to their mental problems, the W18 are likely to have several problems in different areas of life, which often makes the situation of these young people complex. The W18 often also apply for sheltered living.

Mental health problems arise from mental health disorders. The term mental health disorders covers psychosocial and mental disabilities and disorders, but could also refer to 'mental states associated with significant distress, impairment of functioning or risk of self-harm' (WHO, 2022). One can think of mental problems such as depression, trauma, personality disorder, gender dysphoria, anxiety disorder.

Mental health problems are not tangible, which makes it more difficult for a W18'er to explain their problems and to make it measurable when they request help. Making the request for help concrete can therefore be extra difficult for these young adults.

Similar to other illnesses, mental illness often has a physical problem and cause. However, it is very complex and therefore still hard to pinpoint the cause and nature of the illness. Therefore, a mental health disorder is diagnosed by looking at the symptoms a person has, symptoms such as trouble in their socio-psychological context, their mood and wellbeing and their stress levels (National Library of Medicine, 2007). People with mental illness are often troubled by the stigma surrounding it. Many indicate that the stigma is in many ways more disabling than the illness itself.

The stigma creates a sense of shame, guilt, reduced self-esteem, dependence and a feeling of isolation. It can also have the consequence that people with mental illness do not seek care, which can make their symptoms worse (National Library of Medicine, 2007).

The ability to do

Literature shows clear correlation between cognitive impairment and certain mental health conditions. Depression, for example is associated with memory loss, impaired verbal fluency, a deficit in shifting focus and lower learning abilities (Bateman, 2015).

The WRR published a report in 2017 on how public services should gain a realistic perspective on the citizens' 'ability to do' (doenvermogen). In this report, they write that behavioural sciences show that the human capacity to weigh information and make rational choices is limited. Stress and mental strain put these mental capacities under even more pressure (Boot et al., 2017). Figure 11 shows a flowchart of how mental capabilities are influenced, illustrating the complex interaction between the ability to think and do and cognitive and non cognitive factors.

Mental capacity can be seen as the counterpart of physical fitness. Developing mental capacity increases the sense of well-being, improving mental health. Good mental health enables people to lead engaged, productive and meaningful lives (Bolier, 2009).

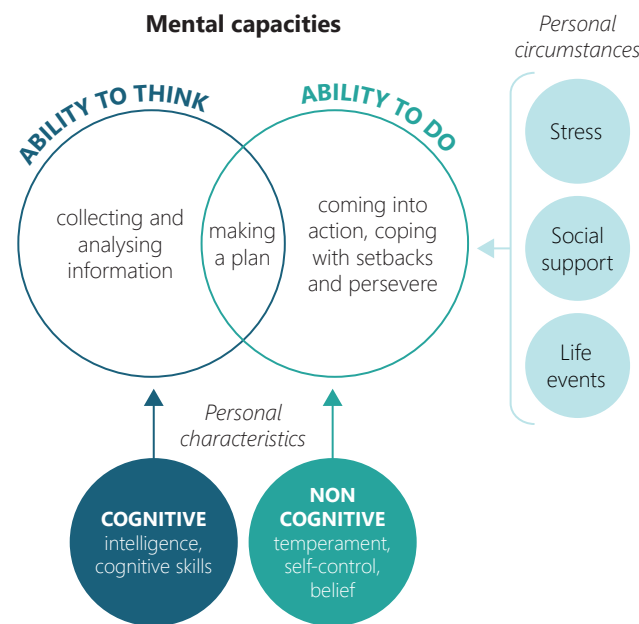


Figure 11: flowchart of mental health capacity and the factors that influence it (WRR, 2017)

Social support from a person's network has a positive effect on mental health. Negative interactions like disappointment with network members, negative interactions with a confidant and criticism, can serve as direct sources for interpersonal stress. Research indicates an indirect association with mental health. Negative interactions can lead to worsening of the perceived quality of life and mental health problems like depression, anxiety and physical symptoms (Lincoln, 2008).

Financial stability is also closely related to mental health. Financial distress is associated with negative self-reported measures of mental and physical health. It is therefore important that financial support services ensure favourable financial conditions, to contribute to better health (Bialowolski, 2021).

Taking into account the differences and limitations of citizens in their ability to do things (doenvermogen) offers a better chance of realising their self-reliance. At times when they are under extra mental strain, it is even more important to simplify the rules and the support as well (Boot et al., 2017).

Next to that, turning 18 does not necessarily mean that a person has the 'ability to do' of a grown up. In the interviews with both the experts, municipal officials and the W18 this was stated often. However, the participants did see the need for borders in the care system. The question could be asked if turning 18 is the right border for the W18.

Nine times out of ten, I just see another child, because somewhere they are just still that, going from a carefree life to a lot of responsibility

in a split second. - Simone van der Pol

(Jongereninformatiepunt, JIP)

A week in the life

In an average week, a W18'er attends day care. In addition, they spend time with family, housemates or friends. Next to that, they can do (small) tasks in the household. Furthermore, the W18'er follows therapy with a psychologist or psychiatrist. This can be done individually or in groups. Some W18'ers with less severe problems also do voluntary work at organisations or for their family. The rest of the time is empty, which can be up to 80% percent of their time.

Based on the interviews conducted, this overview and visual of the weekly spend waking hours of a W18'er is created (Figure 12). However, the personal

situation of each W18'er can differ greatly. Next to that, their situation also changes when turning 18. Less day care is provided and they have to pay for the psychological help themselves. This often results in less time spend on improving their mental health and capacity, which leads to worsening of their situation and mental health. The W18 need help for their mental problems and for day care. Under 18 this is via Youth Care and when they turn 18, this is often via Social Support Act and Health Insurance Act. The next chapter deals with these laws and the interaction the W18 has with the municipal public services.



Figure 12: Time awake spend per week*.

Conclusion

The W18 is a group of young adults who are not able to work or study due to mental health problems. When they turn 18, they have to wait for new care due to the transition to the adult service system.

Mental health problems are intangible and can currently only be diagnosed by looking at the symptoms. It can therefore be hard for the W18 to concretise their request for help.

In literature, there is a strong correlation between lower mental capacity and mental health problems. Stress, life events and the presence or absence of social support effect their mental capacity. Next to a lower capacity to do, they have little to do.

4. Municipal Public Services

PROBLEM SPACE

The previous chapter briefly introduced Anne's situation and described their needs in contacting the municipality. This chapter will explain Anne's contact with the municipality. An overview will be given of the different organisations of the municipality with whom Anne needs to have contact. It will also briefly describe the laws Anne has to deal with and from which their care is paid.

4.1 Anne's care request

4.2 Different laws and counters

4.3 Proactive public services



When Anne's problems started to appear, they went to the general practitioner for help. Their GP indicate the need for psychological help and referred them to the right organisation.

Their situation got worse and worse, to a point where Anne had to stop with school. Anne was admitted to a closed institution. Their personal case manager from Youth Care helped with looking for a good institution that has space. This took some time, because the waiting lists were long. Anne's situation got worse and they attempted suicide. Because they badly needed the help, they were put on a crisis list and got help in the next week.

After a month, they came home again. Anne was signed up for day care at a farm where they could help to care for the animals. To plan this, their parents had contact with Youth Care and the care farm when they were in the closed institution, so Anne could attend it the week right when they came home.

When Anne turned 18, they had to find new daily activities and care, because the care farm was only meant for young adults under 18. To find new day care, they contacted the district team. After the waiting list time, a new WMO case manager was assigned to Anne and together they look for new facilities to replace day care.

In addition, more organisations arrive on the scene, because Anne is financially independent. They have to pay for their health insurance, their psychological help and a personal contribution for day care.

4.1 Anne's care requests

Because of various requests for help, Anne comes into contact with the municipality. The requests for help from the previous chapter are summarized below and clustered into five areas of life, the Big 5 (Jong doet mee! and Levvel, 2022). This gives a concrete example for the types of needs of the W18.



Wellbeing

When Anne is 16, her mental problems develop in a way that hinders them in their daily activities. Anne and their parents go to their GP for help. The latter refers them to a psychologist.



School and work

Anne's mental health problems are getting worse. Going to school is giving them a lot of stress. Therefore the school, the parents and the education inspection decide that it is better for them to quit school and focus on their wellbeing. First, Anne goes to a closed institution. After that they go to a day care farm.



Social support

Because Anne does not go to school, they get more isolated and Anne's social fears grow. Therefore, at day care they also work on their social skills and increasing their network.



Housing

In order to provide better support and relieve the family, Anne can stay at the day care institution overnight for 2 days a week.



Income

When **they turn 18**, Anne is officially an adult. This means Anne has to pay for their costs for health insurance and an own contribution for the day care. Therefore they need an income.

4.2 Different organisations involved

To improve their situation, Anne goes into therapy and visits the day care farm; they receive care from two organisations. To arrange this care however, more organisations are needed. Appendix F lists a short explanation for each organisation's role. On the next two pages the organisations involved in the care before and after turning 18 years old are visualised and described.

A village of organisations

First, a small introduction into the “village” of the parties concerned with the care (Figure 13).

Each party has different roles in the process. Some organisations provide an **indication** for care. There, the W18'er can be referred to 3 types of facilities: general facilities (e.g. available to all, in the shop), ‘voorliggende’ facilities (e.g. re-implemented by other organisations like a health insurer) and tailor-made facilities (e.g. personal coaching, day care). For a tailor-made facility, an indication is given (Patientenfederatie Nederland, 2022). With this indication, a W18'er can apply at a **care provider** to receive care. The care is paid for by the municipality.

The W18'er can choose care from organisations with which the municipality has a contract: care in kind (Zorg in Natura, ZIN). If these do not offer the care they need, they can choose to apply for care via a personal budget (persoongebonden budget, PGB).

The W18'er and/or their caregivers/parents are responsible for the administrative part of the

transaction and the quotations of this PGB. This budget is put on a personal account with the Social Insurance Bank (SVB). The care provider sends the client an invoice and the client must send the invoice to the SVB. The SVB then pays the care provider (Per Saldo, n.d.). More information about PGB can be read in Appendix G3.

Next to the SVB, there are multiple organisations involved with **payment and financial administration**. When someone turns 18, they are officially financially independent. This means they have to pay for their own health insurance. For this, they can apply to the tax authorities for care allowance. Next to that, for care from WMO, a personal contribution is charged.

In addition, there are often **other parties** in the picture, who also influence the care process. Before the age of 18, this is school. Next to that there are organisations that can help to find the way in this maze of organisations.

In short, there are quite a few counters you have to pass through to get a bit of income support. As if by definition you have nothing to do when you are on welfare. - Eline (mother of W18'er)

Why do I need to know this world? Why must I search? - Lena (mother of W18'er)

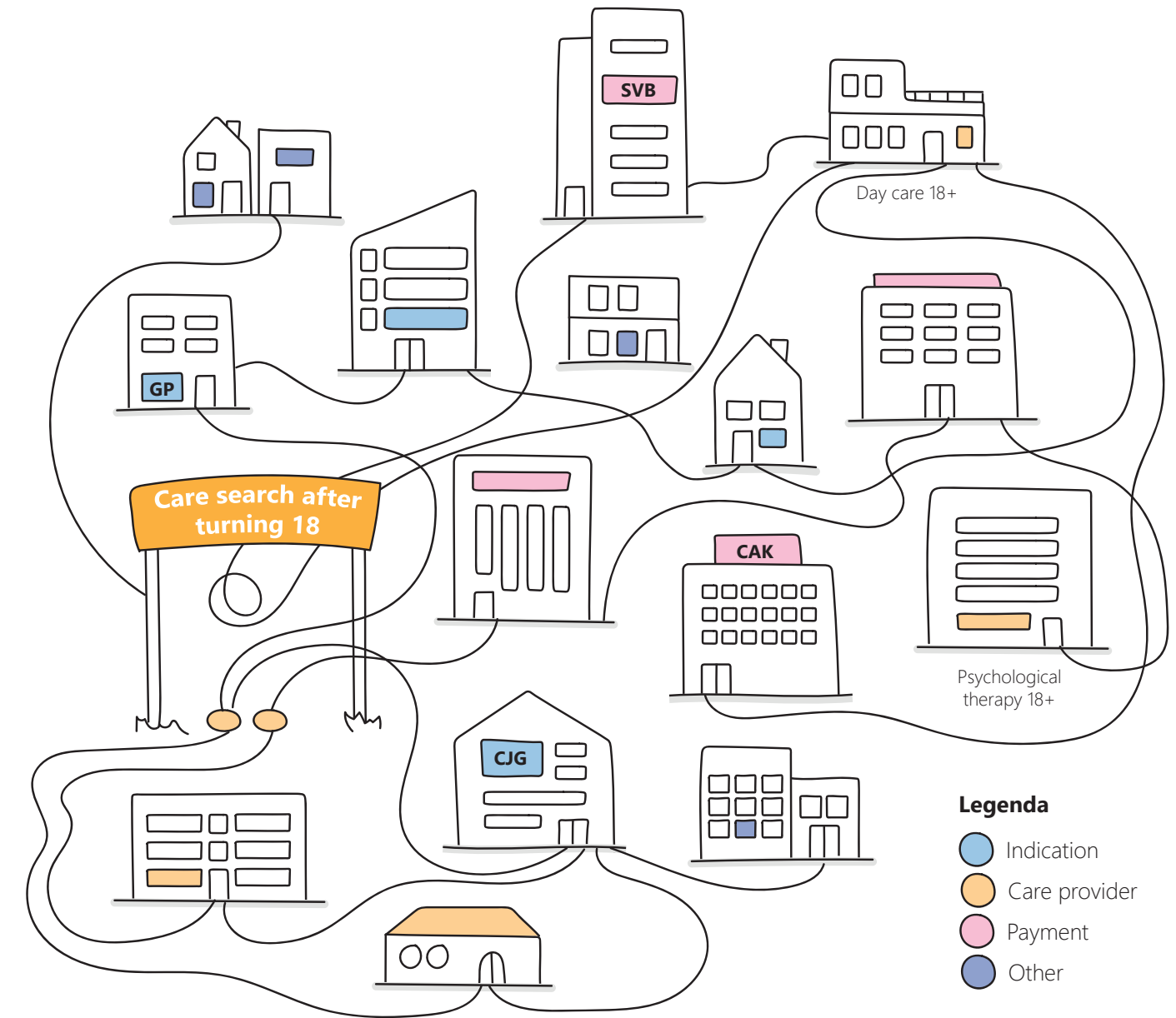


Figure 13: A village full of organisations involved with arranging Anne's care.

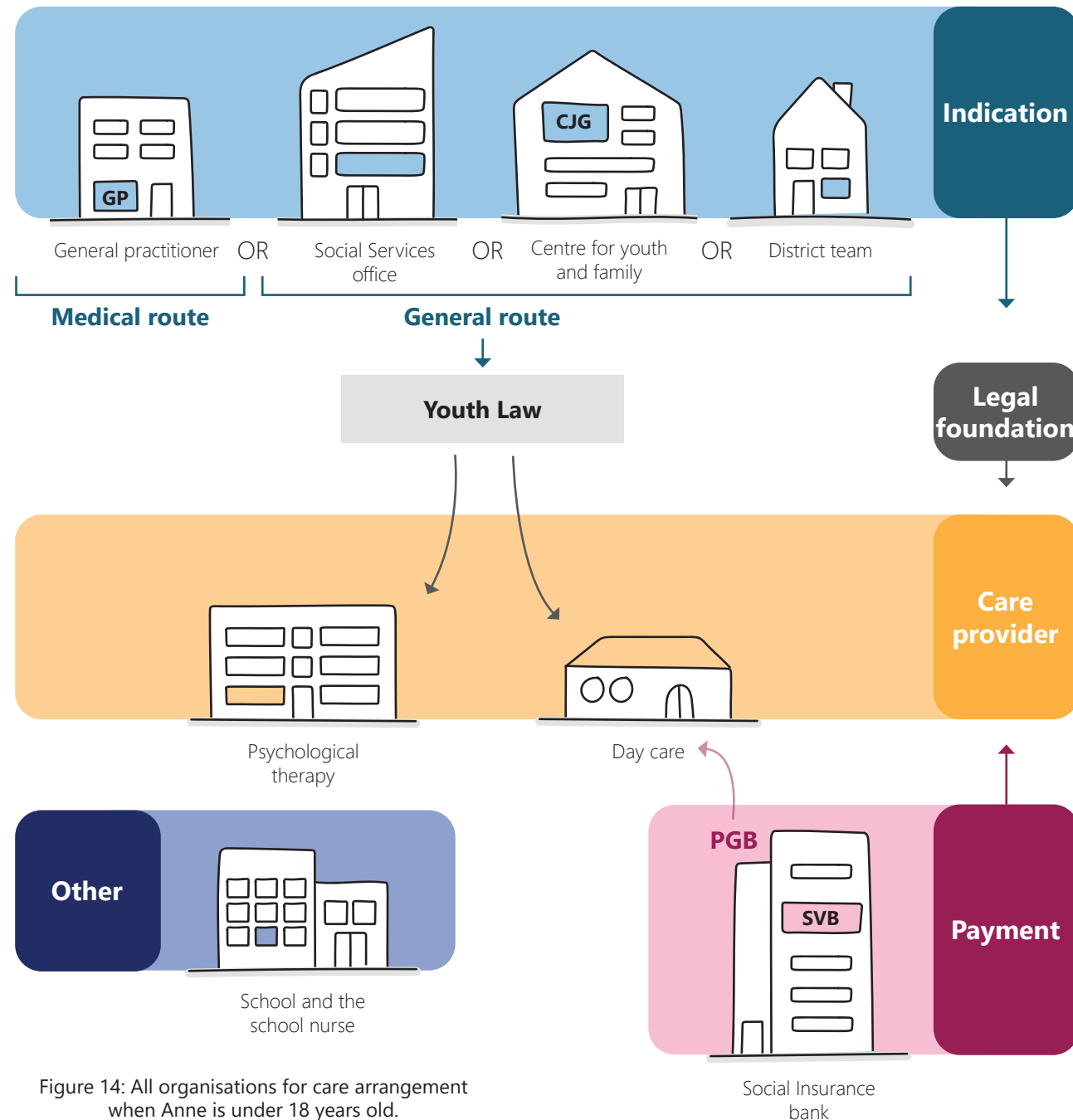


Figure 14: All organisations for care arrangement when Anne is under 18 years old.

