Mapping Paper

Summary overview of types and characteristics of institutions and community-based services for persons with disabilities available across the EU

**Country: The Netherlands**

**2014 and 2015**

**FRANET contractor: Art.1, Dutch Knowledge Centre on Discrimination**

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| DISCLAIMER: This document was commissioned under contract as background material for a comparative analysis by the European Union Agency for Fundamental Rights (FRA) for the project ‘[The right to independent living of persons with disabilities](http://fra.europa.eu/en/project/2014/rights-persons-disabilities-right-independent-living)’. The information and views contained in the document do not necessarily reflect the views or the official position of the FRA. The document is made publicly available for transparency and information purposes only and does not constitute legal advice or legal opinion. |

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| FRA asked its research network FRANET to collect information on types of institutional and community based services for persons with disabilities available in each EU Member State. The data collection focused on the main features of the service types (the type of the structure, the provider and funder of support) and the population provided for (age group, type of impairment, level of support provided). In addition, the data collection on institutional services included information on typical size, length of admissions, and length of time that institutions/services of that type have been operating. The data collection on community-based services included information on availability of the type of CBS in the country, eligibility and user control over the support provided).  More information is available in FRA’s [Summary overview of types and characteristics of institutional and community-based services for persons with disabilities available across the EU](http://fra.europa.eu/en/project/2014/rights-persons-disabilities-right-independent-living). |

# Overview of institutional services for persons with disabilities (2014)

**Table 1: Typology of institutions**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **TYPE OF SERVICE** | **SIZE** | **AGE GROUP** | **TYPE OF IMPAIRMENT** | **LEVEL OF SUPPORT PROVIDED** | **TYPICAL PROVIDER[[1]](#footnote-1)** | **TYPICAL FUNDER** | **LENGTH OF ADMISSION** | **AGE OF INSTITUTION/ SERVICE** |
| Care home (*Verzorgingshuis*)[[2]](#footnote-2) (residential) | 30-100 places | Older people / Adult | Mixed | 24 hour support provided / day care | Voluntary/ not-for-profit | Mixed government and private | Over 2 years | Over 50 years |
| Nursing home (*Verpleeghuis*) [[3]](#footnote-3) (residential) | 30-100 places | Older people / Adult | Mixed | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | Over 2 years. | Over 50 years |
| Family Replacing Home (*gezinsvervangend thehuis*)[[4]](#footnote-4) (residential) | 11-30 places | Adult | Mixed | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | n Over 2 years | 10-50 years |
| Family home (*Gezinshuis)[[5]](#footnote-5)* (residential) | 1-5 places | Children | Mental health problem | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | Over 2 years | 10-50 years |
| Sheltered housing (*Beschermd wonen*)[[6]](#footnote-6) (residential) | 11-30 places | Children/ Adult | Mental health problem /Intellectual disability | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | Over 2 years | 10-50 years |
| 24-uusvoorziening (24-hours service) (residential) | 11-30 places | Adult | Mental health problem | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | Up to 6 months | 10-50 years |
| Assisted living (*Begeleid wonen*)[[7]](#footnote-7) (non-residential) | 1-5 places | Adult | Mental health problem /Intellectual disability | Variable support provided, depending on the residents’ needs | Voluntary/ not-for-profit | Mixed government and private | 6 months to two years | 10-50 years |
| Ambulatory/non-residential care [[8]](#footnote-8) (*Ambulante zorg*) [[9]](#footnote-9) (non-residential) | 1-5 places | Adult | Mixed | Variable support provided, depending on the residents’ needs | Voluntary/ not-for-profit | Mixed government and private | Mixed lengths of admission | 10-50 years |
| Home care (t*huiszorg*)[[10]](#footnote-10) (non-residential) | 1-5 places | Adult / Older people | Mixed | Variable support provided, depending on the residents’ needs | Voluntary/ not-for-profit | Mixed government and private | Mixed lengths of admission | 10-50 years |
| Day activity Centre (*Dagactiviteitencentrum*)[[11]](#footnote-11) (non-residential) | 11-30 places | Children / Adult | Mixed. | Day time support provided, no night time staffing | Voluntary/ not-for-profit | Mixed government and private | Mixed lengths of admission | 10-50 years |
| Orthopedagogic centre (*Orthopedagogische Behandelcentrum*)[[12]](#footnote-12) (non-residential) | 6-10 places | Children | Mental health problem /Intellectual disability | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | 6 months to two years | 10-50 years |
| Full Package At Home (*Volledig Pakket Thuis*)[[13]](#footnote-13) (non-residential) | 1-5 places | Adult. | Mixed. | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | Mixed lengths of admission | 5-10 years |
| Institutions providing Psychiatric Day treatment [[14]](#footnote-14) (*Dagbehandeling*) (non-residential) | 30-100 places | Adult | Mental health problem | Daytime support provided, no night time staffing | Voluntary/ not-for-profit | Mixed government and private | Up to 6 months | 10-50 years |
| Clinic treatment (*klinische behandlingbehandeling*) Psychiatric hospitals [[15]](#footnote-15) (residential) | 30-100 places | Adult | Mental health problem | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | Up to 6 months | Over 50 years |
