The Orange House Approach in a nutshell
Context: Some background information

Domestic violence
Around 45% of the people in The Netherlands between 18 and 70 years have encountered some form of domestic violence. Every year there are around 200,000 victims of domestic violence. Domestic violence is the number one non-natural causes of death. Annually around 16,500 victims in the Netherlands use a women’s shelter.

Our services and our clients
Blijf Groep firmly believes that we can stop domestic violence by engaging and connecting a range of stakeholders. In order to end violence as much as possible in people’s own homes we focus on using their strengths and their own social circles. Of course, we are also there to support those in crisis situations where this is unfortunately not (immediately) possible.

Blijf Groep provides various services for victims of domestic violence in the Dutch provinces of North Holland and Flevoland. This includes Amsterdam, the capital of The Netherlands. We run 5 shelter facilities and an expert front-office with around 300 employees and over 50 volunteers. Our annual budget is approximately 22 million euro (excluding projects). We offer services to approximately 2.5 million of the 17 million people in The Netherlands. Blijf Groep is one of the largest organizations of its kind, both in terms of size and services. In total, we have 42 crisis shelter units, 6 emergency beds, 1 Safe House (temporary shelter for people facing life-threatening and immediate danger) and 132 units for long stay facilities (independent assisted living, including the 7 units for men who need shelter after domestic violence).

Our clients come from a very mixed variety of backgrounds: there are 65 different nationalities of clients in our shelters. In annex no 1 is a complete overview of our services and client numbers.

Our organization
Blijf Groep, as it is today, was created by joining forces: between 2000 and 2008 eight autonomous initiatives merged in eight steps to form Blijf Groep as it is now. The larger scale made it possible to differentiate between services and facilities and to build a central business office that supports all of our services and workers.

Blijf Groep is a foundation with a Managing Director. Since 2016 we work with self organized teams. This had led to an increase of the autonomy of professionals.
The Orange House Approach

What is the Orange House Approach?
The innovative Orange House Approach\(^1\) was developed by Blijf Groep over the years and completely changed the way in which shelters work with victims of domestic violence and their families. The approach entails a new type of women’s shelter and new working methods: the Orange House building provides the necessary shelter and care in a safe, but open and visible setting. The interventions carried out break with the traditional ‘behind closed doors’ approach where relevant stakeholders were not included in the solution. It is systemic, focusing on the social context of the family and the environment, working with all family-members including (if safety allows) the (ex-) partner/perpetrator, towards an integrated family plan. The key motive is to break the isolation: being offered shelter at a secret address can lead to social isolation (where clients were not able to share their location or receive visitors). A recognizable, visible shelter aims to break this isolation, for the women but also in particular for their children. By staying closer to the community, it is also easier to make that step back into the community.

Why did we feel the necessity to innovate our shelters?
The shift from a secret shelter to an open setting where we work with all family members is rooted in both history/experience and was substantiated by research:
- We saw women return home, furtively (without daring to tell us...?).
- When we started our community support centers, in 1997, we came in contact with women who told us: “I want the violence to end, not my relationship, that’s why I don’t go to a shelter...”.
- Over time, we saw young women come into the shelters that had been here before with their mothers: domestic violence is an intergenerational problem.
- And even more importantly: the changes were urged by the dramatic failure of traditional safety measures: two women were killed in a short period of time in 2004. These two cases painfully showed that all the traditional safety measures (trying to keep our shelters secret and moving women constantly from one part of the country to another) were not enough to protect them.

Our own findings were enriched and deepened by growing evidence from (international) research on children who witnessed domestic violence and research on the different patterns of domestic violence. And lastly, the development of the Orange House Approach has been very much inspired and guided by the results of the first extensive research that has been done in women’s shelters in the Netherlands (\textit{Maat en baat van de vrouwenopvang}, Wolf, J., Jonker, I., Nicholas, S., Meertens, V.,

\[1\] For more detailed information, see: The Orange House approach: A New Style Women’s Shelter in the Netherlands, Reijmers, E., Geutjes, S., Evertz, K., Poortinga, N., Blijf Groep, Amsterdam, November 2011.

Why women went back home during the first weeks
The number of women that went back home was very high during the first decades of the women shelters movement: it was generally estimated that around 40% left the crisis shelters and went back home during the first couple of weeks, many of them coming back time and again after they had been abused again. In many cases, women did not officially state that they went back to their partners: they just ‘disappeared’. Several factors played a role in this:
- Housing conditions were often stressful for women and their children: facilities had to be shared (until 15 years ago women and their children were housed in dormitories/shared sleeping accommodations in a lot of the women’s shelters; in many more cases, kitchen and living room had to be shared/still have to be shared), there was not much privacy, due to this sharing of facilities and due to the fact that the working and living areas were not clearly separated and workers passed freely through living quarters as a result of that;
- The complexity of abusive relationships had not yet been fully acknowledged: we now know much more about the dynamics of domestic violence, different patterns and the fact that it (psychologically) takes time for clients to fully understand what has happened, what their options are, how they can build up their confidence again etc.; until 10 years ago it was absolutely taboo in many shelters to discuss the fact that women might have doubts about the step they had taken and/or the fact that they were still in contact with their partners.
Pas, S. te, 2006, *The Use and Usefulness of Women’s Shelters*). This study corroborated our own practice-based findings on the need to make a shift and became one of the triggers to fundamentally change our approach.