Before 18

The page opposite (Figure 14) shows an overview of the parties involved in the process of arranging care for the W18'er before their 18th birthday. In the case of Anne: for daycare and psychological therapy.

Indication

To receive care, an indication is first needed for Youth Care. Youth Care can be accessed via the municipality counter, the district team and the centre for Youth and Family (CJG) (general route). Another way is via the general practitioner, medical specialist or youth physician (medical route).

The W18'er and/or their parents/caregivers can also enter the medical route when they feel like the general route did not have the intended result for them (PIANOo, n.d.). This is a source of frustration for the municipalities because it means they cannot properly control the youth care budget (Medische verwijsroute Jeugdhulp, n.d.).

Legal foundation

The legal foundation for care indications for which care can be given, is written in multiple laws (Appendix G). In short: medical care falls under the Health Insurance Law and other care is covered under the Youth Law (Jeugdzorg in Nederland, n.d.). When care is given under the Youth Law, it is often referred to as Youth Care. Municipalities are responsible for the quality and payment of Youth Care (Friele et al., 2018). For Anne, there is no need for medical care, so they only receive care via Youth Law.

Care provider

For a young person and their parents, it is sometimes quite a search for the right care providers. There are many different kinds and there is not always a clear overview of all the options.

Also, the W18'er is often sensitive to the type of care and the care provider. It takes trust and time to find out what and who matches. Otherwise, the young person cannot be themselves and work on their problems (Sander, Lena & Eline, personal communication).

Payment

For children under 18 years old, the care is paid for with public money. The only organisations for the administration of payment that could be involved is the SVB, if the W18'er receives care from personal budget (PGB). Care via PGB can be more expensive than via care in kind (zorg in natura, ZiN). The municipality is not required to bear these additional costs. The additional costs are for the W18'er and/or their parents and can be paid by making a voluntary deposit via the SVB (Overheid.nl, 2022b).

Other: school

Another organisation that can have great effect on the course of the care process is school. Until the age of 18, everyone is obliged to attend school and school is responsible for their education. The school may decide with the young adult, their caregivers, the school doctor and relevant healthcare providers to stop school if needed (personal communication, 'leerplicht ambtenaar').

After 18

After turning 18, the care budget comes from different laws, different counters and often different care providers (Figure 15). This can have a great effect on the young client, because they then have to tell their story again and build up trust (Jong doet mee, 2017). Next to that, a layer of new organisations is added: Administrative organisations for the financial part of the arrangements. The W18'er is financially independent after turning 18.

Indication

New indications are needed for care when turning 18 years old. For Anne, this means going to the doctor for an indication for psychological therapy. For day care, an indication under the social support law (Wet maatschappelijke ondersteuning, WMO) is needed. This can be accessed via the district team and the social services office. Next to that, extended youth care can be offered in consultation with the CJG.

Legal foundation

In 2017, a bottleneck budget was released for young people who are no longer formally youths but who still need youth assistance (van Engelshoven, 2017). Within 6 months after turning 18 and until the age of 23, they now can also apply for Extended Youth care, if they meet specific requirements. Before turning 18, they can also apply for WMO if needed out of this budget (Ministerie van VWS, n.d.) (AJK, n.d.). As an adult, the W18 can apply for Social Support Law (WMO), Wajong and welfare benefits. Next to that, some things change for the health insurance as written in the Health Insurance Law. Mental health

care, for example is paid by the health insurance. See Appendix H for a full overview.

Care provider

The situation of the care providers does not necessarily have to change. However some care organisations only seem to provide care for young adults under 18 years old, because there is more budget for that target group (Philip Veerman, personal communication). Therefore, often the W18'ers have to change care providers. In Anne's situation (Figure 15), the day care could continue under extended youth law, but in a year, new day care had to be realised under WMO.

Next to receiving care from official organisations, informal care can be given by relatives and close ones. WMO can also provide a budget for these informal carers to relieve their burdens. It differs per city how much this is (Overheid.nl, 2022b).

Payment

A basic health insurance is compulsory. The supplementary insurances may differ per health insurance and per person (Rijksoverheid, n.d. a). Because young adults over 18 have to pay their own contribution to the health insurance, they can apply for health insurance allowance. This allowance amounts to €111 in 2022, depending on their income and individual assets (Zorgtoeslag, n.d.).

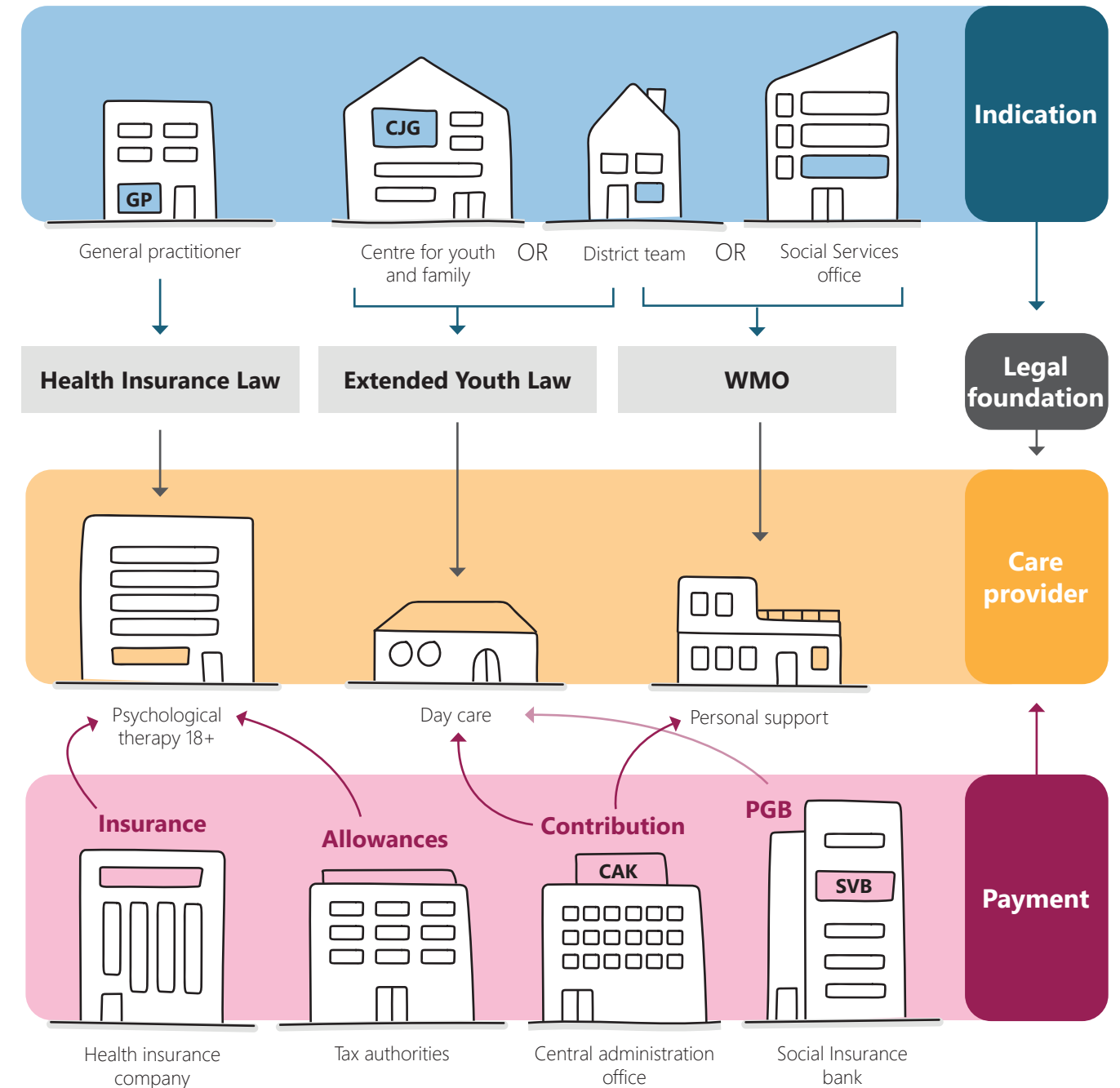


Figure 15: [right] Display of different organisation involved in arranging psychological therapy and day care for Anne.

A personal contribution is asked for facilities from both ZiN and PGB. This is the amount of the facility up to a fixed maximum amount. This amount can differ per municipality (Overheid.nl, 2022). The arrangement of this contribution is done at the central administration office (Centraal administratie kantoor, CAK).

For PGB there is still the SVB to share the administration with, in order for them to pay the chosen care provider from the personal budget.

Other

Because of the complexity and the amount of organisations involved in the process, new organisations started to appear both nationally and in municipalities (Figure 16).

Nationally there are organisations like 'het juiste loket' and 'regelhulp' from the government. At the municipality there is client support for an application within the social domain. This is an independent party that stands next to citizens, who knows what is on offer in care and support and how to get there. They listen carefully to the citizens' wishes to see possibilities for support would suit them. They help to make conscious choices. They can help organise the care by, for example, involving the social network. And they can help with filling in forms and accompanying to meetings (CIZ, n.d.) (Gemeente Den Haag 2018).

Besides looking for the right care, do I also have to worry about that income from day care?!

- Eline (mother of W18'er)

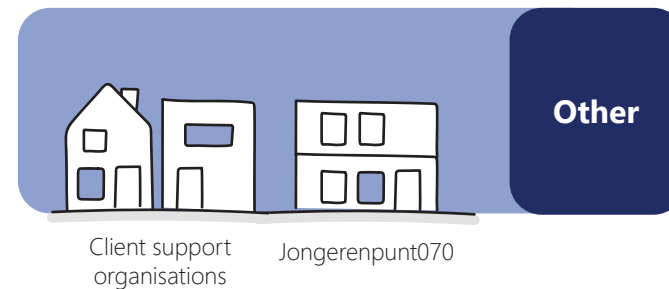


Figure 16: Other organisations involved in the process to support the W18'er.

Jongerenpunt 070 is a client support organisation of the municipality itself. Young people can go there for help with practical matters, debt problems, looking for work and more. It is a contact point in the neighbourhood where various desks are brought together in one location. Here, a young person can walk in and go straight to the right counter. And if there are multiple problems, colleagues can sit down with the young person.

Next to that there is the 'Jongeren Informatiepunt' in the Hague. Young people can knock on JIP's door if they need help. JIP has a lot of knowledge of the care landscape and can help young people arrange practical matters with the municipality.

4.3 Challenges in the public service

As could be seen in the difference between Figure 14 and 15, the public service system changes drastically for a person when turning 18 years old. In this system, the change between services and laws may lead to some problems. The core of these problems can be found in the following problems. That the 18-/18+

transition is not without problems is acknowledged by the municipality of The Hague. The 'smooth transition to adulthood' is now one of the key aims of the Hague Youth Policy. The municipality expressly requests that youth-serving organizations make this an active goal (samen 18 en vooruit, n.d.).

1. Budget deficits in the social domain

Healthcare costs in the social domain have risen in recent years, which is partly the reason for 80% of municipalities facing a budget deficit. In 2019, costs for youth and social support were particularly high. The latter could be partly explained by an ageing population and the introduction of subscription fees. In youth care, both numbers and costs increased. The costs of municipalities are rising and at the same time income is falling (Revenboer et al., 2021).

Since the introduction of the WMO 2015, with the decentralisations, the state has 'saved' more than one billion euros annually. As a result, the WMO budget is under pressure, especially in heavily ageing municipalities, resulting in wmo deficits (de Koster, 2019).

The budget for WMO has long been lower than Youth Care in the municipal budget. This means that there is also less budget for the W18 after they turn 18 years old. For Lena and son Tijmen (Rotterdam), this was clearly noticeable. They went from a care budget of 4 days of daycare a week under the Youth Act to 1 hour a week under the WMO (Figure 17).

How is my son going to build a future with this small budget? How can the difference between youth care and WMO be so big? They actually just give up on my child?! - Lena (mother of W18'er)

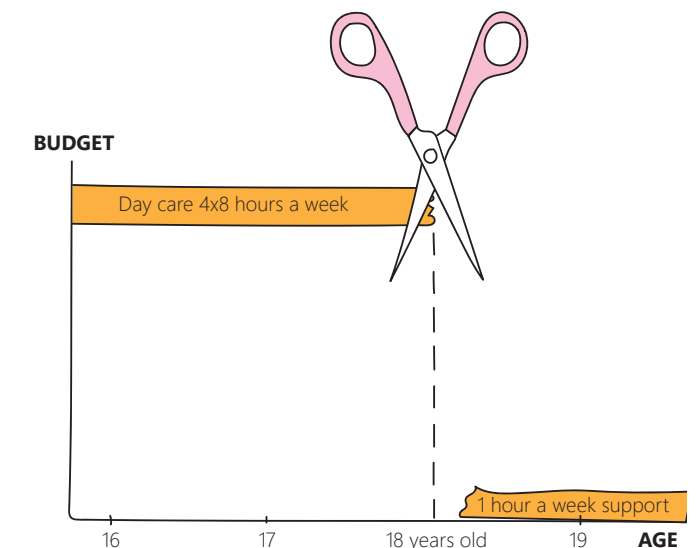


Figure 17: The budget gap when turning 18.

2. A different human image per law and organisation

At the moment, it is difficult to personalise the services and take into account the individuals. Over time, strong images of people have developed in government. There are strong assumptions about the life and behaviour of citizens. Once manifested in laws and regulations, these images of man become trapped in the bureaucratic logic of the welfare state. In the encounters with citizens, the welfare state gets a face and the human image has an impact there as well (Bussemaker et al., 2021).

"The citizen is getting further out of the picture while the human image is getting stronger." -

Bussemaker et al., 2021

The term human image refers to the view one has on other human beings, in Dutch: mensbeeld. It also includes thinking about what a 'good' life should look like for other people and what their needs are.

A clear example of this strong human image is visible in the difference in views between the WMO, WLZ and Youth Care (Figure 18). The WMO is based on the idea of the self-reliant citizen, whereas the Law of Long-term Care (Wet langdurige zorg, WLZ) is based on the antithesis of this idea: a human image of the dependent, needy citizen who will never be able to do without provisions. WMO is also mainly known for regulating elderly care.

This can also be seen in the transition of becoming 18 years old. The young person moves from the 'pedagogical and protective' environment of school and Youth Act agencies into the demand-oriented WMO and the more demanding Participation Act (Gemeentelijke werkgroep 18-/18+, 2016).

The human image can also be found in the language. An example of the municipality's website of The Hague, when referring to PGB, they say: 'Do you prefer to do everything yourself? You choose, arrange and pay for your care yourself with the PGB' (Gemeente Den Haag, n.d. b). While in reality, it is not the wayward people who use PGB, but those with specific and exceptional care needs. PGB is often needed because the right care is not provided with in-kind care (ZiN).

Because of these different views, it can be difficult to assign people to the right legislation or to guide them through a transition between laws (Bussemaker et al., 2021). It is important to regain room in the implementation to focus on the personal situation and care needs of the citizen in order to help them. And stay away from stereotypes and extreme images.

What I think all 18-year-olds have in common is that they live in a system that makes 18 difficult.

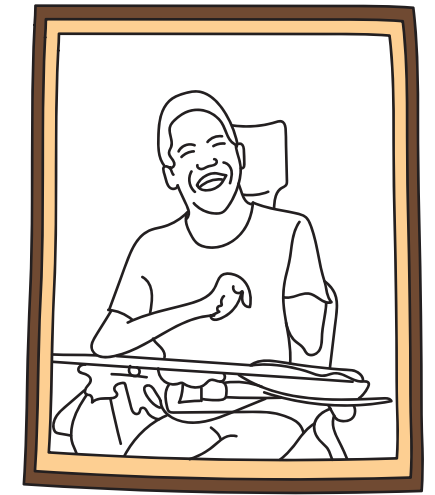
- Ingrid Leentvaar (financial domain advisor)



Youth Care: child who needs protection and care



WMO: person who wants to be self-reliant and can be with a bit of care



WLZ: person who is unable to do anything without daily help

Figure 18: Three different human images (mensbeelden) of three different laws.

3. More complexity in problems, more domains, laws and counters involved

The more problems someone has, the more organisations come into play. And the more complex the problems, the more difficult it is to fit them into the strong human image of the regulations and law and thus the harder it is to help them (Figure 19).

The different laws and the executive organisations all have a different function and different responsibilities in the social domain. In practice, however, it is not always immediately clear who should provide the support for certain requests (Regelhulp, n.d.). As a professional, you have the option of escalating (opschalen) in such a case. A Youth and Social Support Director (JMO) will then look at the request for help, find the right people together to find a solution. Based on the problems that often occur, they can suggest process changes in the municipality (Personal Communication, Lesley Steijn and Samira Fakher, directors JMO).

Next to that, the more difficult their problem, the more they have to arrange it themselves. With a more complex and difficult problem, it happens more often that no suitable care in natura is available at the municipality and the young person therefore has to apply for a PGB. This, however, requires much more administration and regulatory pressure on the part of the young person and/or his or her parents.

"Sometimes a care request does not 'fit' well with the way care is organised. This is called a complex care demand. Usually the care request itself is not that complicated, but it becomes complex because the care does not fit well or because care and help is needed from different domains." - Regelhulp (ministry of VWS)

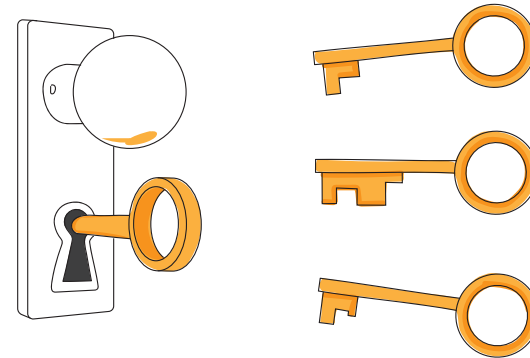


Figure 19: More complex problems (keys) do not fit well.

It is a search of looking through keyholes. The search for right help also even does damage.