| Psychiatric departments of Children Hospitals (*Psychiatrische afdelingen kinderziekenhuizen*)[[16]](#footnote-16) (residential) | 30-100 places | Children | Mental health problem | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | Up to 6 months | 10-50 years |
| Psychiatric departments of General Hospitals (*Psychiatrische afdelingen ziekenhuizen*)[[17]](#footnote-17) (residential) | 30-100 places | Adult | Mental health problem | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | Up to 6 months | Over 50 years |
| Housing for people with a visual disability (woonvoorzieningen voor visueel gehandicapten) [[18]](#footnote-18)(residential) | 6-10 places | Adult | Sensory disability | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | Over 2 years | Over 50 years |
| Housing for people with an hearing disability (woonvoorzieningen voor auditief gehandicapten) [[19]](#footnote-19) (residential) |  | Adult | Sensory disability | 24 hour support provided | Voluntary/ not-for-profit | Mixed government and private | Over 2 years | Over 50 years |

**Table 2: data sources**

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| --- | --- | --- | --- | --- | --- | --- |
| **TITLE/ REFERENCE** | **ORGANISATION COLLECTING DATA** | **YEAR OF DATA COLLECTION** | **PERIOD COVERED BY THE DATA** | **METHODOLODY FOR DATA COLLECTION** | **GEOGRAPHICAL SCOPE OF DATA COLLECTION** | **SERVICE SCOPE OF DATA COLLECTION** |
| Netherlands, National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*) (2014), National Public Health Compass (*Nationaal Kompas Volksgezondheid*), Bilthoven, Rijksinstituut voor Volksgezondheid en Milieu, available at: [www.nationaalkompas.nl](http://www.nationaalkompas.nl) | National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*). Governmental organisation. | 2011-2014 | 2011-2014  It is a website that is continuously updated with the most recent available data. The updates are triggered by the availability of new reports or studies. | Desk research, administrative (studies and reports) administrative data. | National | All services. |
| Netherlands, National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*) (2014), Regional Atlas of Public Health (*Regionaal Kompas Volksgezondheid)*, Bilthoven, Rijksinstituut voor Volksgezondheid en Milieu, available at: [www.regionaalkompas.nl/](http://www.regionaalkompas.nl/) | National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*) and regional Community Health Services (GGD's). Governmental organisation. |  | 2011-2014  It is a website that is continuously updated with the most recent available data. | Desk research (studies and reports), administrative data | Regional | All services |
| Netherlands, National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*) (2014), Dutch National Atlas of Public Health (*Nationale Atlas Volksgezondheid*), Bilthoven, *Rijksinstituut voor Volksgezondheid en Milieu*, available at: [www.zorgatlas.nl](http://www.zorgatlas.nl) | National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*). Governmental organisation. | 2011-2014 | 2011-2014  It is a website that is continuously updated with the most recent available data. | Desk research(studies and reports), administrative data | National | All services |
| Federation of Patients and Consumer Organisations in the Netherlands (*Nederlandse Patiënten Consumenten Federatie*) (2014), Care map the Netherlands (*ZorgkaartNederland)*, Utrecht, Nederlandse Patiënten Consumenten Federatie, available at [www.zorgkaartnederland.nl](http://www.zorgkaartnederland.nl) | Federation of Patients and Consumer Organisations in the Netherlands (*Nederlandse Patiënten Consumenten Federatie*). NGO | 2014 | 2014  It is a website that is continuously updated with the most recent available data. | Desk research (studies and other reports), administrative data. | National | All services |
| Inspectie voor de Gezondheidszorg (*Health Care Inspectorate*) (2014), *Verbetering van de kwaliteit van de ouderenzorg gaat langzaam.*  *Intensivering toezichtbezoeken aan verpleeg- en*  *verzorgingshuizen in de periode 2011 en 2012*, [Improvement of the quality of the care for the elderly progresses slowly. Intensification supervisory visits to nursing homes and care homes during the period 2011-2012 - unofficial translation], Utrecht, Inspectie voor de Gezondheidzorg, available at: [www.rijksoverheid.nl/bestanden/documenten-en-publicaties/rapporten/2014/06/12/verbetering-van-de-kwaliteit-van-de-ouderenzorg-gaat-langzaam/verbetering-van-de-kwaliteit-van-de-ouderenzorg-gaat-langzaam.pdf](http://www.rijksoverheid.nl/bestanden/documenten-en-publicaties/rapporten/2014/06/12/verbetering-van-de-kwaliteit-van-de-ouderenzorg-gaat-langzaam/verbetering-van-de-kwaliteit-van-de-ouderenzorg-gaat-langzaam.pdf) | Health Care Inspectorate(*Inspectie voor de Gezondheidszorg*). Governmental organisation. | 2013 | 2011-2012 | Visits to institutions | National | Services for older people |
| Ngo, D. and Brink, M. (2014), *Sectorrapport ggz 2012. Feiten en cijfers over een sector in beweging* [Sectoral report mental health care 2012. Facts and figures about a sector in transition - unofficial translation] , Amersfoort, 2012, available at: [www.ggznederland.nl/uploads/assets/Sectorrapport%202012-web.pdf](http://www.ggznederland.nl/uploads/assets/Sectorrapport%202012-web.pdf) | Dutch Association of Mental Health and Addiction Care (GGZ Nederland) - Sectoral organisation | 2013/2014 | 2009-2012 | Desk research / administrative (reports and studies) / adminstrative data | National | Services for people with mental health problems/intellectual disabilities |