**Is a stay in a shelter always the right solution?**

The demand for shelter for women and their children that have suffered domestic violence has been exceeding the offer for a very long time already in the Netherlands, so the pressure on the space available was - and still remains - high. Blijf Groep has sought to alleviate this pressure in several ways: over the years, we have been able to increase the number of places available in our working area. This is however not a goal in itself: to leave your home is very disruptive and not always the best solution. Over the years we have further developed programs and services for those that need help but who do not necessarily need shelter. Those services include services for women/families that would like to explore their possibilities to end the violence while continuing the relationship in one form or another, the Temporary Restraining Order programs (where the perpetrator leaves the house, at least temporarily) and group programs (both for adults and groups on children that have been witness of domestic violence).

With the Orange House Approach we have changed both the housing conditions in the shelter (separating living arrangements and care) and the approach/intervention (systemic, i.e. involving all family members, with much more variety between options/programs, and acknowledging the fact that both partners have their role and responsibilities in establishing safety etc.). Residential and outreaching services are becoming more and more closely connected to each other, which enables us to provide services that are adjusted as good as possible to the situation of each client/client-system.

**The Orange House: a social statement**

The realization of a new Orange House is done in partnership with housing corporations, municipalities and based on fundraising that reflects the idea that everybody can and should help in order to combat domestic violence. With the Orange Houses, there is also a social statement: domestic violence is a societal problem that cannot be ignored. Victims should not have to hide, lock themselves up and feel ashamed. A visible shelter leaves no room for doubt: domestic violence exists and it requires support from throughout the community to tackle it.

Over the past years Blijf Groep has realized three Orange Houses: Alkmaar in 2011 (which was the first Orange House in The Netherlands and was therefore opened by Queen Maxima of Orange), Amsterdam in 2015 and in Flevoland/Gooi & Vechtstreek (Almere) in 2017.

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2 We refer to this research in our publication on the Orange House Approach: p. 17, 30-31, 93; see also: www.impuls-onderzoekscsentrum.nl/maat-en-baat.
Effectiveness of the Orange House Approach?

A large-scale study on intergenerational transfer of patterns of domestic violence (2016 – 2020) is currently being conducted in the Netherlands by the Verwey-Jonker Institute. As part of this broader study research has been done under 90 clients of 2 Orange Houses. Jointly, a small scale study has been done with women from migrant backgrounds who do not speak Dutch, but stay in the Orange Houses as well. The research, which is scheduled to be finished by the end of 2020, gives us valuable insights on both the profiles of the women we serve (trauma, type and intensity of violence etc.) and on the effects of our approach on safety, traumatization and well-being.

In 2018 we got the first results of the study, showing that 75% of the women in the Orange Houses have one of more youth-trauma. Almost 50% of the children of those women show signs of clinical or sub-clinical trauma.

The small-scale study amongst women who do not speak Dutch shows that the Orange House approach, despite the language barrier, also works well for them. They feel safe and experience respect and confidence and regain independence. These conclusions were recognized by the professionals.

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3 This study is a follow-up on research that was published in 2014 and had an lot of impact in the Netherlands (http://www.verwey-jonker.nl/publicaties/2014/doorbreken-geweldspatroon-vraagt-gespecialiseerde-hulp). One of the conclusions of this study was that systemic interventions are needed to effectively impact domestic violence, but that those interventions are not common yet. The study mentions the Orange House Approach as ‘good practice’ (p.193).
Blijf Groep is a foundation, with a Supervisory Board model. Roles and responsibilities of the Supervisory Board, Managing Director, Works Council and Client Council are determined by our statutes and codes. The Managing Director is responsible for and charged with the administration and policy of the foundation and has direct contact with both Works and Client Council.

The Supervisory Board has the task of supervising policies, administration and executive powers of the Managing Director and the general state of affairs in the organization. It also fulfills the role of employer of the Managing Director and has some other tasks and powers, as described in the Statutes. Blijf Groep applies the principles of the General Governance Code that is generally used by the Care Sector in the Netherlands. The statutes, codes and procedures of the Supervisory Board are based on this Governance Code.

### Provided services

<table>
<thead>
<tr>
<th>Services provided</th>
<th>Crisis Facilities (6 weeks)</th>
<th>Long Stay Facilities (appr. 6 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Orange Houses</td>
<td>12 units</td>
<td>9 units</td>
</tr>
<tr>
<td>Alkmaar</td>
<td>20 units</td>
<td>54 units</td>
</tr>
<tr>
<td>Amsterdam</td>
<td>10 units</td>
<td>20 units</td>
</tr>
<tr>
<td>Almere</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Long stay facilities

| Haarlem | 26 units |
| Zaanstad | 16 units |

Long stay facility for men

| Amsterdam | 7 units |

Outreaching services

In Alkmaar, Amsterdam, Almere, Haarlem and Zaanstad

Helpline (7x24 hours), Ambulant program, Orange House at home Program, AWARE Safety System, Critical Time Intervention, Group programs for women, men and children.

Safe at Home Flevoland (Veilig Thuis)

Regional front office where citizens and professionals can report cases of domestic violence and child abuse; after risk assessment clients are referred to the appropriate services.

### Numbers of clients

<table>
<thead>
<tr>
<th>Number of clients served</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of unique clients (both external support services and in shelters)</td>
<td>3,836</td>
</tr>
<tr>
<td>Unique clients that receive support services outside of shelters</td>
<td>3,715</td>
</tr>
<tr>
<td>Unique clients that stayed in shelters</td>
<td>592</td>
</tr>
<tr>
<td>Number of children within the shelters</td>
<td>633</td>
</tr>
<tr>
<td>Number of members of family or social network involved such as (ex-) partners, children, parents or other family members or friends</td>
<td>3,916</td>
</tr>
</tbody>
</table>

*part of them have first had external services or uses these services after their stay in shelter*