- Lena (mother of W18'er)

4. W18'ers and their parents do not understand why it has to be so difficult

In the interviews with the W18'ers and/or their parents, and in this research, it was found to be hard to get an overview of the social domain. Next to not knowing how the domain is structured, it felt not relevant to the W18 and their parent to know. They just wanted care.

The limit of becoming 18 years old also feels arbitrary as a reason to have to change care. The rules for application and their rights are also not clear to them. That is why they just try to get what they can get. They would have to search online, call, email and go to counters, but they feel a threshold. Instead they often ask their network. It is not clear why it has to be difficult and that makes them question the system: are they taken seriously and will they receive what is their right? It creates distrust toward the government.

It feels to me then like they think I know how the process goes, but I really don't have a clue, except that I know I could make a report and that I just want my situation to change. I don't have time in my head to search the internet for how it works. - Rebekka (W18'er)

To find out, they need to search online, call, email, go to counters and ask around. This costs a lot of energy. Therefore, most often they ask help where they are already getting it, like the district team. Next to that, it is recommended to them from their network and care givers to just apply as much as possible to services that could fit them.

Conclusion

Many organisations are involved by organising the care of a W18'er. Organisations for indications, payment, for the care and other organisations like client support and school.

When a young adult turns 18, their care officially is paid for under different laws. Therefore, the organisations involved also change. Even the care provider often changes, because the care budget is lower for people over 18 years old.

Four main problems have been presented for what makes the transition such a harsh one:

1. budget deficits in the social domain
2. different human image per law and organisation
3. more complexity in problems, leads to more domains, laws and counters involved
4. W18'ers and their parents do not understand why it has to be so difficult.

5. Interaction with the W18

PROBLEM SPACE

This chapter explains the context at the interaction level. This is part of the study to frame the problem space. At the end of the chapter, the main problems in the interaction of the W18 with their municipality are summarised.

5.1 When turning 18

5.2 Request journey for WMO

5.3 Emotional response

5.3 Main problems in the interaction



5.1 When turning 18

In the previous chapter, the relevant organisations and laws of the social domain for the W18 have been introduced. In this chapter, the focus shifts from a systems' perspective to the level of interaction the W18 has with the municipal organisations.

In Figure 20, a timeline is shown of when the W18 has contact with municipal public services. The timeline differs per person, depending on their request for care and their knowledge of the system. The yellow arrows show interactions initiated from the W18'er. The blue and grey doubled arrows show contact moments scheduled in consultation between the W18 and the municipal professional.

The process of applying with a certain care request is visualised with the icon of the life domain it applies to (chapter 4.1). After the application has been approved, a meeting takes place every once in a while. Depending on the service and the agreements, this is often six months or a year.

When turning 18 years old, the W18 must make new request at different counters. Doing these requests right and doing the right requests, influences the further experience with the municipality. Because there is no general overview, it is often a search for the right services. Sometimes, a social worker or municipal official helps by referring to a website or counter.

Each service has a particular journey; the contact moments can differ. In this research, the focus will be on the transition from Youth Care to WMO. The next page will zoom in on the first part of the journey with the municipal service of WMO: the journey of making a request.

Looking for care is a search. There are many parties involved. You go from counter to counter to counter - Eline (mother of W18'er)

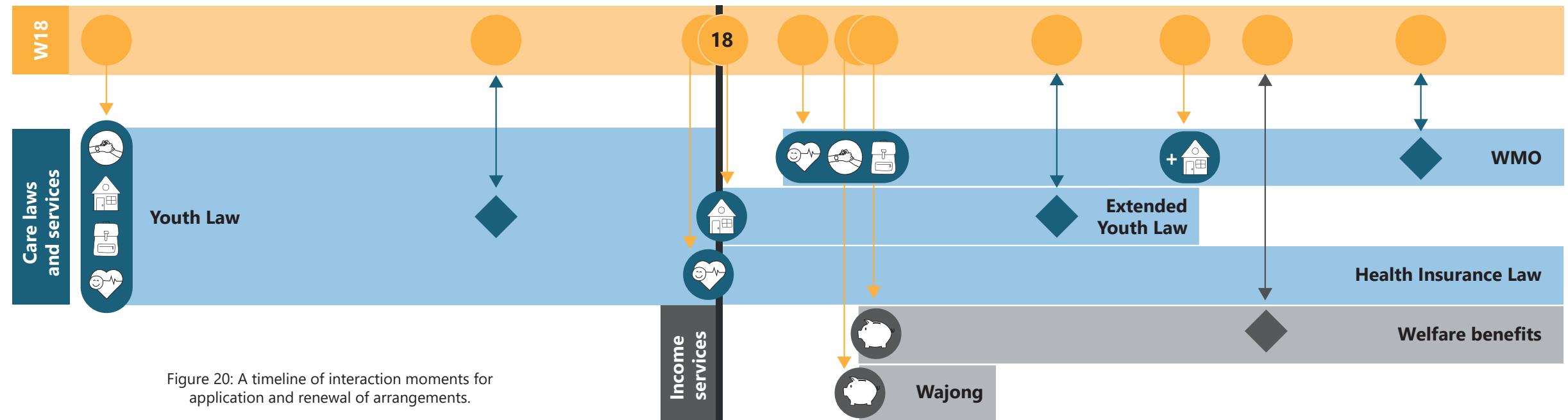
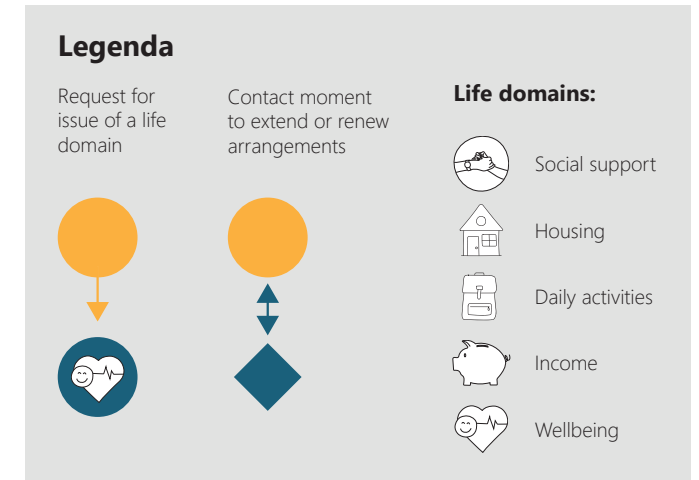


Figure 20: A timeline of interaction moments for application and renewal of arrangements.

5.2 Request journey for WMO

Figure 21 gives an overview of the contact moments of the request journey for WMO. The following pages will go into more detail on the

different contact moments: the request; call-back; intake and dossier collection. The evoked emotions are visualised in a graph. A note

here, is that the threshold or 0-line of the W18 already is lower than other people's baseline. the negative emotions evoked by the interaction

with the services comes on top of their stress and negative feeling. The emotion line is explained in chapter 4.3.

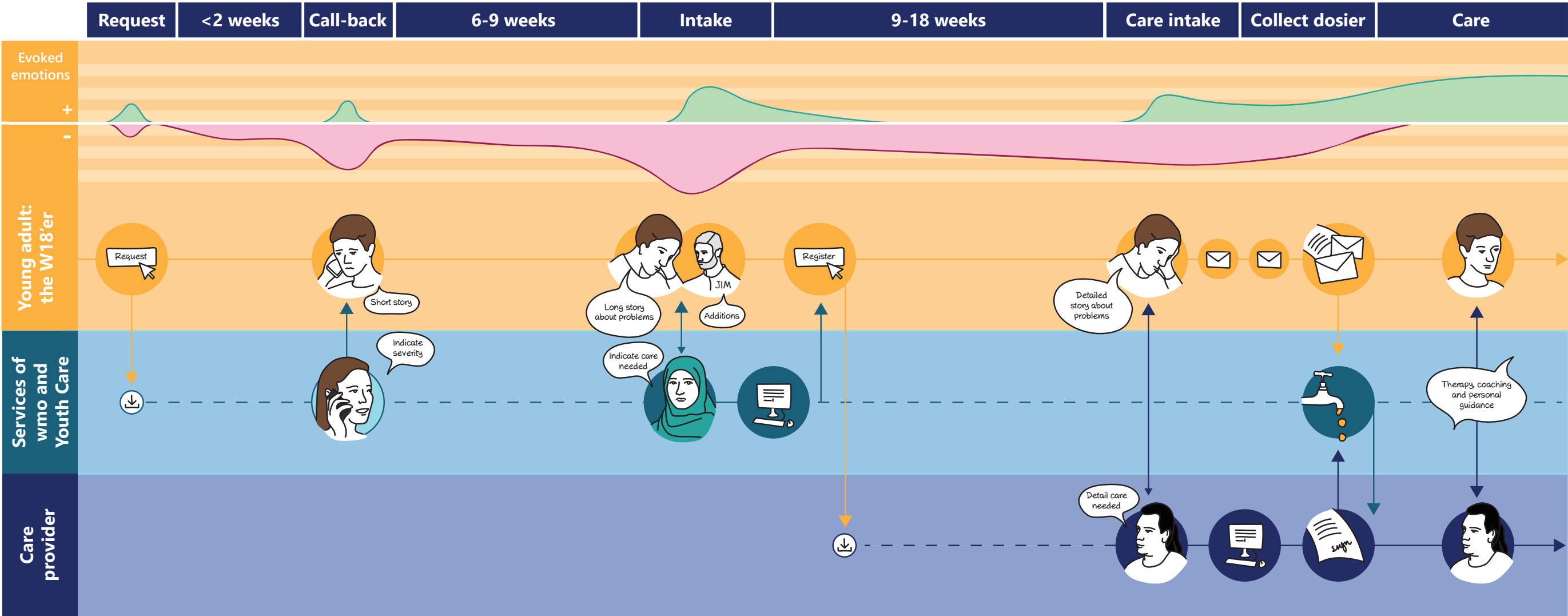


Figure 21: The request journey for WMO.

Request

On the website of the municipality, a request can be made (Figure 22). A personal plan can be handed in as well. In this plan, the situation and the solution for care can be described. In the request, the following questions need to be answered (Gemeente Den Haag, n.d. a):

- Give a brief description of your request for help.
- Would you like to fill in additional information with the notification?

When answering 'yes' to the latter question, a list comes up which you can tick off. For example: 'I need someone for support, because...'. An explanation can be given for each list item.

The notification can also be made together with someone from the municipality, for example at a service point (Gemeente Den Haag, n.d. a).

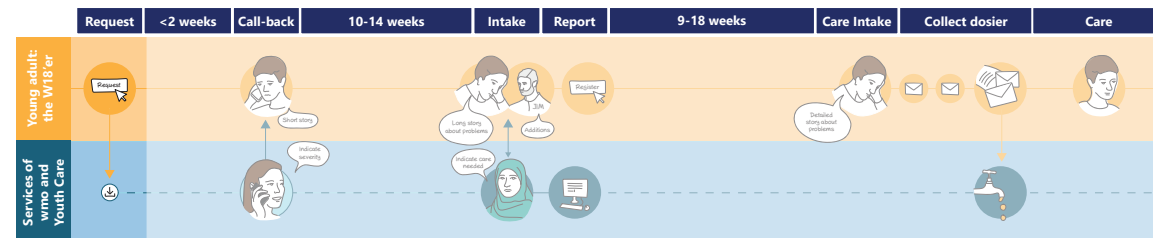


Figure 22: Step 1, the request.

I found out that I could live in assisted or sheltered housing. Someone said that to me. I think that's when I and the psychologist made contact with the municipality. - Sander (W18'er)

Call back

The municipality will call when the request is done (Figure 23). During this call, they will plan the intake meeting with the W18'er and/or their parents. (Gemeente Den Haag, n.d. a).

The interviews with the W18'ers and/or their parents indicated that this conversation was also used to get a quick overview of the request.

You give your number and then you are called back at an impossible time when you are working.
- Lena (mother)

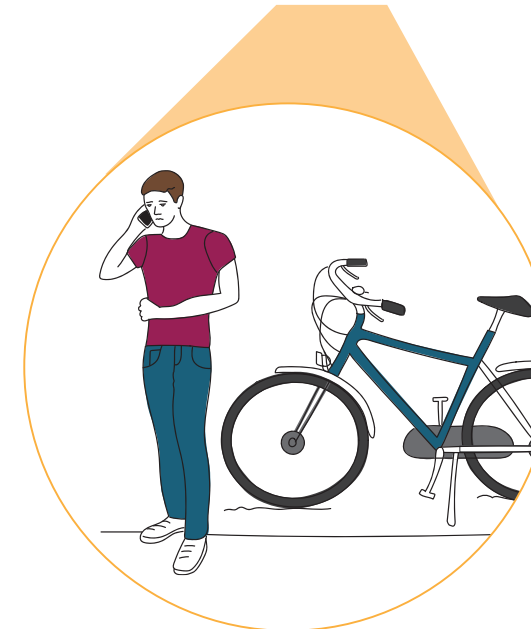
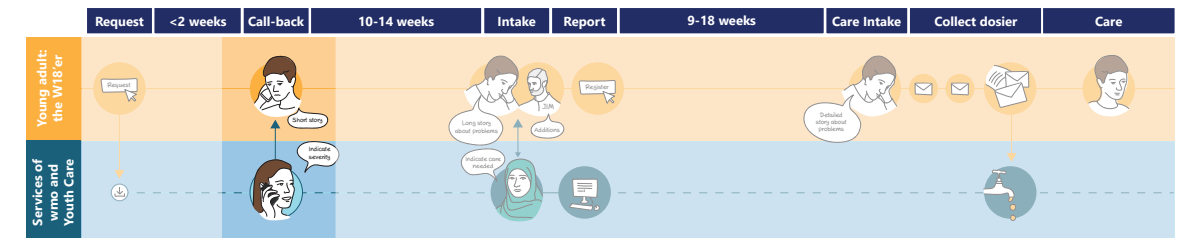


Figure 23: Step 2, the call-back.

I got a call on a Thursday when I was on my bicycle and I thought: let's step off the bike.

I thought that she would set a date at a time when I had space to talk about it and to first get acquainted. That was all skipped and I was just asked directly while standing in the street: tell me something about your problems... That was kind of weird and not pleasant. - Rebekka (W18'er)

WMO Intake

The WMO intake interview is to investigate the situation and request for help of a citizen (Figure 24). The municipality must plan this meeting within 6 weeks of the notification. The municipality looks at what the W18 can still do themselves and what people in their social network can do for them.

The municipality also looks at their needs and preferences when it comes to the care and facilities. If it appears that they need support and cannot get it from their network, the municipality is obliged to provide this support under the Social Support Act. (Rijksoverheid, n.d. b).

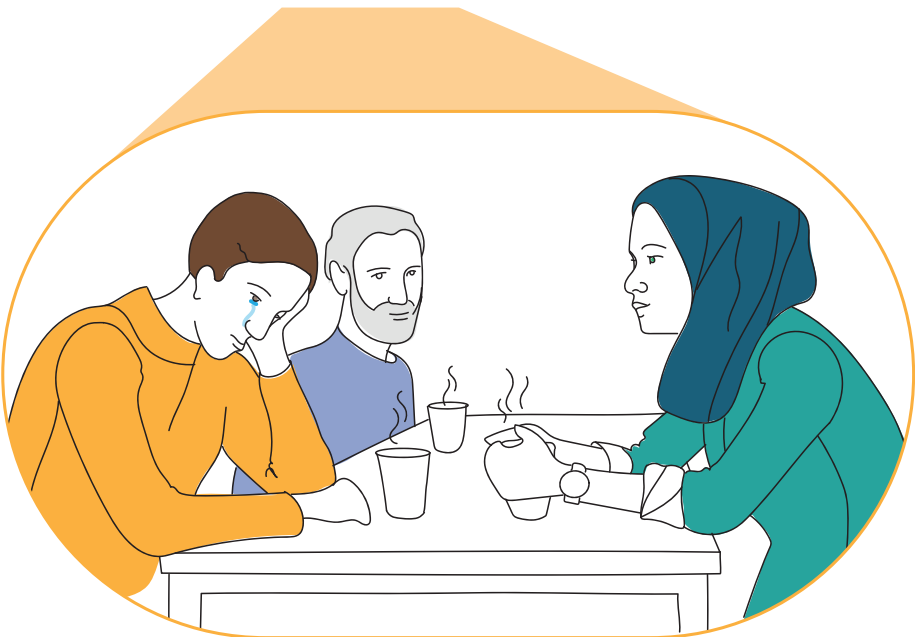
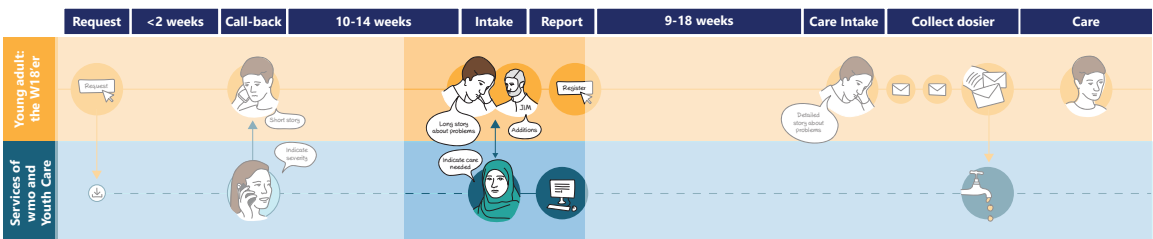


Figure 24: Step 3, the intake interview.

The care the municipality can provide is formulated in the form of outcomes. This is divided into 7 result areas (Britta Regeer, wmo case manager, personal communication):

1. Running a household (Voeren van een huishouden)
2. Social & personal functioning (Sociaal & persoonlijk functioneren)
3. Self-care & health (zelfzorg & gezondheid)
4. Day care (Dagbesteding)
5. Finances (Financiën)
6. Reachability & availability (Bereik- & beschikbaarheid)
7. Housing (Wonen)

The self-sufficiency matrix for young adults or in Dutch de Zelfredzaamheid-matrix voor Jongeren, is the instrument that is used in Youth Care to help a professional indicate the strength of the young person's ability to care for themselves (Fassaert et al., 2014). The professional can assess the situation of the young adult on several life domains as the basis for an indication (Kamann, 2020) (Appendix E).