| Statistics Netherlands (*Centraal Bureau voor de Statistiek*) (2014), *Gezondheid en zorg in cijfers 2013*[Health and care in figures 2013 - unofficial translation], The Hague / Heerlen : Centraal Bureau voor de Statistiek, available at: [www.cbs.nl/NR/rdonlyres/B3173C43-368C-4190-8D9C-88E6BBF2CBE8/0/2013c156puberr.pdf](http://www.cbs.nl/NR/rdonlyres/B3173C43-368C-4190-8D9C-88E6BBF2CBE8/0/2013c156puberr.pdf) | Statistics Netherlands (*Centraal Bureau voor de Statistiek*),  National statistical office | 2012-2013 | 2012-2013 | Administrative data | National | All services. |
| Sadiraj, K., Ras, M., Putman, L. and Jonker, J.J. (2013), Youth care: a growing future? Overview of actual demand for youth care services in the period 2001-2011 and forecast demand in the period 2011-2017 (*Groeit de jeugdzorg door? Het beroep op de voorzieningen: realisatie 2001-2011 en raming 2011-2017*, The Hague, Sociaal en Cultureel Planbureau, available at: [www.scp.nl/dsresource?objectid=35852&type=org](http://www.scp.nl/dsresource?objectid=35852&type=org) | Netherlands Institute for Social Research (*Sociaal en Cultureel Planbureau*).  Governmental organisation | 2012 | 2001-2011 | Administrative data | National | Services for children |
| Vroonhof, P., Zandvliet, K., Van Klaveren, S., Spijkerman, M. and Winnubst, M. (2013*), Monitor Investeringen V&V 2011-2015. Eénmeting juni 2013*,[Monitor Investments in Care Homes and Nursing Homes. First measurement June 2013] - unofficial translation], Zoetermeer / Rotterdam, Panteia / SEOR, available at: <http://panteia.nl/nl/Projecten-AZW/Arbeidsmarkt-Zorg-en-Welzijn/VVT/~/media/8%20AZW/Panteia%20en%20SEOR%202013%20%20Monitor%20Investeringen%20VV%2020112015.ashx> | Panteia and SEOR. Independent research organisations | 2013 | 2013 | Visits to institutions | National | Nursing homes / care homes |
| Van der Kwartel, A.J.J. (2013), *Brancherapport Gehandicaptenzorg 2012* [Sectoral report Care for the disabled 2012 - unofficial translation], Utrecht, Vereniging Gehandicaptenzorg Nederland (VGN), available at:  [www.vgn.nl/media/download/index/mediaid/518359f5e4fa3](http://www.vgn.nl/media/download/index/mediaid/518359f5e4fa3) | Dutch Association of Healthcare Providers for People with Disabilities (*De Vereniging Gehandicaptenzorg Nederland, VGN*) NGO. | 2013 | 2012 | Desk research / administrative (reports) / administrative data | National | Services for people with disabilities |
| Bomhoff, M., Paus, N. and Friele, R. (2013*),* Nothing to complain about. An explorative study at three long-term care facilities for older persons*.* (*Niets te klagen. Onderzoek naar uitingen van ongenoegen in verzorgings- en verpleeghuizen*), Utrecht, Nivel, available at: [www.nivel.nl/sites/default/files/bestanden/Rapport-Niets-te-klagen.pdf](http://www.nivel.nl/sites/default/files/bestanden/Rapport-Niets-te-klagen.pdf) | Nivel, the Netherlands Institute for Health Services Research. Independent research organisations | 2012 | 2012 | Interviews (semi-structured interviews about how complaints are handled with residents,  their family members, caretakers and other personnel, complaints  managers and directors ; visits to institutions | National | Nursing homes / care homes |
| Van Campen, C., Broese van Groenou, M., Deeg, D. and Iedema, J. (2013), Ageing with care. Care trajectories of older persons over a decade years. *(Met zorg ouder worden. Zorgtrajecten van ouderen in tien jaar)*, The Hague, Sociaal en Cultureel Planbureau, available at: [www.scp.nl/dsresource?objectid=35186&type=org](http://www.scp.nl/dsresource?objectid=35186&type=org) | Netherlands Institute for Social Research (*Sociaal en Cultureel Planbureau*), Governmental organisation | 2012 | 1998-2008 | Sampling ; ( data were drawn from the Longitudinal Aging Study Amsterdam  (lasa), a national representative panel of older persons in the Netherlands),administrative data | National | Services for older people |
| Panteia / SEOR (2012), *Monitor Investeringen VV(T) 2011-2015. Nulmeting 31 december 2011*,[Monitor Investments in Care Homes and Nursing Homes 2011-2015. Baseline measurement 31 December 2011 - unofficial translation], Zoetermeer / Rotterdam, Panteia / SEOR, available at:  <https://zoek.officielebekendmakingen.nl/blg-191424.pdf> | Panteia and SEOR, Independent research organisations | 2012 | 2011 | Visits to institutions | National | Nursing homes / care homes |
| Woittiez, I., Ras, M. and Oudijk, D. (2012), IQ with limitations. Measuring intellectual disability and in care recipients (I*Q met beperkingen. De mate van verstandelijke handicap van zorgvragers in kaart gebracht)*, The Hague, Sociaal en Cultureel Planbureau, available at: [www.scp.nl/dsresource?objectid=29832&type=org](http://www.scp.nl/dsresource?objectid=29832&type=org) | Netherlands Institute for Social Research (*Sociaal en Cultureel Planbureau),*  Governmental organisation | 2011 | 1998-2009 | Administrative data | National | services for people with intellectual disabilities |
| Hingstman, T.L., Langelaan, M. and Wagner, C. (2012*), De dagelijkse bezetting en kwaliteit van zorg in instellingen voor langdurige zorg* [Daily staff and quality of care in instutions for residential care - unofficial translation], Utrecht, Nivel, available at: [www.rijksoverheid.nl/bestanden/documenten-en-publicaties/rapporten/2012/03/16/rapport-de-dagelijkse-bezetting-en-kwaliteit-van-zorg-in-instellingen-voor-langdurige-zorg/rapport-de-dagelijkse-bezetting-en-kwaliteit-van-zorg-in-instellingen-voor-langdurige-zorg.pdf](http://www.rijksoverheid.nl/bestanden/documenten-en-publicaties/rapporten/2012/03/16/rapport-de-dagelijkse-bezetting-en-kwaliteit-van-zorg-in-instellingen-voor-langdurige-zorg/rapport-de-dagelijkse-bezetting-en-kwaliteit-van-zorg-in-instellingen-voor-langdurige-zorg.pdf) | Nivel, the Netherlands Institute for Health Services Research. Independent research organisation (*Nivel, Nederlands instituut voor onderzoek van de gezondheidszorg)* | 2011 | 2011 | Questionnaire ;( survey of staff from a sample of 23 institutions for long term care on the quality of care); Visits to institutions | National | Long term care |
