





WeEindhoven model

CHANGE! Good practice factsheet

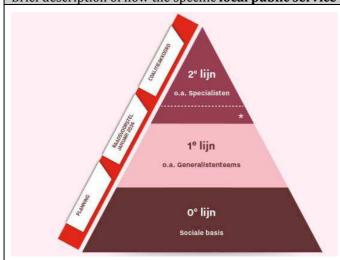
Title of good practice/initiative
WeEindhoven
WeEmanoven



Description of the good practice /initiative: history, activities, number of involved people, territorial scope, current scale, future plans, impact and benefits (**Max. 400 words**)

The policy programme WeEindhoven was born in 2011 as an innovative answer to social challenges (a change in the national policy of the Netherlands, in which national government is shifting responsibilities from national to local level and at the same time is introducing budget cuts). To coop with the social challenges a system change seemed unavoidable and within the framework of an expert panel the idea of WeEindhoven was born. The city Council supported the idea and during the next 1-2 years the system change was developed in an participative way (discussions with several stakeholders from the early stage of the programme development until its fine-tuning, task-force meetings, street interviews, expert panels, residents platforms and info-evenings, etc.). The WeEindhoven programme started in 2013 as a pilot in one specific neighbourhood and since the beginning of 2016 the experiment has turned into an official programme implemented in the whole city.

Brief description of how the specific **local public service** has been **challenged** (with figures, if possible)



Core of the WeEindhoven programme are WeTeams located in different neighbourhoods representing a kind of one-stop-shop. The WeTeams consist of generalists (the 1st line within the triangle) with different backgrounds like child / family/ elderly care, drug addiction, care for people with a disability etc. The generalists act as facilitators and coaches between residents (the 0 line in the triangle) and specialists (the 2^{nd} line in the triangle). Instead of the typical dialogue in which residents demand and provides municipality the quasi automatically, the WeTeams focus on a

personal approach. The generalist visits the households and starts the intake with a "coffee around the kitchen table" trying to identify the actual problems and needs of a family or person.







When looking for solutions people are stimulated to take their own responsibility and solve their problems themselves or together with the so-called "social basis" instead of immediately involving a high level specialist.

By stimulating people to think for themselves, take their own responsibility and to be active within the social basis, in a way, the generalists does the same as community organisers: when problems cannot be solved within the social basis the generalist will provide custom made support for the client by linking them to a specialist. The idea however is that the more people will be able to utilize their own strengths and network and therefore become more self-reliant, less specialized support is needed.

Role of the municipality within the process (e.g. how the municipality facilitates or coordinates the process to systematise/upscale a civic initiative)

This social basis consists of two parts: the general facilities and the networks between people also known as "Citizens Joined Forces". The general facilities (like employment, education, culture, sports, housing etc.) can be used by every resident to become more self-reliant. It is the role of the municipality to facilitate strengthening of these basic services and to make sure they are accessible to everyone. Within this project the focus of Eindhoven is on the second part of the social basis, the "Citizens Joined Forces"; the networks between people. For example the connection people have with their family, neighbours and other residents. The idea is that were people meet, initiatives arise from a shared interest and passion, and residents are willing to help each other with questions and problems. For example, residents can volunteer in sports clubs, associations and unions, become a voluntary caretaker, take part in school program of their children, do something for the church, take their neighbours to the hospital, cook for an ill friend, look after each other's children etc.

Key attributes (success factors) enabling (municipal) staff to implement the project successfully

- Strong political support

Key internal, organisational, behavioural **weaknesses** the municipality/organisation had to overcome during the process

In 2015 ca. 350 generalists worked in the 10 WeTeams. 2016 is the year for fine-tuning the programme based on the feedback from constant evaluations. So far, 90% of the evaluations have been positive. During 2016 the programme will be implemented in its final version and management will be transferred to a foundation outside the municipality. Generally this shows a new way of collaboration service delivery is possible. However, since the roles of all stakeholders changed also conflicts occurred during the whole process. A special point of attention is on the one hand, the overlap between the work of the WeTeams and NGOs working in the field, and on the other hand the lack of communication and cooperation between the two.

Links to website for further information on the good practice/initiative

www.wijeindhoven.nl