A case manager is linked to the W18'er. This can be a new person at every indication interview. The municipality's new system of how they pick up requests for help has changed so that an available case manager picks up the case, which is not necessarily the same case manager (Anne-Marie Wiersma, case manager pgb, personal communication).

At the municipality of The Hague, the W18'er is allowed to bring someone with them: their self-initiated mentor (jouw ingebrachte mentor, JIM). They is also present at the indication interview for support and can help explain the young person's situation.

The concepts of 'strength', 'self-reliance' and 'participation' are central for WMO indications. During an assessment interview, it will therefore be examined what the client can do on their own or where the network can help to increase and improve their self-reliance and participation (Overheid.nl, 2022 a).

After the intake, the WMO case manager writes a tailor-made advice within 6 weeks, based on the interview. This will state the results the municipality can offer and a summary of the personal research through the interview.

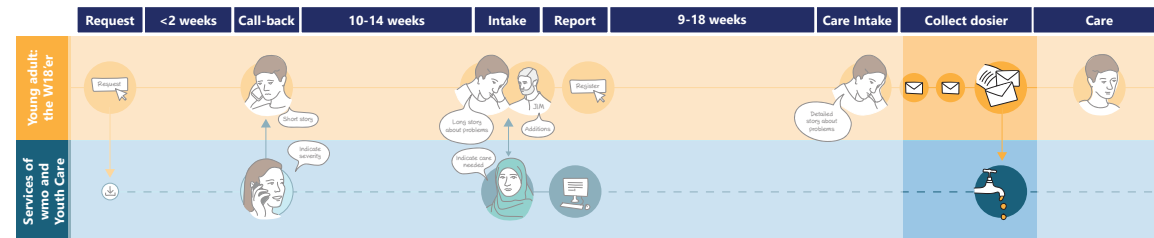
In normal life, you can sometimes ignore your problem, in such an interview you may not, because then they will reject your application.
- Rebekka (W18'er)

Collect dossier

Before the indication can be finalised, the W18'er often has to provide documents like a GGZ-diagnosis and income to municipality (Figure 25).

At this point, the contact with CIZ and SVB start for the payment of the care: respectively their own contribution for care and personal budget (if needed). An application form needs to be filled in. After that,

the care can start and the payment from WMO can be made. Every six months, they have to officially reapply for the WMO indication and fill in an evaluation form and an official application form again. This can often be copy pasted with some minor adjustments (personal communication, Eline, mother) (Britta Regeer, wmo case manager).



To officially issue the indication, we must also have that WMO plan and support plan in to actually start the indication.

- Britta Regeer (wmo case manager)

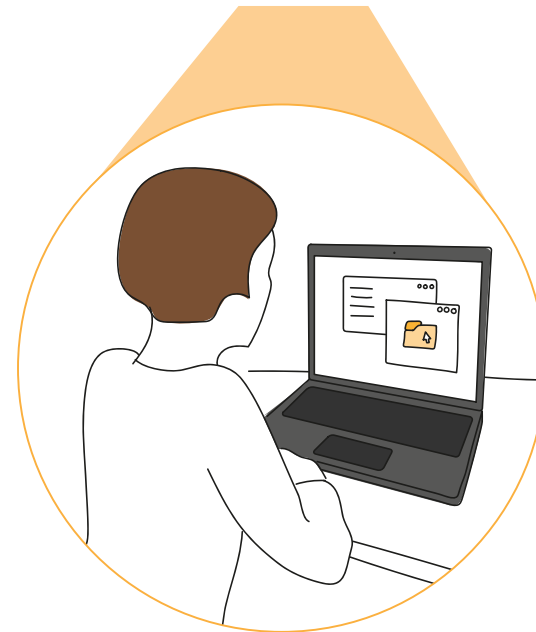
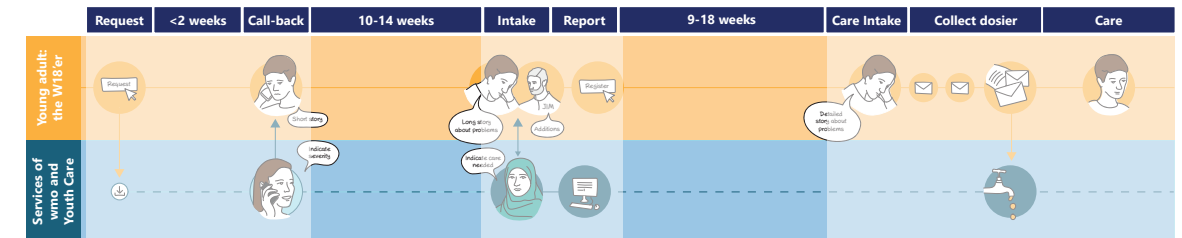


Figure 25: Step 4, collect dossier.

Waiting time

Efforts are being made to shorten the waiting list (Figure 26). The waiting list for specialist mental care (geestelijke gezondheidszorg, GGZ) care is 9-18 weeks. The average processing time from wmo from notification to advice has been accelerated from 64 days in 2019 to 44 days in 2021 (Gemeente Den Haag, 2021). For instance, in 2021, it was introduced that all young people in the Youth Act and WMO for

a re-determination will be on the same list as those who apply newly. This makes it easier to prioritise and shortens the waiting time for new applications. Also, staff no longer have fixed clients, but indication applications are assigned to the staff member who has space (Anne-Marie Wiersma, pgb case manager, personal communication).



It is a tense period: There is no expectation of him, but there is no help either. You are at a standstill in everything. - Lena (mother of W18'er)

Figure 26: The waiting time.

5.3 Emotional response

In Figure 27, the four emotional responses to the request journey can be seen of the W18 involved in the project. The graph in the journey overview (Figure 21) showed the average emotional response of the W18'ers.

During an earlier visualisation of the journey, a graph had been sketched based on the interviews with the W18. To solidify it, the W18 were asked to retrospectively grade how they felt during the different contact moments of the journey. They were asked to give a positive and negative grade between 0 and 5. This was done because the interviews showed that a contact moment evoked both positive and negative feelings. Some lines go below -5 if the negative feeling was worse than bad in their experience.

The positive emotions show hope when they hear the municipality is working on their case. These positive feelings however often come with a negative peak as well. Like Eline, mother of a W18'er said:

It is almost always: great, something happens and gosh how complicated and what do they want to know now. - Eline (mother of W18'er)

Negative emotions mainly show when there is much uncertainty. Uncertainty about the process, the call-back, intake meeting and for collecting the dossier. Next to that, it can be concluded that if the need for help is high, the stress is also higher, which is visible in a stronger negative response.

Quick evaluation per graph

Graph 1 and 4 mainly show a negative emotional response and no positive response. These participants had the most significant mental health problems and therefore did not feel much hope and more stress.

The participant behind graph 2 needed the care badly as quick as possible, so with each response of the system, their hope grew. But with the waiting it went as quick as it came.

Graph 3, on the other hand, does not get much below zero. This participant was not as dependent on the wmo indication for day care, but was more focused on organising psychological help with health insurance. But also here, the negative emotions come on top of the stress and negativity the W18'er already has. This participant did harm to themselves during this period.

Two contact moments are highlighted here, for the results were insightful. The 'intake interview', because it evoked strong emotions and 'collect dossier', because it evoked less strong emotions than expected.

Intake interview

For all graphs, it can be seen that especially the intake meeting evokes a lot of negative emotions with the W18. They felt a lot of stress before and during the meeting. How the interview went and what the municipal official gathered from their story would determine what care they would receive. Next to that, it was not clear what they would have to share during the meeting.

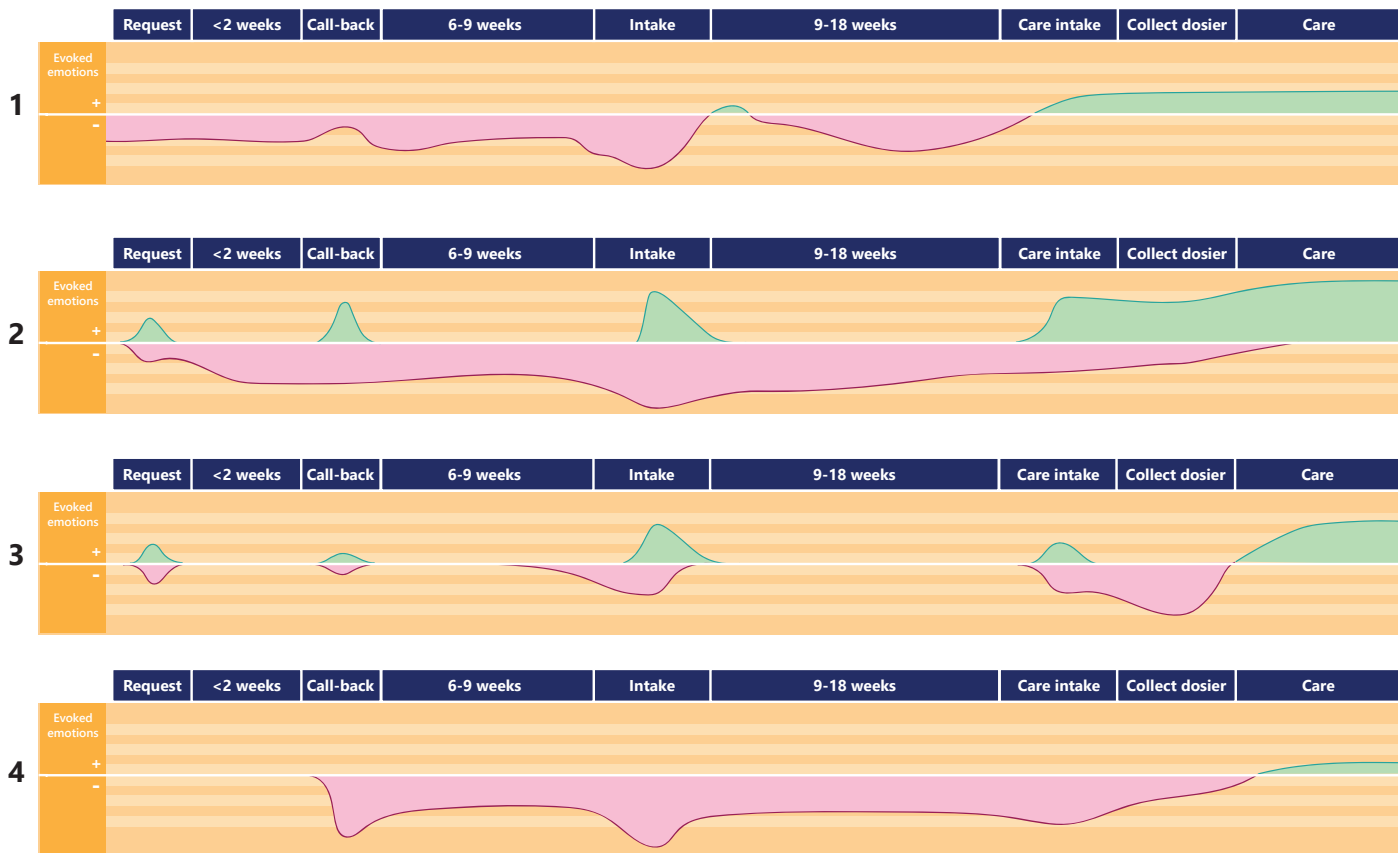


Figure 27: the emotion graphs of the W18 involved in the project

Collect dossier

Collecting the dossier does not give much change in the graphs. This is because the parents and caregivers often do this for them. Graph 3 shows a low peak, because here the W18'er filled in the forms together with their parent.

Fortunately, for these participants, the journey ends on a positive note, as care is finally settled and begun.

5.4 Main problems in the interaction

In the request journey some problems were defined. Two main problems are presented. Smaller problems are grouped together under these main problems.

Lacking overview

From the young person's point of view, there is little clarity about the municipality's system and what is expected of them. During this research, the lack of overview on the municipality's websites was also apparent. This report can therefore serve as a start to get more overview. There is a lack of overview on several levels. Below, it is described per level.

Now you are constantly checking for possibilities; and then someone forwards you a link for something, but on that website it is not always clear. - Eline (mother of W18'er)

Missing overview of rights and duties

It is currently not clear what you are entitled to when it comes to help from the government. There is also no overview of what you have to meet to be entitled to it. The participants in this study were all referred to the municipality by someone from their network. Two from the psychologist, one from school and the fourth from the personal network.

I didn't know I could apply to the wmo for assisted living. the psychologist pointed out to me. - Rebekka (W18'er)

The knowledge of what the municipality has to offer should not remain with caregivers or experience experts. It should be black and white somewhere. Now people are too dependent on having the right connections to know they can get help.

Missing overview of counters, laws and policy

If you then know that you can knock on the municipality's door, it is not always clear at which counter you can knock on the door and under which law the help then falls. For the two W18 people in the study, it was not even clear that the WMO was part of the municipality.

The division of roles within the municipality is also not entirely clear. If a W18'er has a question about the process or about something substantive, it is often not clear where to ask this question. Sometimes this is explained, but it is not reflected in a clear overview.

On the phone it was explained what you can go to the wmo case-owner for. I forgot again, so now I just call every time with questions. I will be referred otherwise. - Eline (mother of W18'er)

The laws and policies are not fully known even to the professional. This is also almost impossible without an overview, because there are a lot of possibilities and this is also constantly changing.

For instance, there are many initiatives and there is room in the policy that is not taken. For instance, there is a 16-23 budget which is still little used. There is also a pilot in Segbroek to do a warm transfer of case manager from youth care to that of wmo. Interviews with municipality staff showed that these options are there but not yet used enough.

And that means that citizens have to go back to finding what help suits them.

The idea is that a family coach when assisting a young person turning 18 in the near future, that they make it known to us, in order to plan some kind of introduction to the wmo (segbroek), but I must confess that in practice I have only done that once. - Britta Regeer (WMO case manager)

The professional doesn't know everything either, so you often still have to figure it out yourself. - Lena (mother of W18'er)

Missing overview of personal process at a counter

Once a young person has managed to find the right counter, they can make an application or notification. After the notification, feedback from the municipality is insufficient. For instance, the young person does not know whether the application has been properly received until they receive a call. Nor is it clear where his application is and who should be working on it.

Missing overview of facilities

After and while making a notification, it is important for citizens to know what facilities the municipality has to offer. One can then make a more targeted application to get a particular facility. It is also true that one will not make an application if one does not know what it can achieve.

An overview in facilities lacks and therefore they drop out. - Lesley Steijn (director JMO)

And sometimes a person does not even need to apply to use a facility, as it falls under general or intermediate facilities. Having this overview would save time for both the municipality and the citizen.

Indication meeting is too stressful

Too much depends on that one hour

Based on the case manager's 'research' during the indication interview, an indication is issued. This is done based on the information the young person shares with the case manager. It very much depends on the day, on how the young person feels, but also on the mood of the case manager how this indication will turn out. There is a lot of pressure on this meeting. The young person has to be really vulnerable to this new stranger and share enough to get the indication.

There are girls in my house who initially did not get their indication because they did not tell their problems seriously enough. - Rebekka (W18'er)

What should I say, what is my request for help?

It is also difficult for the W18'er to put words to their feelings and they also do not know exactly what they need because they do not know what is possible. Because so much depends on the conversation, they want to tell everything. One of the participants had therefore emailed an explanation of the situation in advance, so that it was in black and white. In retrospect, for Sander, for instance, it turned out that he would not have had to go as deeply into the cause of his problem. He would have liked to have known this in advance. A good preparation and explanation of what will be discussed would help.

The interview is very confrontational

Partly because it is not clear what the interview is supposed to be about, the young person is very nervous beforehand. But the interview also had an aftermath for all 4 W18s involved in this project. The interview was experienced as very confrontational, because you have to go into what you cannot do and therefore what you need help for. It is not nice for the young person to emphasise what they cannot do. The young person is forced to acknowledge that they need help.

The WMO interview was very confrontational: I had to tell in detail what I could and could not do. I was upset for half a week. - Rebekka (W18'er)

Waiting time

Waiting time also remains a major problem. As a result, help may arrive late. After turning 18, the young person has to be re-registered with the municipality for help. This comes with a waiting period for WMO and for care. Only when there is an indication, can the young person start booking help from a care institution with certainty. This causes care to come to a standstill for a while, which causes deterioration in the young person's situation.

One of the young people at the enquiry had notified the municipality before she was 18. Due to the waiting time, help did not arrive until after she was 18. This help came too late for her, because her situation had changed.

We had no care for six months, because you can't start hiring that care if you are not 100% sure that the money is there. And that's just as well, it turned out, because the money is drastically less.

- Lena (mother of W18'er)

Therapy only came after I was 18 and by then I was out of the house and didn't have much use for it either. - Rebekka (W18'er)

Conclusion

When a W18'er turns 18, they can report to multiple counters for support. This creates many irregular contact moments with the municipality. To keep the scope manageable, this project zoomed in on the request journey for WMO. Using a story board, a more detailed explanation was given of when the young people have contact with the municipality when they apply to WMO.

To the W18 involved, they were asked to scale their emotional response towards this journey. What was striking was that the more weight

attached to the application, the more extreme the emotional response. The intake interview in particular evoked a lot of negative feeling.

The main problems the W18 encounters in the interaction with their municipality are defined in this chapter. There is a lacking overview of the process of the W18 in the service, the laws, counters, facilities and rights and duties per organisation. The indication meeting is too stressful for the W18 and the waiting time can cause problems.

6. Proactive Public Services

SOLUTION SPACE

As a result to the problems of the current public service (chapter 4) and the low ability to do of the W18 (chapter 3), it is strongly advised to progress toward a more proactive public service and relieve the citizen (ontzorgen). In this chapter, the solution space for changing the public services is presented.

6.1 Proactive public services

6.2 An analogy



6.1 Proactive Public Services

The W18 of The Hague have to make contact with the municipality when they turn 18, to apply for the budget of public services for adults. They encounter some problems as described in the previous chapter. For these vulnerable W18'ers, a possible solution would be to decrease their role and increase the role of the municipality, by creating more proactivity in the public services. This would save energy to work on their mental health problems and relieve stress. What are proactive public services?