| De Klerk, M. (2011), Care in the latter years. Health and use of care in residential care and nursing homes 2000-2008 *(Zorg in de laatste jaren. Gezondheid en hulpgebruik in verzorgings- en verpleeghuizen 2000-2008)*, The Hague, Sociaal en Cultureel Planbureau, available at: [www.scp.nl/dsresource?objectid=29108&type=org](http://www.scp.nl/dsresource?objectid=29108&type=org) | Netherlands Institute for Social Research (*Sociaal en Cultureel Planbureau*).  Governmental organisation. | 2010 | 2000-2008 | Questionnaire (survey among a random sample of elderly residing in care homes and nursing homes about the care they received); administrative data | National | All services |
| Inspectie voor de Gezondheidszorg (*Health Care Inspectorate)* (2010), *Gebrekkige indicatiestelling en samenwerking edreiging voor kwaliteit van zorg voor licht verstandelijk gehandicapten* [Deficient indication and lack of cooperation threat to the quality of the care for persons with a minor intellectual disability - unofficial translation] , Utrecht, Inspectie voor de Gezondheidszorg, available at : [www.rijksoverheid.nl/bestanden/documenten-en-publicaties/rapporten/2010/12/02/gebrekkige-indicatiestelling-en-samenwerking-bedreiging-voor-kwaliteit-van-zorg-voor-licht-verstandelijk-gehandicapten/dlz-3036085b.pdf](http://www.rijksoverheid.nl/bestanden/documenten-en-publicaties/rapporten/2010/12/02/gebrekkige-indicatiestelling-en-samenwerking-bedreiging-voor-kwaliteit-van-zorg-voor-licht-verstandelijk-gehandicapten/dlz-3036085b.pdf) | Health Care Inspectorate(*Inspectie voor de Gezondheidszorg*), Governmental organisation | 2009 | 2009 | Questionaire (an online survey of 177 providers of care to  adults with a minor mental disability on the indication’ (assessment of  patient requirements and cooperation with other providers); desk research (reports and studies), visits to institutions | National | Services for people with intellectual disabilities |
| Inspectie voor de Gezondheidszorg (*Health Care Inspectorate*) (2008),  *Verpleeghuiszorg op de goede weg : Resultaten van vervolgbezoeken aan de 149 meest*  *risicovolle instellingen voor verpleeghuiszorg in 2006/2007* [Nursing care services are improving : Results of return visits to the 149 high-risk nursing care institutes in 2006/2007 - unofficial translation] , Utrecht, Inspectie voor de Gezondheidzorg, available at: [www.rijksoverheid.nl/bestanden/documenten-en-publicaties/rapporten/2008/04/22/rapport-verpleeghuiszorg-op-de-goede-weg/dlz-2845565b.pdf](http://www.rijksoverheid.nl/bestanden/documenten-en-publicaties/rapporten/2008/04/22/rapport-verpleeghuiszorg-op-de-goede-weg/dlz-2845565b.pdf) | Health Care Inspectorate(*Inspectie voor de Gezondheidszorg*), Governmental organisation | 2008 | 2006-2007 | Visits to institutions | National | Nursing homes |
| Inspectie voor de Gezondheidszorg (*Health Care Inspectorate*) (2008), *Verantwoorde zorg voor gehandicapten onder druk.* *Toets op risico’s in de 24-uurszorg voor mensen met een verstandelijke beperking 2006-2007* [Care for the disabled under pressure. Examination of risks in the 24 hour care of the mentally disabled - unofficial translation] , Utrecht, Inspectie voor de Gezondheidszorg, available at: [www.igz.nl/zoeken/download.aspx?download=Verantwoorde\_zorg\_voor\_gehandicapten\_onder\_druk.pdf](http://www.igz.nl/zoeken/download.aspx?download=Verantwoorde_zorg_voor_gehandicapten_onder_druk.pdf) | Health Care Inspectorate(*Inspectie voor de Gezondheidszorg*), Governmental organisation | 2008 | 2006-2007 | Questionnaire (among 149 organisations that provide care for the mentally disabled on the care they give), visits to institutions |  | Services for people with intellectual disabilities |

# Overview of community-based services for persons with disabilities (2015)

**Table 3: Community-based services for persons with disabilities**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Type of community-based service**  *Please provide the name of the type of service in the national language and a translation into English*  *Please indicate if the types of services presented below are given a different name in your country* | **Yes/ No**  *Please indicate if this type of service is available in your country* | **Profile of the users**   * *age (children, adults or older persons)* * *type of disability (physical disability, intellectual disability, psycho-social disability, deaf or hard of hearing, blind)* | **Explanatory information**  *For each type of service, please provide a short description of:*   * *the type and level (i.e. 24 hour, daytime, weekends, etc.) of support the service provides;* * *location of the service (i.e. city, town, rural areas);* * *who is eligible for the service* * *who is typically the provider and funder of services (i.e. national government, local government, municipality, NGO, private company, etc.)?* | **Extent to which support is self-directed**  *For each type of service, please provide information about the extent to which users control the support provided. Can individuals using the service:*   * *recruit and manage staff providing support;* * *determine the activities for which support is needed;* * *determine how the budget for services and supports is used;* * *choose types of equipment and adaptations to meet their needs?* | **If data are available, please specify number of services operating in the country and the number of users**  *Please provide a full reference for this data, including information about the period covered by the data.