Oude Luttighuis (2021) provides the following definition: "Proactivity is about moving the initiative from the citizen to the government and can be incorporated in many different ways in public services."

There are different types of interaction with several levels of proactivity for the municipality, which demand a different effort from the citizens (Brüggemeier, 2010). In Figure 28 the types of interactions of Brüggemeier are shown with some examples of proactive services marked with yellow.

Examples

An example of an outreaching initiative of the municipality of The Hague is that when a person turns 18 and they do not have a start qualification, the Youth Desk (jeugdloket) calls them to check in on their situation and offer help if needed (Voortijdig schoolverlaten, 2021).

Next to that, examples of national proactive public services are placed on the scale, to create a framework of reference. One of the most well-

known proactive services is the NL Alert. The Dutch government informs and warns citizens if needed, without any effort of the citizen. Other examples are the pre-filled tax declaration, where the citizen only has to check the declaration, and the repayment of the loan with DUO. The repayment sum of the loan is based on income information from the tax authority. The amount someone has to repay each month is calculated and debited automatically (Klaver, 2022).

Three variables

The amount of proactivity depends on the amount of effort the citizen has to put in; the service can be triggered and delivered with minimal involvement of the citizen. The more complex the service, the harder it is to make it proactive. The amount of desired proactivity can differ per service, situation and citizen. The form and amount of proactivity can vary along three variables (Oude Luttighuis, 2021):

1. Triggering actor
For example a life event or a specific combination of data
2. Information required from a citizen
For example personal information about their situation
3. Interaction required from a citizen
For example filling in forms, having meetings and clicking on a button

A public service can therefore be made more proactive by increasing government initiative and minimising the amount of interaction and the amount of requested information (Oude Luttighuis, 2021).

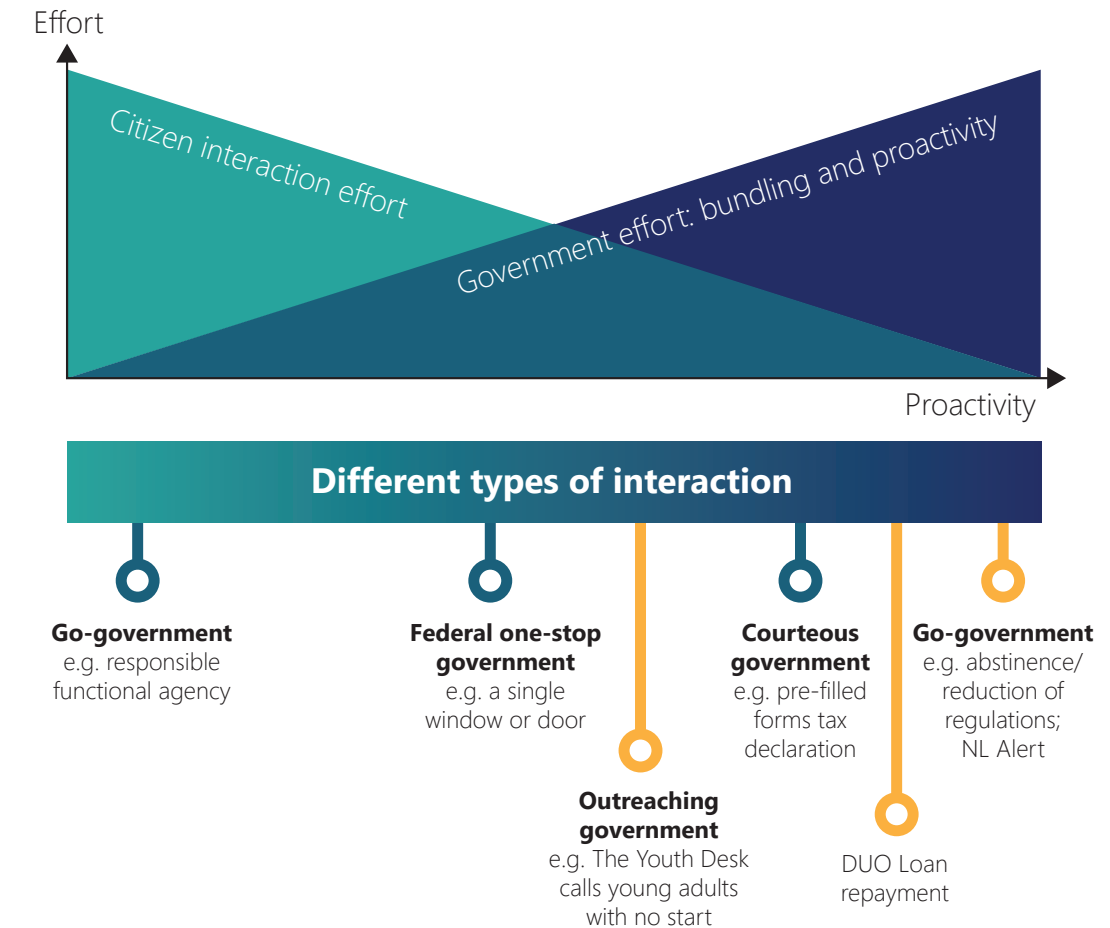


Figure 28: Proactivity is a scale with examples of proactive services in The Hague and nationally in the Netherlands



Suitable services

In a fully proactive service, the municipality can deliver the service automatically to a citizen without their request, but only with their consent. To be able to do so, the municipality must be able to determine when a citizen is eligible to receive a service and be able to consequently deliver the service to the citizen, without interacting with the citizen.

Suitable services are (Scholta & Lindgren, 2019):

- compulsory;
- have clear eligibility criteria;
- have no negative consequences for the citizens.

Are the W18 a group suitable for proactive services?

Yes. The group is recognizable: young adults receiving GGZ care under the Youth Law that are about to turn 18 years old. Next to that, in law and in policy, there is a lot of room for customisation for this life event.

Paradigm change

Estonia is a leader in proactive public services, pioneering in transforming the relationship of citizens with the state. According to Rozov, the Chief Digital Officer and Deputy CIO of the Government of Estonia, it is essential to note that **"the challenges do not lie in technology implementation, but in paradigm change."**

It is about whether citizens are willing to let their data be used in government processes, which are issues related to trust and ethics. **For the legitimacy of the state and politics, the satisfaction of the citizens is important** (Proactive services enhance government in Estonia, 2019). These needs and the perceived usefulness of the service are at the basis of their attitude towards the public service, influencing their acceptance towards proactive public services (Kulviwat et al., 2007).

Oude Luttighuis (2021) sums up some suggestions for increasing citizen acceptance towards proactive public services:

- The service can be personalised, delivering customised services ('maatwerk');
- making the service understandable;
- giving the citizen more control, for example, by enabling them to choose what can be done with their information.

With this chapter, the basis is laid for designing a more proactive WMO service.

6.2 Analogy

Metaphors can help to frame the problem and define the design aim. Experiential properties can be used as inspiration for the design (Hey et al., 2008). Here a metaphor for the public service is made. Three levels of proactivity are defined.

A metaphor for the current interaction could be made with traveling through a city with a map. Currently the W18'er has to find their way to the right service. It is like a **map in a game** (Figure 29). It starts out empty and if you explore, the map is filled.

A step towards proactivity would be to inform the W18'er where they could find the right services and seek for help. In the map, relevant locations could be highlighted, when searching for it. A route from A to B could be easily planned by the W18'er. It would be like **Google maps** (Figure 30).

The interaction of the W18 with the service should be like traveling with the **taxi** (Figure 31). When you are in need of transport (need of help), you can call the taxi or choose a taxi driver in their application (quick help or personal help). You can tell them where you want to go (goal setting) and they will bring you to the right place (goal achievement).

From this metaphor some qualities can be derived. The most important one that connects to the needs of the W18 (chapter 7), is that someone leads them, without losing control. In a taxi, the W18 would be still in control of where they want to go.

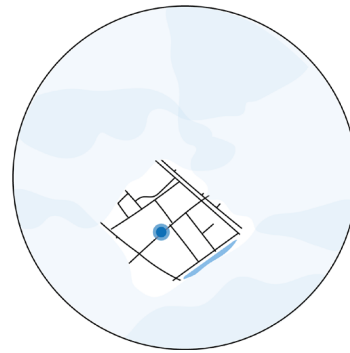


Figure 29: the system is like a game map

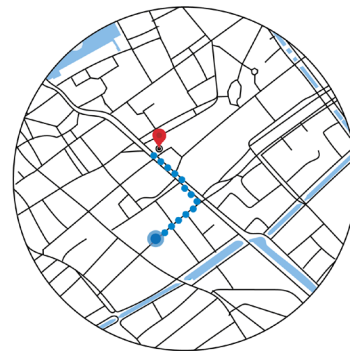


Figure 30: the system is like Google maps



Figure 31: the system is like a taxi service



Conclusion

Proactive public services are services that offer citizens the service while decreasing the initiative and effort the citizen has to put in to receive the service. The amount of proactivity for a service can differ along three variables:

1. Triggering actor (in data);
2. Information required from a citizen;
3. Interaction required from a citizen.

Suitable services are compulsory; have clear eligibility criteria and have no negative consequences for the citizens. The current services for young adults between 16 and 23 years old are suitable, because the W18 are a

recognisable group in the data. They have clear eligibility criteria and the necessity for the W18 is clear. Next to that, there is room in policy and law to offer this service more proactively.

The challenge in making services more proactive do not lie in the technology implementation, but in the paradigm change. Both the paradigm of the government as well as the paradigm of the citizen. The needs of the citizen should be taken into account and the perceived usefulness should be clear. The satisfaction of the citizen for such topics is important for the legitimacy of the state and politics.

7. Research Synthesis

USER NEEDS IN INTERACTION

From the interviews, the problems were defined as described in the previous chapters. To be able to design for the W18, it is even more important to know what they would need in the interaction with their municipality. In this chapter, as a conclusion to the research part, six needs are defined.

7.1 Needs of the W18

7.2 Design Criteria

7.1 Needs of the W18

Needs in interaction

In the interviews with the W18, the problems they encountered with their municipality were sussed out. Next to that their personal response and their ideal image of how it should be, were questioned. From this, six main needs were defined for what the W18s consider important in their contact with the municipality.

1. Someone to guide and help

Therapy and arranging care already takes enough energy and they do not have energy for more. It is difficult to get an overview of what they need to do and where to go. That's why they need more guidance and help, especially with the administrative part.

It would be nice if there was a person to point the way and to take over for you, to work out what you need to do. That you can fill in applications together. - Eline (mother of W18'er)

2. To know what to expect

It is important to know what they are entitled to, where they can go, what they have to do and when they have to do it. Then they can sort it out in time and they know for sure that things will work out. They need clarity and predictability, not additional uncertainties. Their parents would also like to understand more about their child's rights and the possible alternatives for care available.

I want to know before the interview what is expected and how deep I should go to tell about my problems. - Sander (W18'er)

3. Tailored contact

It is important that the service provider makes the effort to really tailor the conversation to the W18'er's needs and what they are able to do. The case manager should have some knowledge about the target group in order to do so. Sometimes this requires more understanding, patience and probing, and sometimes digital or physical appointments are better.

I don't think she [the case manager] realised that it can be very difficult to talk about your home situation and that you don't normally do that either. I don't share with my friends either, for example. - Rebekka (W18'er)

4. To be allowed to make mistakes

Accidentally making mistakes should not have immediate harsh consequences. This causes a lot of stress with the many forms. Involved mistakes should be correctable. The service provider must also honour its agreements. Mutual trust is important.

This is allowed, that is not. There is no line in it. I have no idea what all I have to declare. And if it goes wrong, will they reclaim it? with interest?
- Eline (mother of W18'er)

5. To focus on what the W18'er can do

The young adult's judgement is already that they are weird, sad and different. That is why they sometimes pretend to be better than they feel. It is confrontational to have their inability challenged and to have to 'justify' themselves to a stranger. Instead of emphasising their inability, respect and keeping perspective are important: what do they want and what can they do themselves? Make that concrete and don't overquestion.

The conversation doesn't feel like help, it feels like justification. To have to explain again why things don't work out. Every conversation he feels like he is weird and can't do anything.
- Lena (mother of W18'er)

6. To be treated as a human being

The system now feels cold to them. After they turn 18, their care provider no longer earns money from them and that's why they have to leave Youth Care. The professional does their best, but they feel like a number within the care organisation and municipality. Budget and protocols now seem to guide which care is given, instead of their story and personal situation.

What is very bad in care is that you really become a number. The organisation doesn't care. People above my supervisor want me out, because they don't make money from me. - Rick (W18'er)

The insights and six needs were validated and refined with two parents of W18'ers. It was not possible to evaluate the insights with the W18 themselves, because they did not have the mental space to respond.

Needs in communication

Making contact at all is challenging and meeting new people can be stressful even days beforehand. During a conversation, a W18'er may also be triggered by something asked or said. This may be because they are confronted with their own inability, but also, for example, because of a complex memory or association. Therefore it is important to prepare the W18'er and the case manager (personal communication).

From research of Muzus (2022) several opportunities and possibilities were defined for the government to improve their communication with vulnerable young adults:

- Make an overview in the form of a personalised checklist;
- Short and task-oriented texts;
- Clear, understandable and action-oriented language. No difficult terms, but no slang either;
- Repeat and personalise announcements and reminders for regulatory matters;
- Refer to resources and relevant tools;
- Clearly refer to external help and have a presence in the district or at school;
- Use personal stories and experiences to respond to empathy of the young person for relevance.

The letter we got when we turned 18 was nice: because it was short but to the point; it was a summation where you could put a curl on it and then you knew you were done.

- Lena (mother of W18'er)

This master thesis research also shows that the way of asking questions can have a lot of influence. When completing the sensitising booklet and doing interviews, it emerged that very open-ended questions were difficult. They were also afraid of giving the wrong answer and were therefore happy with clear instructions or if the purpose of the question was included.

Questions that are multiple ways fillable take me more time and doubt. And emotionally charged questions are often painful. - Rick (W18'er)

When the service can stop

JONG doet mee! and the youth ombudsman from The Hague have conducted research into the 18-/18+ transition. They found that the young adults need to be sure of 5 things to make the transition out of Youth Care (Janssen et al., 2016). Other parties have further researched and implemented this. Jong doet mee! and Levvel (2022) have defined the ultimate big five.

This overlaps almost entirely with the insights of the 'agenda kwetsbare jongeren 16-23'. There they state the need for supporting all young people towards participation and self-reliance requires an integrated and preventive approach by the municipality and partners in the areas of education and work, income, care, safety and housing (van Engelshoven, 2017).



1. Social support: I have at least one adult who is always there for me and I have supportive family, friends and/or acquaintances I can count on.



2. Housing: I have a suitable, affordable place to live alone or with others, where I can stay for a long time.



3. School & work: I go to school, study or work and I make plans for what I want to do or become later on.



4. Income: I am well prepared for my financial independence and for preventing or solving debts. And if I cannot do this myself (yet), there is someone who can do this with me. I have a stable income that is sufficient for now and the near future.



5. Well-being: I am doing well enough mentally and physically and I feel that I can handle the future. I recognise when things are not going well and I know where and who I can turn to for help.

7.2 Design Criteria

The needs of the W18 and the main problems in the system and interaction and design principles for proactive public services are taken into account when defining the design criteria. The needs are the basis for what the design should be and the problems for what it should not be.

The W18 need someone to help and guide them

- ☐ All the information needed for the W18 to understand their proces and rights are in one place;
- ☐ The W18 can easily find the counter or helpdesk to which they can turn for help;
- ☐ The W18 is helped at all counters.

The W18 need to know what to expect

- ☐ The W18 understand the process at a glance;
- ☐ The W18 are adequately prepared for the intake meeting;
- ☐ An overview of legislation, rights and obligations is available.

The W18 need tailored contact

- ☐ The case manager has knowledge of the target group;
- ☐ The W18 have the opportunity to communicate their preferred forms of contact;
- ☐ The case manager has space and resources to tailor the contact to the needs of the W18'er.

The W18 need to be allowed to make mistakes

- ☐ Mistakes made by the W18 have no direct consequences for the progress of the request journey;
- ☐ Mistakes made should be correctable.

The W18 need to focus on what they cán do

- ☐ The W18 are in charge of choosing what life domain and goal to work on;
- ☐ The W18 are given choices in how they will work on their goals (e.g. with which facilities).

The W18 need to be treated as human beings (by the system)

- ☐ Case managers get more say in their organisations about prioritising which young people should be helped by them;
- ☐ There is no abrupt budget change due to a change independent of care demand;*
- ☐ When there is a change of case manager, the content of the file is transferred.**

* Such as age of turning 18
** With the transition from youth welfare to social welfare and with reindications.

Conclusion

Through interviews with W18’ers the folowing needs were formulated for how the interaction with the municipality should be. They need:

1. someone to help and guide them
2. to know what to expect
3. tailored conversations
4. to be allowed to make mistakes
5. to focus on what they cán do
6. to be treated as a human being

The public service can stop if the young adult has stability and perspective in 5 life domains: social support; housing; school and work; income and well-being.

Based on the six needs of the W18, a list of design criteria was defined. The list can be found on this page. Both in need 1 and 2 and the needs for communication, it is made explicit that the W18 needs a clear overview of what to do and what is to come.

8. Final design: the IMprint

In this chapter the final design interventions are presented. The basis of the redesign lies in a indication matrix, called the IMprint. The implementation steps for using the redesign are given.

8.1 Design Interventions

8.2 Implementation



8.1 Design Interventions

Several design interventions have been made (Figure 32). As was established in chapter 7, the overall problem of the W18 was the lack of overview. A lack of overview in where they should go with each care request and a lack of overview of how the process would look. Both are tackled in **redesigning the request website** of the municipality.

Another one of the problems defined was that the intake interview was very stressful. This was partly because it was not clear beforehand what is expected of the young person during the interview. The interview itself was also stressful because the young person was confronted with their inability and problems. It was not clear to what level of detail the young person had to explain themselves. Therefore, a **conversation tool** has been made that can be used to give structure to the meeting: **the IMprint**.