*  *Please indicate, if data is available, if there has been decrease / increase in the last five years* |
| **Persoongebonden budget (Personal budgets)** | Yes. | Typically used by adults and older persons with disabilities and for all types of impairments. | Both the 2015 Social Support Act (*Wet Maatschappelijke Ondersteuning 2015*)[[20]](#footnote-20) and the Long-Term Care Act (*Wet Langdurige Zorg*) [[21]](#footnote-21) enables individuals to use a personal budget (*persoonsgebonden budget*) by which an individual can purchase help or support in all sort of forms: domestic help (*thuiszorg*), personal care *(persoonlijke verzorging*) such as help with everyday activities such as getting up, nursing (*verpleging*), support services (*begeleiding*) such as daycare and learning to cope with your disability and short stays away from home (*kortdurend verblijf*), such as weekend care, holiday care and respite care.  The personal budget under the 2015 Social Support Act are financed by the municipalities who get their budget from the national government. The personal budget under the Long-Term Care Act is financed by the national government. The user of the services is expected to make a contribution. The services are provided by private non-commercial organisations.  The Long-Term Care Act (*Wet Langdurige Zorg*) is financed by premiums paid by all tax payers. It is a national law. The Services are provided by private non-profit organisations in all parts of the Netherlands. | 1 The budget is not given directly to the applicant. The Social Insurance Bank (*Sociale Verzekeringsbank* or SVB), the organization that implements national insurance schemes in the Netherlands, pays the bill for the services directly to the organisation that provides the care or support. The applicant informs the SVB when it should pay the care provider for the service it has delivered. | All municipalities operate personal budgets. There are figures on how many personal budgets were allocated under the Medical Expenses Act (*Algemene Wet Bijzondere Ziektekosten*): 119,184 in 2014.[[22]](#footnote-22) This Act ceased to exist at the end of 2014 and was replaced by the Long-Term Care Act and the 2015 Social Support Act. In 2013 121,913 persons received a personal budget. In 2012 128,707 persons. In 2011 138,682 persons. In 2010 120,572 persons. These figures relate to personal budgets provided under the Exceptional Medical Expenses Act (*Algemene Wet Bijzondere Ziektekosten*). |
| **Persoonlijke ondersteuning (Personal assistance** ( | Yes. | Typically used by adults and older persons with disabilities and for all types of impairments. | Personal assistance relates to these services that help a person to cope with practical issues in life, the social aspects in particular.  Personal assistance is provided under the 2015 Social Support Act (*Wet Maatschappelijke Ondersteuning 2015*). It used to be provided under the Exceptional Medical Expenses Act (*Algemene Wet Bijzondere Ziektekosten*) and under the old Social Support Act. The funder are the municipalities which get their budget from the national government. The service is provided by non-profit private organisations in all parts of the Netherlands. | Provided in kind or via a personal budget. If persons choose for in kind provision they are obliged to take care from an organisation that has a contract with the municipality. If persons choose for a personal budget they have more freedom to choose their care provider. | All municipalities fund personal assistance services. In 2013 151,590 persons received personal assistance.[[23]](#footnote-23) In 2012 144,320 persons. In 2011 141,795 persons. These figures relate to the services provided in kind not the services provided as part of the personal budget. The figures on 2013 are provisional figures. |
| **Persoonlijke zorg (Personal care)** | Yes. | Typically used by adults and older persons with disabilities and for all types of impairments. | Personal care relates to services that relate to the physical care of a person: feeding, exercise etc. Personal assistance is provided under the 2015 Social Support Act (*Wet Maatschappelijke Ondersteuning 2015*). It used to be provided under the Exceptional Medical Expenses Act (*Algemene Wet Bijzondere Ziektekosten*) that ceased to exist at the end of 2014. The funder are the municipalities which get their budget from the national government. The service is provided by non-profit private organisations in all parts of the Netherlands. | Provided in kind or via a personal budget. If persons choose for in kind provision they are obliged to take care from an organisation that has a contract with the municipality. If persons choose for a personal budget they have more freedom to choose their care provider. | All municipalities fund personal care services.  In 2013 370,300 ppersons received personal care. In 2012 362,815 persons. [[24]](#footnote-24) In 2011 352,105 persons. In 2010  340,115 persons. These figures relate to the services provided in kind not the services provided as part of the personal budget. The figures on 2013 are provisional figures. |
| **Residentiële zorg (Residential care)** | Yes. | Typically used by adults and older persons with disabilities and for all types of impairments. | Residential care is provided under the 2015 Social Support Act (*Wet Maatschappelijke Ondersteuning 2015*) and under Long-Term Care Act (*Wet Langdurige Zorg*). It used to be provided under the Exceptional Medical Expenses Act (*Algemene Wet Bijzondere Ziektekosten*) that ceased to exist at the end of 2014.  Services under the 2015 Social Support Act are funded by the municipalities which get their budget from the national government. The service is provided by non-profit private organisations.  The Long-Term Care Act (*Wet Langdurige Zorg*) is financed by premiums paid by all tax payers. It is a national law. The Services are provided by private non-profit organisations in all parts of the Netherlands. | Under the 2015 Social Support Act residential care can be provided in kind or via a personal budget. If persons choose for in kind provision they are obliged to take care from an organisation that has a contract with the municipality. If persons choose for a personal budget they have more freedom to choose their care provider.  Under the Long-term Care Act users get an indication for care from the Centre for Care Assessment (*Centrum Indicatiestelling Zorg* or CIZ). With this indication the user turns to a care office (*zorgkantoor*). The care office informs the user about the possibilities so the user can make a choice. Care can be provided in kind or via a personal budget. The services are provided by private non-profit organizations. | All municipalities fund residential care. There are figures on how many persons were in residential care as funded in kind by the Exceptional Medical Expenses Act (*Algemene Wet Bijzondere Ziektekosten*). [[25]](#footnote-25)These figures do not include the residential care provided as part of a personal budget. In 2013 327,165 persons received residential care. In 2012 370,935 persons. In 2011 363,810 persons. In 2010 355,430 persons. These are overall figures. There are also figures for residential care for people with a disability. In 2013 80,950 persons with a disability received residential care.In 2012, 80,865 persons and in 2011 76,580 persons. The figures on 2013 are provisional figures. |
| **Volledig pakket thuis (Full package at home)** | Yes. | Typically used by adults and older persons with disabilities.All types of impairments | Full package at home is a form of residential care but provided in the residence of the user. The form of service is provided under the Long-Term Care Act (*Wet Langdurige Zorg*). It used to be provided under the Exceptional Medical Expenses Act (*Algemene Wet Bijzondere Ziektekosten*) that ceased to exist at the end of 2014. The Long-Term Care Act is financed by premiums paid by all tax payers. It is a national law. The  Services are provided by private non-profit organisations in all parts of the Netherlands. | Under the Long-term Care Act users get an indication for care from the Centre for Care Assessment (*Centrum Indicatiestelling Zorg* or CIZ). With this indication the user goes to a care office (*zorgkantoor*). The care office informs the user about the possibilities so the user can make a choice. One of the options is full package at home. | In the statistics the full package at home is considered as a form of residential care so we cannot provide disaggregated data.[[26]](#footnote-26) |
| **Thuishulp (home help)** | Yes. | Typically used by adults and older persons with disabilities. All types of impairments | Home care services (*huishoudelijke verzorging)* are provided as part of the 2015 Social Support Act.  The funder are the municipalities which get their budget from the national government. The service is provided by non-profit private organisations in all parts of the Netherlands. | Provided in kind or via a personal budget. If persons choose for in kind provision they are obliged to take care from an organisation that has a contract with the municipality. If persons choose for a personal budget they have more freedom to choose their care provider. | All municipalities fund home care services. In 2013 414,075 persons received this form of services. In 2012 443,160 persons received in home help. In 2011 : 444,540. In 2010: 431,320. [[27]](#footnote-27) These figures relate to the services provided in kind not the services provided as part of the personal budget. The figures on 2013 are provisional figures. |
| **Dagactiviteitencentrum (Day care centre)** | Yes. | Typically used by adults and older persons with disabilities. All types of impairments. | Day care care centres are provided under the 2015 Social Support Act (*Wet Maatschappelijke Ondersteuning 2015*). They used to be provided under the Exceptional Medical Expenses Act (*Algemene Wet Bijzondere Ziektekosten*). The funder are the municipalities which get their budget from the national government. The service is provided by non-profit private organisations in all parts of the Netherlands. | In kind provision or via a personal budget. If persons choose for in kind provision they are obliged to take care from an organisation that has a contract with the municipality. If persons choose a personal budget they have more freedom to choose their care provider. | All municipalities fund day care centres. In 2013 90,625 persons received this form of service.[[28]](#footnote-28) In 2012 93,335 persons. In 2011 92,705 persons. These figures relate to the services provided in kind not the services provided as part of the personal budget. The figures on 2013 are provisional figures. |
| 1. **Respijtzorg (Respite care)** | Yes. | This service is provided to informal carers. | Respite care is financed by the municipalities under the 2015 Social Support Act. It used to be financed by Exceptional Medical Expenses Act (*Algemene Wet Bijzondere Ziektekosten*) that ceased to exist at the end of 2014. The care itself is provided by professional organisations in all parts of the Netherlands. | Informal carers in need of respite care can choose from a wide range of services. There are several types of service available. Popular types of respite care are: in-home respite care, day-care, short-stay and special holiday arrangements. | There are no overall figures on respite care. Respite care can be provided in several ways. One of the most popular forms of respite care is the short stay. On 1 January 2015 9,135 persons received a short stay per week, on 1 January 2014 11,090 persons, on 1 January 2013 13,795 persons, on 1 January 2012 17,740 persons, on 1 January 2011 23,905 persons, and 1 January 2010.[[29]](#footnote-29) These figures relate to the services provided in kind not the services provided as part of the personal budget. |