As part of the redesign of the request website, I laid the groundwork for a new dossier format. In that dossier, the young person can keep all the important data themselves. The dossier forms the link between the request website and the intake interview.

The main focus is on the conversation tool, the IMprint. This tool would be the core of the dossier and request website and therefore, the core of the redesign. Next to that, this intervention can currently already be implemented. The IMprint will therefore first be presented and explained. After that, it will be linked to the digital request website and dossier.



Figure 32: Design Interventions in the request journey.

The IMprint

The IMprint is a matrix that allows the citizen and the municipality to define what the citizen's current situation is; an impression or stamp of the situation of the client (Figure 33 and 34). This is done with a scale on the 5 life areas of the Big 5 (Jongdoetmee! & Levvel, 2022):

1. Social support
2. Housing
3. Work/study
4. Income
5. Well-being

Based on a filled-in matrix, the W18'er together with the service provider can decide which life area(s) to work on. Only when the W18'er scores a 5 in all life areas, that person is self-reliant and the municipal service then can be rounded up.

It may be the case that a young person is 'stuck' at the same level for a long time. In that case the pilot light (waakvlam) can become active with both parties' consent. Turning on the pilot light means that contact with the municipality goes on the back burner until there is a change in their situation.

Self-reliance matrix

The matrix is based on the current matrix used in the social domain to map the current situation of a young person, the self-reliance matrix (zelfredzaamheidsmatrix, ZRM). The ZRM creates a 'picture' of the situation of the young adult over the past 30 days. With the ZRM, the municipal official does not look at the cause of why it came, because

this is too complex to picture. One can say too little about that. There are also 5 levels: a number between 1 and 5 and with a short description: 'acute problem', 'not self-reliant', 'moderately self-reliant', 'sufficiently self-reliant', and 'fully self-reliant'. The score is mostly based on information provided by the young person. Information from colleagues, parents and the administration should be used additionally (Kamann et al., 2020).

Result areas

Also included in the design is the Result-area list that WMO uses for their indications. These are 7 result areas with outcomes named below them. For example, a result of 'conducting a household' is: 'The client has a clean, liveable and organised home' (Gemeente Den Haag, n.d. c) (Britta Regeer, case manager WMO, personal communication). The 7 result areas are:

1. Running a household;
2. Social and personal functioning;
3. Coping with self-care and health;
4. Day care;
5. Money matters;
6. Proximity of support;
7. Sheltered or assisted living.

Clustered under the Big 5

The result areas and domains of the ZRM are clustered under the Big 5. Based on the relevant results and descriptions of the self-reliance score per life domain of the ZRM, the IMprint was completed.

Scoring from 5 to 1

Similar to using the ZRM, the case manager or young person looks at the matrix starting with a score of 5, if what is written there does not apply, then the score is set to 4, and so on (Kamann et al., 2020). The description may not fully match the young person's situation. This does not matter. The purpose of the matrix is to give an indication of self-efficacy. To see all 5 major life areas of the young person in one overview. And to discuss these together during the intake. It may be the outcome of this discussion that the score on one or more life areas is lower or higher than initially indicated on the basis of the 'selftest'.

The research by Jongdoetmee! and the youth ombudsman The Hague showed that young people leaving youth care because they turn 18 want certainty and clarity on the Big 5 life areas (Janssen, 2016). These life areas and what the young person wants certainty or perspective on were cleaned up. This tightened-up version of Jongdoetmee! & Levvel (2022) has been put as a checklist under each life area. These boxes must be checked, or there must be prospects for checking them off. Only then may the municipality release the young person.

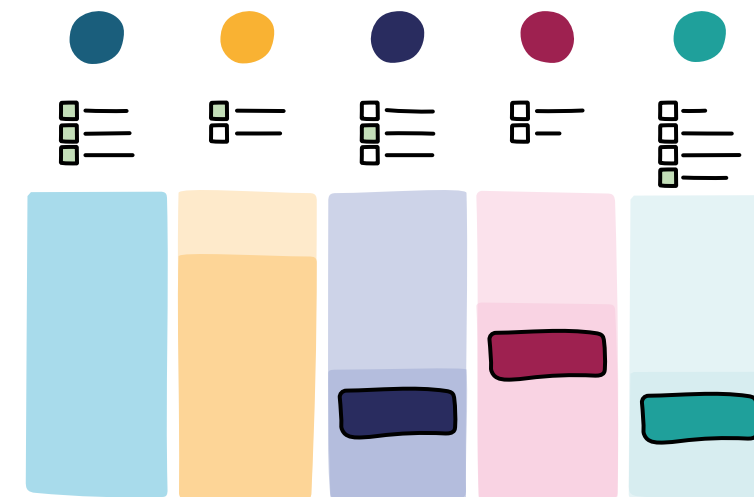


Figure 33: the IMprint abstract drawing



SUPPORT

- ☐ Gezond sociaal netwerk
- ☐ Steun door steunfiguur of netwerk
- ☐ Contact met leeftijdsgenoten
- ☐ Geen belemmerend contact



WONEN

- ☐ Veilige, stabiele en passende huisvesting
- ☐ Wordt gesteund en steunt binnen het huishouden
- ☐ Goede communicatie met eventuele huisgenoten



WERK EN SCHOOL

- ☐ Tijd is overwegend gevuld met plezierige/nuttige activiteiten
- ☐ Structuur en gezond dag-nacht ritme
- ☐ Volgt een opleiding, presteert goed en loopt op schema of heeft een startkwalificatie met een vaste baan
- ☐ Geen ongeoorloofd verzuim



INKOMEN

- ☐ Beschikt over vrij besteedbaar inkomen: klusjes, een (bij)baan, bijdrage van verzorgers of een passende uitkering
- ☐ Goed omgaan met geld; geld wordt passend uitgegeven
- ☐ Geen schulden meer of zicht op het aflossen van schulden



WELZIJN

- ☐ Geestelijk gezond: niet meer dan de dagelijkse zorgen
- ☐ Lichamelijk gezond: functioneren is niet beperkt
- ☐ Gezonde leefstijl: bewegen en voeding
- ☐ Geen (drang naar) middelengebruik
- ☐ Goed uitvoeren van Algemene Dagelijkse Levensverrichtingen (ADL)

5	<p>Ik heb tenminste één vaste persoon die er voor mij is en ik heb een veilig netwerk van mensen om me heen waar ik op kan rekenen.</p>	<p>Ik heb een passende, betaalbare woonplek, alleen of met anderen, waar ik voor een langere tijd zelfstandig kan wonen.</p>	<p>Ik ga naar school, een opleiding of werk en ik maak plannen voor wat ik later wil doen of worden.</p>	<p>Ik heb een stabiel inkomen dat voldoende is voor nu en de nabije toekomst. Ik ben voorbereid op financiële zelfstandigheid en het voorkomen en oplossen van schulden.</p>	<p>Het gaat mentaal en lichamelijk goed met me. Ik kan de toekomst aan. Ik weet hoe ik voor mezelf moet zorgen en herken wanneer het minder goed gaat. Ik weet waar ik dan kan aankloppen voor hulp.</p>
4	<p>Ik heb een netwerk van mensen om mij heen waar ik vaak op kan rekenen. Ik heb voldoende contact met leeftijdsgenoten en vrienden</p>	<p>Ik heb een passende, betaalbare woonplek, alleen of met anderen, waar ik voor een langere tijd begeleid kan wonen.</p>	<p>Ik ga deeltijd naar school, een opleiding of werk of ik heb een andere passende dagbesteding die plezierig of nuttig is. Ik weet alleen niet wat ik wil bereiken of hierna wil doen.</p>	<p>Ik heb een onregelmatig inkomen vanuit klusjes of een bijbaan en ik krijg een bijdrage van mijn ouders/verzorgers. Ik ben zelf verantwoordelijk voor mijn uitgaven</p>	<p>Het gaat mentaal of lichamelijk minder goed met mij en/of ik heb drang naar drugs of drank.. Ik krijg hulp met mijn problemen of heb dat gelukkig nog niet nodig.</p>
3	<p>Er zijn een aantal mensen bij wie ik aan kan kloppen als ik hulp nodig heb. Ik heb een aantal vrienden die ik af en toe zie.</p>	<p>Ik heb een veilige en stabiele plek om te wonen, maar het past niet bij mij of ik moet er op termijn uit of ik woon in een instelling</p>	<p>Het gaat niet goed op school, de opleiding of werk en ik heb geen passende dagbesteding en doe weinig leuke dingen. Ik heb nauwelijks structuur in de dag.</p>	<p>Ik heb een klein inkomen van mijn ouders/verzorgers en hoef daarvan niet alles zelf te betalen. Mijn uitgaven en eventuele schulden zijn stabiel en onder beheer.</p>	<p>Het gaat mentaal of lichamelijk niet zo goed en/of ik gebruik daarom drugs of drank. Ik zorg minder goed voor mijzelf en ik weet niet goed waar ik hulp kan krijgen of bezoek die niet regelmatig meer.</p>
2	<p>Ik heb geen netwerk om me heen van mensen op wie ik kan rekenen. Het weinige contact dat ik heb met mensen is vaak onprettig.</p>	<p>Waar ik nu woon is ongeschikt of ik dreig binnenkort uit huis gezet te worden of ik slaap op verschillende adressen.</p>	<p>Ik ga niet naar school, een opleiding of werk, maar ben wel zoekend of ingeschreven. Ik heb geen passende dagbesteding of structuur in de dag en doe nauwelijks activiteiten die ik leuk .of nuttig vind.</p>	<p>Ik heb groeiende schulden doordat ik te weinig inkomen heb of omdat ik meer geld uitgeef dan ik heb.</p>	<p>Veel dingen lukken mij niet meer door geestelijke of lichamelijke problemen en/of doordat ik verslaafd ben. Ik zorg slecht voor mezelf en weet niet waar ik hulp of een behandeling kan krijgen.</p>
1	<p>Ik voel me geïsoleerd en heb geen netwerk om me heen van mensen op wie ik kan rekenen. Ik zie bijna niemand en durf niet naar buiten.</p>	<p>Ik ben dakloos of slaap in een crisisopvang. En/of er is/was sprake van huiselijk geweld, mishandeling, misbruik of verwaarlozing.</p>	<p>Ik heb geen structuur in mijn dag, ik doe geen of nauwelijks activiteiten die ik leuk of nuttig vind en ik heb een onregelmatig dag-nacht ritme. Ik weet niet wat ik later wil doen of worden.</p>	<p>Ik heb groeiende complexe schulden doordat ik geen inkomen heb en/of doordat ik het lastig vind om goed met geld om te gaan.</p>	<p>Ik kan zo niet langer doorgaan. Ik heb direct medische of geestelijke hulp nodig en vorm een gevaar voor mezelf of anderen. Ik zorg niet voor mezelf en/of ben ernstig verslaafd.</p>

Figure 34: the IMprint

Mlrequest: a registration system

The IMprint is initially filled in through the request website, Mlrequest (Figure 35). In the new scenario, The Hague municipality uses one registration site. By registering with the municipality of The Hague, the W18 start building their own personal dossier. **This dossier is for them to have an overview of their healthcare situation.** The services and organisations involved can access the part of the dossier that they need to see in order to do their job.

The Mlrequest registration system is digital and can be visited at MijnDenHaag.nl. Less digitally skilled people can come to a counter, ask someone from their own network for help, or they could call to the public service of the municipality to have someone come by to help. In their dossier it will be noted that they prefer non-digital contact. Instead of e-mail they can receive letters.

By doing a complete registration at the municipality at one (digital) counter, it is clear for the citizen where their information is. Next to that, it creates the possibility for the municipality to offer proactive services, personalising it to the personal needs of the client in question.

When applying, they will be asked questions about their current situation, such as: “do you have an income?” The questionnaire should not necessarily be completed all at once, but can be spread over several sittings. The answers are stored in the W18’s personal account with the municipality. After filling in this general questionnaire, each person is directed to the section(s) of questions that match their situation and the problems in specific life areas that they are experiencing.

At the end of the questionnaire, the situation matrix is shown, exhibiting the score in each life area. A brief explanation is given of what the different life areas are and what the score means. Here, the W18 can indicate which life area they want to focus on to improve it. Next to that, **it is indicated for the W18’er where they can ask for help and what their rights for help are.**

Based on the results, **relevant case manager of relevant counters** are linked to the W18’er. They will reach out to them to plan an indication meeting.

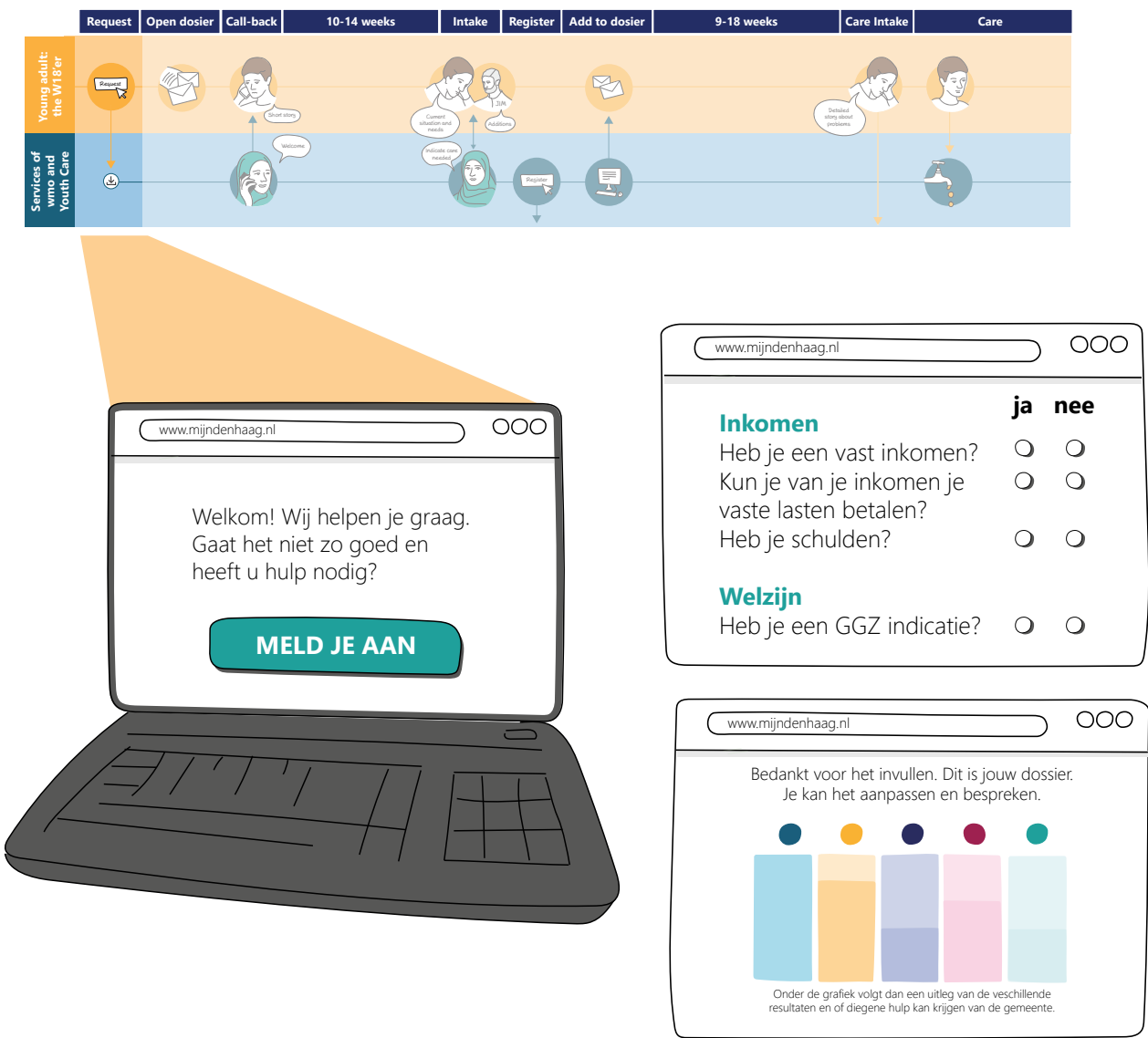


Figure 35: Request website in the request journey

Open dossier

After making the first request, the W18'er receives an e-mail with a link to a kind of track&trace page of their service process (Figure 36). On the MijnDenHaag.nl page there is a timeline showing the steps that have already been taken and what is still to come. They can read back there what they filled in at the time of their request and read back any e-mails they received. Automatic update mails will be sent before an

indication interview, informing them that the interview is coming up. Also, if major changes have been made to the dossier or if there are changes in laws or regulations relevant to the W18, an update mail can be sent about this. It is important to send mails only when the citizen needs to do something with the information. Otherwise, the mails work tiring and the W18 will ignore them.