| **Pleegzorg (Foster care)** | Yes. | This service is provided in the Netherland to several categories of children. One of these is the category of children with a disability whose parents can not cope with care. | Legal framework for foster care is provided by chapter 5 of the Youth Act (*Jeugdwet*).[[30]](#footnote-30) The Act is implemented by the municipalities. The care itself is provided by foster families who are supported and recruited by 28 recognized foster care organisations.[[31]](#footnote-31) Parents with children with a disability can request municipalities for support that is provided under the Youth Act including foster care. Foster care is provided in all parts of the Netherlands. | Foster care is financed as part of the Youth Act (*Jeugdwet*). Services under this act are financed by the municipalities which get their budgets from the central government. | In 2013 21,606 children were placed in foster care. 66 % of these were placed in foster care as part of youth protection. 28 percent were placed in foster care as part of a voluntary arrangement. [[32]](#footnote-32) There are no figures on how many children with a disability were placed in foster care. |
| **Mantelzorg (Informal support)** | Yes. | 1. Typically used by adults and older persons with disabilities and for all types of impairments. | The 2015 Social Support Act recognizes informal support services. The starting point of the 2015 Social Support and the preceding Social Support Act is that people with a disability should make use of their social resources or informal networks to live independently. Only if these networks do not exist or are very small or weak, people with a disability can claim support from the municipality. Informal carers are thus a corner stone of the system under the Social Support Act. Only when there is no informal carer's available, support by professionals is made available by the municipality. The 2015 Social Support Act enables municipalities to support these informal carers, by giving respite care for example. | The availability of informal care depends on the network of the persons who needs support or care. | The number of informal carers in the Netherlands is estimated by Netherlands Statistics at 1,5 million in the year 2012.[[33]](#footnote-33) Informal care is provided in all municipalities.  A literature review by The Netherlands Institute for Social Research produces other estimates: One in 5 adults gives aid to a member of the household, family member, relative, friend or neigbour who is in need of support. That amounts to 2,6 million people giving aid. Of these 1,1 million give care or aid for a long term (more than three months.[[34]](#footnote-34) Both are estimates. There are no correct numbers. |
| **Zelfhulp (Peer support/counselling)** | Yes. | Typically used by adults and older persons with disabilities and for all types of impairments. | Peer support is provided is some places in the Netherlands. Information is rather fragmentary. It is often called self help *(zelfhulp*) in the Netherlands. | These services are organized in a very informal and cost efficient way. People with a disability can make us of them without paying a fee etc | There are no data on peer support. |
| **Vriendenkringen (Circles of support)** | Yes. | Typically used by adults and older persons with disabilities and for intellectual and mental impairments. | Circles of support have been implemented in several municipalities in the Netherlands. under the Social Supprt Act (*Wet Maatschappelijke Ondersteuning*). They are funded by the municipalities who get their budget from the central government. Because of the low costs of this form of support, some circles of support are finaced by the care providers themselves. | These services are organized in a very informal and cost efficient way. People with a disability can make use of them without paying a fee etc. | There are no figures in how many municipalities circles of support (*vriendenkringen / vriendgroepen)* have been implemented*.* There are also no figures on how many of these circles exist. One example of a circle of support has been evaluated.. This project in Hardenberg was financed by the care provider istelf without any budget form the Social Support Act. [[35]](#footnote-35) |
| **Crisiszorg (Crisis intervention** | Yes | Typically used by adults with mental health problems. | Crisis intervention and emergency services are paid by the health insurers under the Health Insurance Act (*Zorgverzekerswet*). They are available in all parts of the Netherlands. | For this type of service the extent to which users can control the support provided is very limited due to the circumstances. | There are no reliable figures on the number of crisis interventions that take place each year because there is no systematic registration. Estimates range from 150,000 to 175,000 crisis interventions a year.[[36]](#footnote-36) In 10 percent of these interventions the person is hospitalized. |
| **Maatjesprojecten (Befriending)** | Yes | Typically used by adults and older persons with disabilities and for all types of impairments. | Befriending (*maatjesprojecten*) is provided under the 2015 Social Support Act (*Wet Maatschappelijke Ondersteuning 2015*). The funder are the municipalities which get their budget from the national government. The service is provided by non-profit private organisations.  These project are also funded by special funds which finance social projects. One of these funds is the Oranjefonds.[[37]](#footnote-37) Oranje fonds maintains a special website: [www.ikwordmaatje.nl/](http://www.ikwordmaatje.nl/) | These services are organized in a very informal and cost efficient way. People with a disability can make us of them without paying a fee etc. | There are no figures in how many municipalities befriending projects (*maatjesprojecten)* have been implemented*.* There are also no figures on how many of these circles exist. |