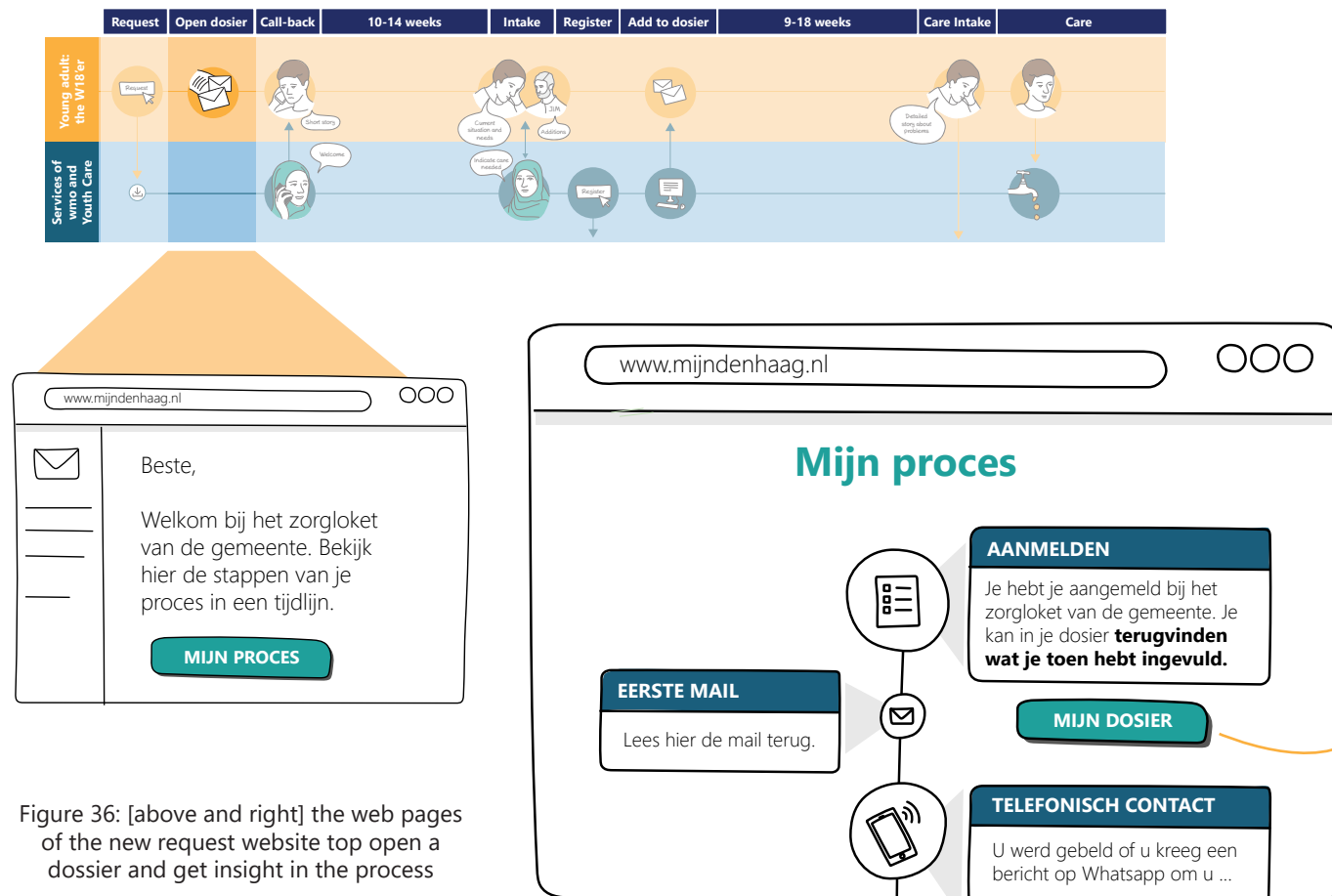


Figure 36: [above and right] the web pages of the new request website top open a dossier and get insight in the process

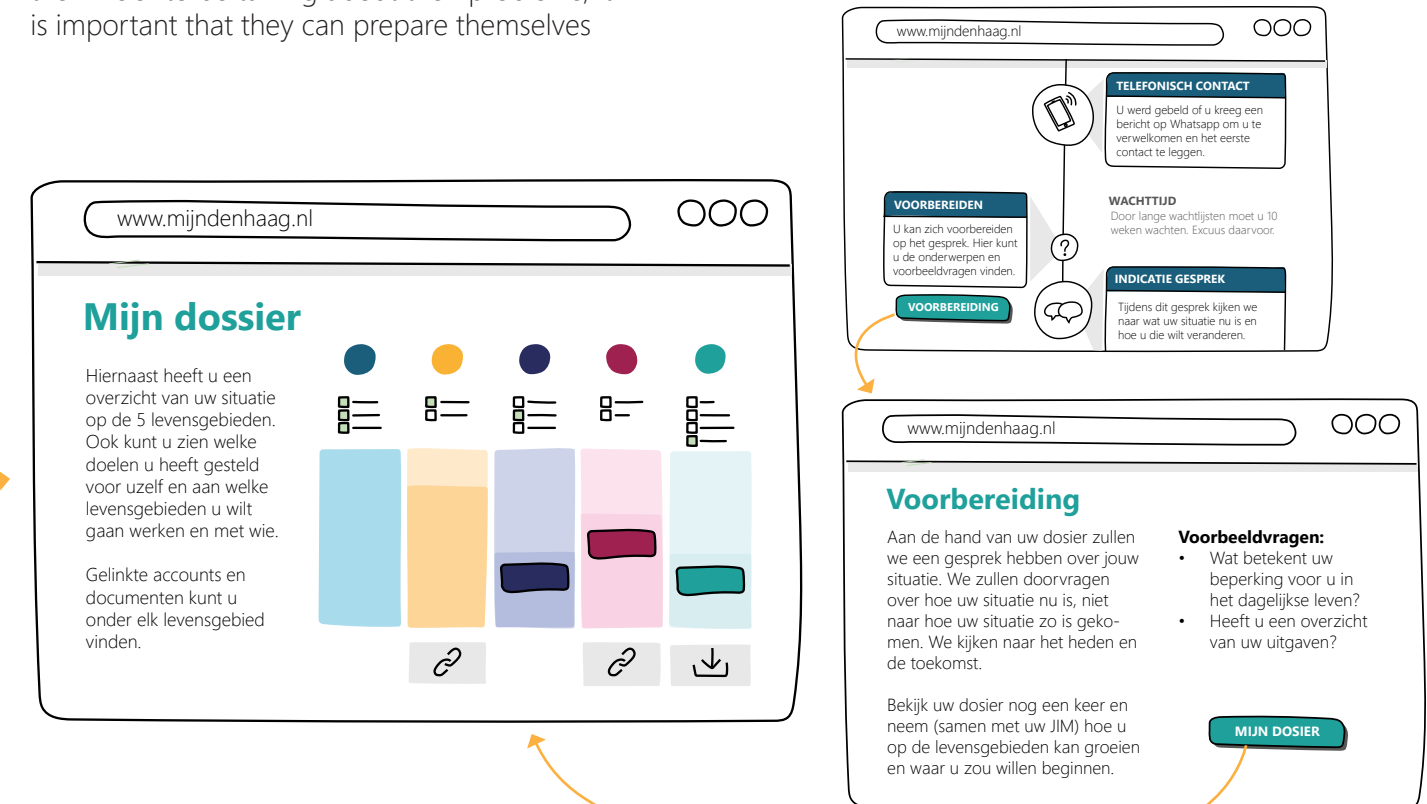
Call-back

A call-back was appreciated by the participants of this project, therefore it is still in the journey. It gave them a feeling of being seen and they knew someone was working on their file. However, a first low-threshold meeting with your own case manager was missing for some, so the call-back could get a change of character and a different goal by making it a means to get to know their personal case manager.

Preparation for intake meeting

As the intake interviews can be quite stressful for the W18'er to be talking about their problems, it is important that they can prepare themselves

beforehand. Through the digital platform of the dossier, a document can be found in the timeline (Figure 36). That document briefly discusses the purpose of the indication interview and what kind of questions the young person can expect. Like a job interview, it is a kind of sample list of questions the young person can expect. Furthermore, it refers to the matrix from the dossier to go through it with his/her JIM before the interview.



IMprint dossier during intake interview

The IMprint of the dossier of the W18 can start the intake conversation to get clarification on the situation of the W18. The IMprint provides structure during the interview and enables both the case manager, the self-chosen mentor (JIM) and the W18 to direct the conversation.

Update dossier after intake interview

Each year this dossier will be updated after the indication meeting. It can be necessary for the W18 to share more information like a proof of income or a mental health indication. These documents can be uploaded or governmental accounts can be linked (Figure 37). Next to that, the dossier will be updated by the municipal case manager with notes about the

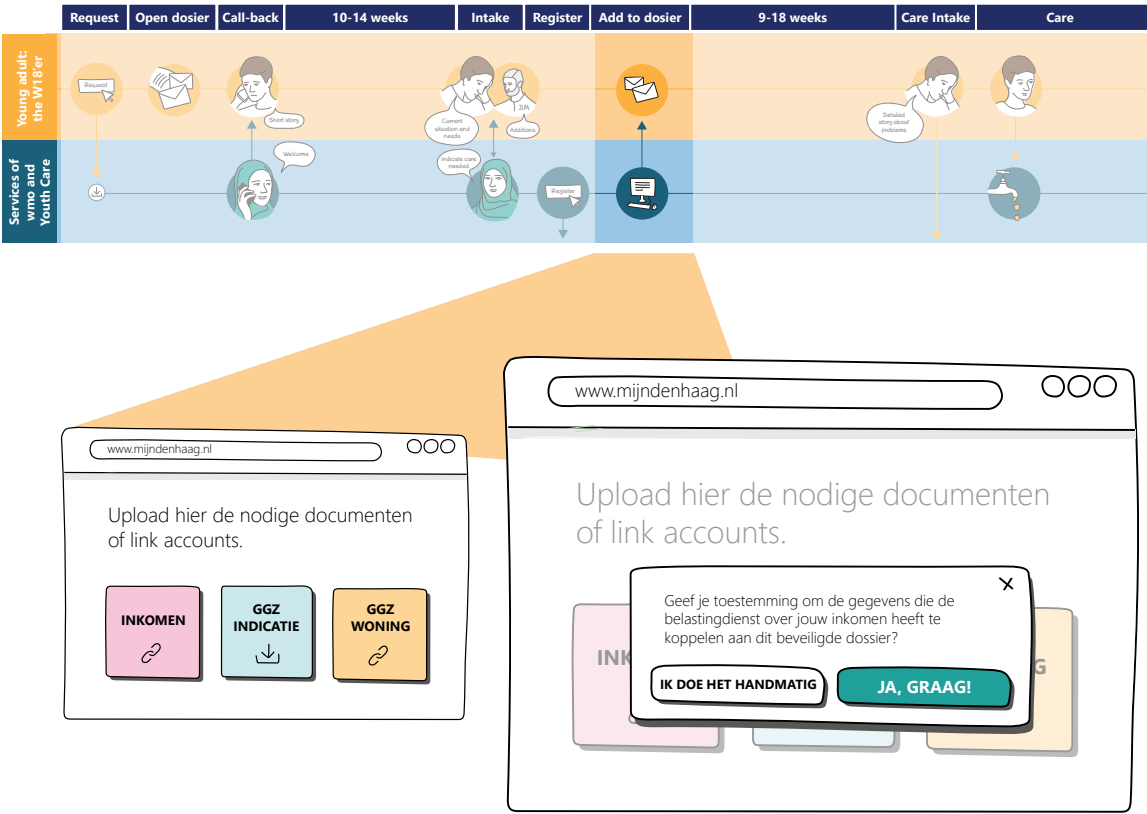


Figure 37: Add or link information to the dossier

conversation. The W18'er can then see if the case manager understood them well during the meeting. It can also be necessary for the W18 to update their dossier by linking new organisations or accounts for new care.

Further steps in the request journey

After the indication intake, the municipal case manager can register the W18'er at a care organisation of their choice. However, it may be more desirable for some citizen's point of view that they make the application themselves. In this case, tips or a handout would do. It can help to feel in control and to be able to decide for themselves what is best for them. This can be arranged with an agreement between client and case manager, also depending on the client's situation.

This IMprint gives the young person, involved service providers and caregivers an overview of the W18'ers situation and their progress. Therefore the IMprint can also be used during the Care Intake. The W18'er is in charge, it is their dossier and they can use and share it to explain themselves better.

However, these ideas have not been evaluated thoroughly and although it has good opportunity many potential challenges can be found as well. More testing should be done for this part of the journey.

Later contact moments

In later conversations, the matrix can show progress, but it can also show when working on two domains can be too much. It helps to keep an integrated view of the care journey and assistance offered to the W18. Next to that, it facilitates the case manager of the municipality to connect all organisations and parties if needed.

Privacy guaranteed

The dossier belongs to the young person. They can therefore decide whom to share it with. It is important that the website also allows this. Part of the matrix, for instance, must be protected if the young person shares it with a municipal case manager or a social worker. After all, in terms of privacy, there will always be people who prefer not to give the municipality an overview of their lives.

8.2 Implementation

To start using the IMprint, changes are needed to the current situation. In this chapter, those changes are cut up into numbered steps. First, how to use the IMprint in the current system and then each step towards how to use it in a more integrated way. Each step is one more step towards a proactive service.



Figure 38: Intake interview with IMprint

1. Conversation tool group 16-23 years

As a pilot, the matrix can be used by the special 16-23 youth case managers as a conversation tool to help young people make the transition to adult services (Figure 38). The IMprint is then used alongside the current indication tools of the ZRM and Outcome Areas. A special budget has also been created for the group of young adults aged 16-23 and there are special case managers (Lesley Steijn, director JMO, personal communication). If this pilot is succesful the IMprint could be used as conversation tool around the life event of turning 18. It could be used for the target group of young adults between 16 and 23 years old.

It is recommended, however, that the matrix is then first checked by experts and adjusted where necessary. After that, it would be good to conduct a few pilot interviews and gauge among a larger group of young people whether it is indeed desirable to have the IMprint as an indication tool.

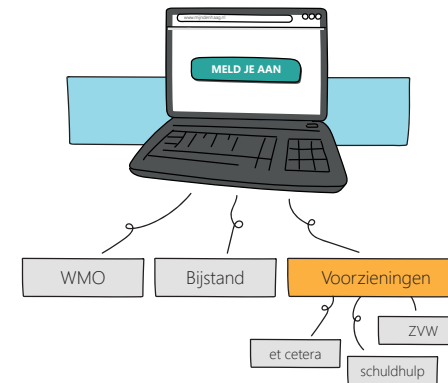


Figure 39: one website as referral portal

2. A single referral portal

Realising a digital portal for reference (Figure 39) to the right counter is an important step, but takes more money and effort to make true. This implementation step also implements the proactive principle of having a single point of contact.

A request website like the Mlrequest can be created on the website of the municipality of The Hague. The IMprint can be used by the young person as a kind of self-test. On the basis of the 'self-test', the young person can see which laws and desks match his/her request for help. From this overview, they can also report directly to the relevant services. A portal has thus been created in which young people can get an overview of their own need for help and to which counter and law they can turn to. At ServicepuntXL, young people could get help in filling in the questions and interpreting the outcome of the self-test.



Figure 40: A digital overview of facilities

3. Facilities overview on the website

There is currently no good overview of current facilities in the municipality of The Hague. The website of the municipality should have an overview of all the facilities offered in the city (Figure 40). It would save the municipality money if the W18 and other citizens could find the general and intermediate facilities themselves (algemene en voorliggende voorzieningen). It would also help citizens prepare for the intake meeting to be able to indicate which facilities they think they need.

Because making an overview of the facilities in The Hague would be quite an investment for the municipality, this implementation step was separated from step 2. However, it would strengthen the purpose of having this single referral portal. It would be the one portal to find out the possibilities for help and where to start. To keep the overview updated, it would be good if citizens can add facilities they think are relevant. And perhaps recommendations and reviews could be added to help citizens choose.

4. Indication for Youth Law and WMO (16-23)

The IMprint can also be used instead of the ZRM and result areas. The IMprint gives an indicative score of the young person's current self-reliance. The young person wants to achieve growth in a life area of their choice through a customised arrangement. The goal is thus to bring the score up to the 5 and eventually be able to tick off all the boxes.

The advantage of this over the option of using it along with the current means of indication is that the young person gains insight into what the municipality is doing behind the scenes. This gives more confidence and understanding of the system.

The IMprint can be used with the current indication interviews with young people. This can be done under the Youth Act from the age of 16 to the WMO when they are 23. This would mean that the dossier grows with the W18 from the youth act to the adult services of WMO.

The type of care that can be purchased is different at WMO. Indication setting and care purchasing are visibly disconnected for W18. It is clear to citizens that

it is not unwillingness from the case manager, or that the person did not understand them properly, but that it is because of the law and the lower budget within WMO. As a result, the relationship with the case managers can improve and so can trust in the conversations.

In the municipality's current services, the WMO is not responsible for the life area of income. The young person is informed before the interview about which life areas will be discussed with them by the relevant case manager.

5. Broader conversation tool/indication setting

The purpose of the IMprint is to gain insight into all areas of a young person's life. The W18 would benefit if the form of the interview is the same for all case managers and therefore predictable. Therefore, the IMprint could be the basis for all such conversations. Next to that, it could be used for indication setting at different counters. Perhaps with a different focus per counter. For instance, the conversation at the case manager of assistance would have more of a focus on income.

6. One dossier

If there is a single indication tool, it can form the basis of the young person's dossier. This is because the dossier must state what the indication is and the help provided for it. Furthermore, relevant documents such as proof of (no) income and, for example, a mental health diagnosis should be included.

For the young person, it is nice if everything comes together in one place. Now it is often a search of what data is known by which organisations and where to update what.

Currently, there is a lot going on in the field of data governance. Within the EU, for instance, a digital identity is being worked on. This digital identity can be used in Europe to do all sorts of things, 'from paying taxes to renting a bike.' In this ewallet, as it is called, the information of a citizen can be stored and shared with public services if needed (Europese Commissie, n.d.). This is in line with the envisioned dossier.

7. One service contact

In order to use the IMprint in a truly integrated way, the public service should be one public service. In addition, there should be one contact person who gets an overview of all the requests of the citizen and all the help the municipality can offer. This case manager is supported by a team. That team has the expertise of the different laws.

To be able to help the citizen properly, it is important that the case managers are supported by computer systems and experts, giving insight into the law and facilities of the municipality. Case managers should get clients with problems and care requests of their interest that have overlap. This will give them more expertise on their target group.

As a counterpoint, it could be said that this is not possible because the service provider becomes too expensive if they have to have knowledge of all laws and facilities. It could be countered that knowing the laws and facilities is now on the citizen's plate. This is not a direct cost, but in the background it means that the citizen is extra burdened and their environment, such as parents and carers are also burdened and can work less. If a young person is not helped properly now, one creates an expensive client of the future. It also creates a financial incentive for the municipality to simplify policy and communicate legislation more simply.

9. Final Design Evaluation

In this chapter the final design interventions are evaluated with the design criteria from the six needs of the W18. Next to that an emperical evaluation is done with three W18'ers and/or their parents and three professionals from the municipality.

9.1 Evaluation Emperical

9.2 Evaluation Analytical





9.1 Analytical Evaluation




List of criteria

The design of the IMprint and request website was assessed against the W18’s six needs and related criteria. If the criteria are included in the design, they are checked off the list below. Yellow checkmarks are used if the design has significant promise on that criterion but has not yet been implemented.




Legenda

-  Part of the design
-  Possible with the design




The W18 need someone to help and guide them

-  All the information needed for the W18 to understand their proces is in one place;
-  The W18 can easily find the counter or helpdesk to which they can turn for help;
-  The W18 is helped further at all counters.



The W18 need to know what to expect

-  The W18 understand the process at a glance;
-  The W18 is adequately prepared for the intake meeting;
-  An overview of legislation, rights and obligations is available.



The W18 need tailored contact

-  The case manager has knowledge of the target group;
-  The W18 has the opportunity to communicate their preferred forms of contact;
-  The case manager has space and resources to tailor the contact to the needs of the W18 person.




The W18 need to be allowed to make mistakes

-  Mistakes made by the W18 should have no direct consequences for the progress of the request journey;
-  Mistakes made should be correctable.

The W18 need to focus on what they cán do

-  The W18 is in charge of choosing what life domain and goal to work on;
-  The W18 is given choices in how they will work on their goals (e.g. with which facilities).

The W18 need to be treated as a human being (by the system)

-  Case managers get more say in their organisations about prioritising which young people should be helped by them;
-  There is no abrupt budget change due to a change independent of care demand;
-  When there is a change of case manager, the content of the file is transferred.

Two criteria are not checked since they are not within the scope of the design intervention. However, these criteria are included in the list, so that this list of criteria can be used as a reference for future service redesigns. Some criteria are quite bold like ‘Mistakes

Interaction problems

Next to the critera, the problems found in the interaction of the municipality with the W18 (chapter 5) are evaluated to see whether the design solves or mitigates the problems. The system problems (chapter 4) are discussed in the discussion of the thesis.

1. There is a lacking overview of the process of the W18 in the service, the laws, counters, facilities and rights and duties per organisation.

The Mlrequest website creates overview of the process. The duties per organisation are communicated through the process overview in the dossier. The website shows the W18 an overview of the facilities the municipality offers for their problems. For facilities with an indication, the website refers to the right counter.

It is currently not included in the design that the rights of the W18 are written down. It would be recommended to include this. The W18 receives an email if more information is needed for a service, with an explanation why.

should have no direct consequences for the progress of the request journey’. With these criteria the ideal service could be designed, but of course it could be less realistic in real life. Yet, they are so sharply shaped to communicate the needs well.

2. The indication meeting is too stressfull for the W18

With the IMprint, the indication meeting gets more structure. Reducing uncertainty about the goal and structure of the meeting. Next to that, a preparation document is shared with the W18. They can prepare and possibly practice the conversation with a parent, friend or caregiver.

3. The waiting time can cause problems to accumulate in the transition from Youth Care to WMO

It is clear to the young person in the overview of their process on the Mlrequest how much time they have to wait. This causes less stress because they know where they stand. The waiting time could possibly be shortened by the Mlrequest alerting W18 to all possible facilities before they even apply. They then know whether they should apply to the municipality for the help they need. For other facilities, they can go directly to the provider.

9.2 Empirical Evaluation

Approach

To know whether the design is a success, we evaluate here whether the design meets the 5 needs of the W18 and the connected criteria from chapter 7. Some criteria are difficult to evaluate without adjusting the situation or current policies. However, what is possible is to show the drafts to the stakeholders and see if they recognise the need and would want to use it.

Therefore, the following people were interviewed:

1. Nicoline den Ouden - Social domain change agent from Ondersteuningsteam Zorg voor de Jeugd (OZJ)
2. Lena - Mother on behalf of W18'er Tijmen (19)
3. Eline - Mother on behalf of W18'er Rick (18)
4. Casper - W18'er, Delft
5. Britta Regeer - Case manager WMO
6. Lesley Steijn - Regisseur Jeugd en Maatschappelijke Ondersteuning (JMO)

The **co-evolution of problem and solution principle** was also used in the approach to evaluation. First, the insights from the problem analysis were presented. The insights from the research using the timeline and request journey were presented. This was done to explain the scope to the participant, make the current situation clear and get feedback on the insights if they contained errors.

After the first 5 evaluations, the design was adjusted. The 6th evaluation was with the improved design.

Results

Below, the feedback is listed, clustered by theme. Coding was used for this purpose: a '+' is a positive response. It says something about what the participant found positive in the design. The '>' is used if the feedback contains a tip of how the design could be strengthened or improved. A '-' was used to indicate negative feedback: this is something in the design that needs improvement.

Request website

There is one digital website where the young person can go to make a request. Here, the W18'er completes a questionnaire, as a kind of self-test. As a result of this self-test, the IMprint comes out completed with a score between 1 and 5 in the 5 life areas.

- + Doing a self-test at home feels safe
- + It's nice that the application doesn't have to be done all at once. That you can pick up where you left off at a later time.
- > If you can't manage to fill in the questionnaire on your own, it's nice if there's a reference to where you can ask for help to do it together.
- > The ServicepuntXL can help with filing the request. They are in the neighbourhood and have knowledge of the facilities in the area.

Then the young person is automatically linked to one case manager who has knowledge of the type of target group the young person falls into. That

case manager is integral to all laws. All counters are brought together into one counter.

- + Based on the application, the municipality can recognise the target group and they can adjust the approach accordingly.
- + The W18'er can be matched with a case manager who has heart for the case. This benefits the relationship between the W18'er and the case manager, as they are enthusiastic about the target group.
- + The case managers can learn from the clients, as they are experts in their own care pathway
- + One face of the municipality would be good;
- > But it doesn't necessarily have to be one person. As long as you don't have to keep repeating the same story.
- > One person can manage a cross-domain team, but cannot do everything themselves
- > More expertise is needed about the target group

The least you can do for the vulnerable is for the person opposite them to know where their talent lies and that they therefore sit opposite them.

- Nicoline den Ouden (social domain change agent)

Overview of the process

The young person receives an e-mail following the application. This contains a reference to the W18's account on the municipality's website. In this account, a timeline of interactions with the municipality is given. Update emails are sent when something changes in this overview and when a meeting is near. In this overview, there are references to the dossier and to a preparation for the intake interview. The young person is also called to welcome them.

- + It's nice to know what you're waiting for and for how long.
- + It's nice to get an overview by e-mail after registration.
- > But there shouldn't be too many update emails, only if you can or should do something with them.
- > The W18'er would rather have the municipality app than call them after registration.

One dossier

Following the request, a dossier is formed. The IMprint is the basis of the dossier. Furthermore, the W18'er can upload required information such as proof of income or a mental health diagnosis.

- + Everything in one place
- > The W18 and their parents always want to have visibility on what they are working on at that moment.
- Youth Law and WMO do need to trust each other to use the same dossier and get the transfer right. This requires a culture change first.

IMprint and 'doelkaarten'

The IMprint is the matrix from the 'self-test' on the request website. It is discussed with the young person during the intake interview. The IMprint gives good insight into the young person's current situation.

- + More clarity on what the municipality can do for you and being able to discuss that with one person.
- + Physical, insightful and not too complicated: at a glance.
- + Feels like a game, comes across as friendly

I like the visual and simple aspect. The citizen should not break his head over it. [...]

- Lesley Steijn (director JMO)

The colours give clear distinction. It looks friendly. It indicates growth and you can tick off what you have achieved, which is a kind of reward to yourself. - Lena (mother of W18'er)

- + Important to discuss these essential areas
- + This conversation structure would help; now there was a lot coming at you.
- + Knowing in advance what the conversation is about is also good.
- + Visible when help can 'bite' each other: when one goal is opposite to the other goal, like having to work or work on your mental health without stress. They can prioritise care better with the IMprint. After all, if care is not addressed properly, you get a more expensive client of the future in return.

This would definitely help, as the conversation now had little structure. there is a lot coming at you now. It helps both the young person and the person who has to lead the conversation. You can also prioritise more easily this way.

- Eline (mother of W18'er)

Besides the IMprint, there are also goal cards (goal cards) by life area. A goal card says, for example, 'I have someone with whom I keep track of my income and expenses.'

- + Goal cards help to force them to choose (achievable) goals.
- + The initiative lies with the young people themselves: they can indicate what they want to work on.
- + The IMprint and goal cards make clear what you can do yourself and what you need someone for.
- Setting goals belongs more in the helping sphere. You actually want to know from the municipality what the options are for working on your problem.
- The word 'goals' makes young people allergic.
- > If you live in assisted living or receive outpatient help, it is better to look at the matrix with the person and discuss achievable goals. That person is then responsible for talking to the municipality.

You know why this is so cool? You put the choice and initiative with the young adult and then you get the intrinsic motivation. They can literally and figuratively take it into their own hands. That's where you want to go with growing up too.

- Lena (mother of W18'er)

Overall feedback

Next to the feedback per intervention and theme, two extra insights were gained out of the feedback:

- + It is considered good if there is no break and gap between youth and WMO budget, but smooth expiry of budget.
- + It is important that a citizen can be helped at any counter and is not referred without question.

And lastly a very important and valid feedback point about the whole design was:

- It is not clear who will use this IMprint and goal cards and how it should be implemented into the municipal system.

Adjustments to the design

Based on the feedback, a final adjustment was made to the draft. This final version is presented in the report. The target maps have been taken away and in their place the focus has been on giving an insight into the facilities offered by the municipality.

A matrix is clear and pleasant for young adults. They have become allergic to goal-setting. This IMprint is also insightful and goal-oriented. You want to step up. - Lesley Steijn (director JMO)

Overview of facilities

Facility maps could be created for this purpose. However, this was not chosen because facilities are very much subject to change. Therefore, it is important that the municipality has a digital overview of facilities. This can be linked to the five areas of life.

There are forms of overview, such as a list of contracted agencies within Care in Kind. This gives a little insight into what has been purchased, but it takes a lot of time to understand where you can go with which help request.

The overview should therefore be made according to what the young person is looking for. It should be able to be filtered by topic. It is also important that not only the facilities from the tailor-made system are included in this overview, but also the general and intermediate facilities. In addition, the overview would be complete if it also included 'facilities' outside these categories, such as joining a sports club or a drama group. These kinds of activities can also help the young person improve their self-reliance, in this case in the life area of social support.

Service PointXL can help

A W18'er may not be able to figure out how to fill in the request or have questions about the outcome or appropriate facilities. They can then turn to ServicepuntXL. This is because it has the knowledge of facilities in the area and can help with digital problems.

Who will use it?

Because of the feedback on how it should be used and by whom, the subchapter implementation was added to the chapter of the final design, chapter 8.2. With the evaluation interviews, not enough time had been spent on explaining the implementations.

Conclusion

The responses to the design were very positive both from the W18 and the municipal professionals. Based on the feedback the design is adjusted and an implementation plan is written.

It was appreciated that the request website takes into account the challenges of the young person. It feels safe to request care that way. In addition, it was considered a good idea from both sides if a case manager has more substantive knowledge about the target group. However, there are still some obstacles to bringing all the young person's case managers together into one.

The overview given in the process is also seen as valuable by the W18. Working with one file would be good for the young person. However, the culture at the municipality would have to change for this, as the case managers would have to trust each other's way of working and the assessment of the file.

The visual aspect of the IMprint was appreciated. It would add a lot to the indication meeting and provide clarity for all parties on what needs to be discussed. In addition, it would be good if the municipality maps out the possible facilities during, before and after the meeting.

Conclusion

This research seeks to answer the question: “How can the municipality of The Hague improve its interaction with mentally vulnerable young adults around the life event of 18 years, using proactive design principles?” A qualitative study was conducted on the current interaction and the needs and challenges of these young people. These young people are also referred to as the W18 in this study. A redesign of the interaction was made using proactive design principles.

The results of the study showed that there are many organisations involved in arranging the care of the W18 after their 18th birthday. Organisations for indication, payment, for care and other organisations such as client support and school. The W18 lacks overview of the process in service provision, the laws, counters, facilities and rights and obligations per organisations. As a case study, the research focused on the interaction with WMO. In this interaction journey, the indication interview is too stressful for W18 and waiting times can cause problems. It stood out that the emotional responses was more extreme when the young person depended on a positive outcome of the request process, due to the fact that they really needed the care.

Through interviews with 3 W18s and 2 parents of W18s, the needs of W18s were identified when it comes to their interaction with their municipality. Six needs were defined: (1) they need someone to help and guide them; (2) clear expectation management and overview; (3) customisation in the contact forms with the municipality; (4) reversibility of mistakes; (5) positive approach to their situation and their desires to get out of it and (6) they want to be treated as human beings by the system in addition to the professional.

This gave rise to the design goal of improving the perspective of young adults with mental health problems by creating clarity in their interaction with the municipal service. As a design, the IMprint and a new request website were introduced. The IMprint brings more clarity and structure to the intake interview. The request website gives more insight into the purpose of the contact with the municipality by giving an overview of the process and referring to the appropriate counters and facilities. The design uses the proactive principle of “no wrong door”, by using the request website as the only portal to service provision.

Discussion

This research can be seen as a case study of how the government can make its services more proactive from a human-centred design perspective.

Feedback from stakeholders was overwhelmingly positive. There is a lot of interest from the government in this type of user-centred research. It was also nice for the W18 who were involved to be able to share their story in order to possibly improve services with it and give officials insight into their situation and story.

A first challenge in doing this research was that the target group was hard to reach. Yet, it is important that precisely those groups are also in the picture of the municipality. Hard-to-reach groups likely have a smaller social network and are less likely to reach out on their own. A proactive attitude of the government could help. Not just in approaching, but precisely in simplifying the process. A vulnerable citizen would then have more courage to knock on the door.

Another challenge is that it is hard to understand the legislation and counters in the social domain. There have been many reports on problems in the domain and many websites with explanations, but partly because of this it is so easy to lose track. This research has begun to visually represent the social domain, legislation and counters. Although it was hard to get an overview, the scope of the project was kept large, to properly map the system the young person has to deal with. Such a large scope also impacts the depth of the research and design and therefore the scope was reduced: it was chosen not to include the regular interaction of a young person turning 18.

Limitations

The conclusions from the study provide insight into the experiential world of W18s. However, it is difficult to generalise these results, because the research was conducted with a relatively small target group. The target group is hard to reach: most members are preoccupied with their current problems and do not have mental space for research interviews. There were 5 W18 involved in the research, but due to too complex personal circumstances, 2 participants dropped out. As a result, the research group was small. To enlarge this group and gain insights about their process, 2 mothers of W18s were involved. This may have influenced the results.

The interviews with the W18 required sensitivity from the researcher. At the beginning of an interview, it is important to level up and explain the purpose of the interview. Also, the type of (sensitising) material should match the target group's doing ability.

The final design of this research is not yet ready for use. This research can be scaled under service design: needs research has been started and a concept has been developed. This concept needs further elaboration and testing before it can be used. The presented concept can be seen as the core of the needs and design opportunity.

Recommendations

The current system creates many future problems, building up social and financial debt for future generations. It is therefore important that change happens and that young people do not feel they are being let down after they turn 18. A number of recommendations have been made to start with.

Moving forward with the IMprint and Mlrequest

It is recommended to verify the insights of the report with more W18s and municipal experts. Chapter 8.2 Implementation contains examples of how the design can be developed and applied in current service delivery. Besides further developing the design, it is important to validate and design for the following system problems: (1) budget deficit in social domain; (2) human image in law and organisation and (3) complex problems lead to a more complex process with the government.

Conducting research on young people on their own and other vulnerable young people

The research group now consisted of vulnerable young people with a social network to fall back on: parents or friends who were involved in the care and service delivery process. The effect of the journey on the young person may therefore be less problematic than for young people without a social safety net. It could be investigated whether the needs are different for W18s without a network. In addition, other vulnerable target groups who need to make the transition from youth care to the adult domain could also be investigated.

Research on budget allocation

The research and evaluations revealed that budgeting plays a major role in how services are designed. The legal distribution of the budget underlies what the municipality's task is in the social domain. Because of those partitions between the laws, different case managers are needed to see whether the citizen is entitled to budget from that law. Young people can get lost between the cracks if their situation is not clearly described in one of the laws. Both W18 and the professionals recognised this as a potential problem in complex problems. It would be good to investigate how the budget could be distributed according to the requests for help instead of according to the laws.

The fact that care is covered by different regulations or indications should not matter. You would want to choose different flavours from the buffet and thus put together the ideal care package. That's not how it works now.

- Samira Fakher (director JMO)

Personal reflection

During my graduation, I learned the importance of writing and presenting about your research and design. This is something my chair, Stefan van de Geer, pointed me to early on and I should have taken his advice to heart at an earlier stage. By having to make it concrete in that way, you run into gaps in your research. The sooner you do this, the better, because then you still have time to improve it. You can also let others think with you that way, because it's concrete that they can give feedback on. Like what the municipality and W18 needs, it conveys.

I also learned that during such a project, it is important to define a goal for what you are doing. For example, it can be useful to think about how what you do will be reflected later in the reporting. Again, it can help to make concrete what your research question is and what your hypothesis is. I sometimes did this a bit too little during this thesis. Making it concrete creates more natural links between the activities you do.

Personal learning objectives

Goal 1: define my circle of influence, by creating a clear scope and domain fitting the project and doable within the given time

I wanted to learn how to define my circle of influence and make the scope of my project appropriate to the size of the project. I kept the scope too big during the project. I think this was good for this project. Next time, I would like to join a group that has expertise of the system and problem. From their expertise, you can then tackle the problem in all its complexity without spending too much time on it.

Goal 2: Network effectively

I made a lot of contact with relevant organisations, to enthuse them about the project and involve them substantively.

Goal 3: Improve master specific skills

Master content-wise, I learned a lot about interviewing vulnerable target groups. I did the analysis thematically. I learned the importance of documenting the interviews well.

Goal 4: Read into relevant methods to broaden my scientific design knowledge

I did however not take enough time to explore new methods. Instead, I used methods that I knew suited the project and developed in them.

Goal 5: Learn how to go without the hesitation caused by negative assumptions

During the project, I learned that it is sometimes better to just go, than to keep thinking. The sooner you find out that you are wrong with an assumption, the more time you have to improve it. However, I learned that the further in the process, the harder it becomes to go test assumptions, for it may change the course of the research and design. At some point when finishing the design, it can therefore be better to put testable assumptions aside for in the recommendations.

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