1. Care in the Netherlands is typically provided by private foundations. These are non-profit professional organisations. The care is paid for by the patients and by insurances. In the Netherlands there are two statutory forms of insurance that are relevant to the field of medical care and nursing: the *Zorgverzekeringswet* (Zvw, *Health Insurance Act*) and *Algemene Wet Bijzondere Ziektekosten* (AWBZ, *General Exceptional Medical Expenses Act*). The Health Insurance Act entails a compulsory health insurance with private health insurance companies for the costs of 'normal' medical care such as G.P. visits, hospitalisation and pharmacy prescription. These insurance companies are obliged to provide a package with a defined set of insured treatment. There is the possibility of a voluntary supplementary insurance over and above the Zvw. The Algemene Wet Bijzondere Ziektekosten (AWBZ, *General Exceptional Medical Expenses Act*) covers the costs of exceptional and in particular expensive care, such as long-term nursing and home-care. [↑](#footnote-ref-1)
2. Federation of Patients and Consumer Organisations in the Netherlands (*Nederlandse Patiënten Consumenten Federatie*) (2014), *Care map the Netherlands* (ZorgkaartNederland), Utrecht, Nederlandse Patiënten Consumenten Federatie, available at [www.zorgkaartnederland.nl](http://www.zorgkaartnederland.nl) . [↑](#footnote-ref-2)
3. Federation of Patients and Consumer Organisations in the Netherlands (*Nederlandse Patiënten Consumenten Federatie*) (2014), *Care map the Netherlands* (ZorgkaartNederland), Utrecht, Nederlandse Patiënten Consumenten Federatie, available at [www.zorgkaartnederland.nl](http://www.zorgkaartnederland.nl) . [↑](#footnote-ref-3)
4. Federation of Patients and Consumer Organisations in the Netherlands (*Nederlandse Patiënten Consumenten Federatie*) (2014), *Care map the Netherlands* (ZorgkaartNederland), Utrecht, Nederlandse Patiënten Consumenten Federatie, available at [www.zorgkaartnederland.nl](http://www.zorgkaartnederland.nl) . [↑](#footnote-ref-4)
5. Federation of Patients and Consumer Organisations in the Netherlands (*Nederlandse Patiënten Consumenten Federatie*) (2014), *Care map the Netherlands* (*ZorgkaartNederland*), Utrecht, Nederlandse Patiënten Consumenten Federatie, available at [www.zorgkaartnederland.nl](http://www.zorgkaartnederland.nl) . [↑](#footnote-ref-5)
6. Netherlands, National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*) (2014), Dutch National Atlas of Public Health (*Nationale Atlas Volksgezondheid*), Bilthoven, *Rijksinstituut voor Volksgezondheid en Milieu*, available at: [www.zorgatlas.nl](http://www.zorgatlas.nl) . [↑](#footnote-ref-6)
7. Woittiez, I., Ras, M. and Oudijk, D. (2012), IQ with limitations. Measuring intellectual disability and in care recipients (I*Q met beperkingen. De mate van verstandelijke handicap van zorgvragers in kaart gebracht)*, The Hague, Sociaal en Cultureel Planbureau, available at: [www.scp.nl/dsresource?objectid=29832&type=org](http://www.scp.nl/dsresource?objectid=29832&type=org) . [↑](#footnote-ref-7)
8. Ambulatory care is a personal health care consultation, treatment, or intervention delivered on an outpatient basis. It entails treatment as opposed to home care (thuiszorg) that entails supportive care provided in the home. [↑](#footnote-ref-8)
9. Netherlands, National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*) (2014), National Public Health Compass (*Nationaal Kompas Volksgezondheid*), Bilthoven, Rijksinstituut voor Volksgezondheid en Milieu, available at: [www.nationaalkompas.nl](http://www.nationaalkompas.nl) . [↑](#footnote-ref-9)
10. Netherlands, National Institute of Public Health and the Environment (Rijksinstituut voor Volksgezondheid en Milieu) (2014), Dutch National Atlas of Public Health (*Nationale Atlas Volksgezondheid*), Bilthoven, Rijksinstituut voor Volksgezondheid en Milieu, available at: [www.zorgatlas.nl](http://www.zorgatlas.nl) . [↑](#footnote-ref-10)
11. Netherlands, National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*) (2014), National Public Health Compass (*Nationaal Kompas Volksgezondheid*), Bilthoven, Rijksinstituut voor Volksgezondheid en Milieu, available at: [www.nationaalkompas.nl](http://www.nationaalkompas.nl) . [↑](#footnote-ref-11)
12. Federation of Patients and Consumer Organisations in the Netherlands (*Nederlandse Patiënten Consumenten Federatie*) (2014), *Care map the Netherlands* (ZorgkaartNederland), Utrecht, Nederlandse Patiënten Consumenten Federatie, available at [www.zorgkaartnederland.nl](http://www.zorgkaartnederland.nl) . [↑](#footnote-ref-12)
13. Federation of Patients and Consumer Organisations in the Netherlands (*Nederlandse Patiënten Consumenten Federatie*) (2014), *Care map the Netherlands* (ZorgkaartNederland), Utrecht, Nederlandse Patiënten Consumenten Federatie, available at [www.zorgkaartnederland.nl](http://www.zorgkaartnederland.nl) . [↑](#footnote-ref-13)
14. Ngo, D. and Brink, M. (2014), *Sectorrapport ggz 2012. Feiten en cijfers over een sector in beweging* [Sectoral report mental health care 2012. Facts and figures about a sector in transition - unofficial translation] , Amersfoort, 2012, available at: [www.ggznederland.nl/uploads/assets/Sectorrapport%202012-web.pdf](http://www.ggznederland.nl/uploads/assets/Sectorrapport%202012-web.pdf) . [↑](#footnote-ref-14)
15. Netherlands, National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*) (2014), Dutch National Atlas of Public Health (*Nationale Atlas Volksgezondheid*), Bilthoven, *Rijksinstituut voor Volksgezondheid en Milieu*, available at: [www.zorgatlas.nl](http://www.zorgatlas.nl) . [↑](#footnote-ref-15)
16. Netherlands, National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*) (2014), Dutch National Atlas of Public Health (*Nationale Atlas Volksgezondheid*), Bilthoven, *Rijksinstituut voor Volksgezondheid en Milieu*, available at: [www.zorgatlas.nl](http://www.zorgatlas.nl) . [↑](#footnote-ref-16)
17. Netherlands, National Institute of Public Health and the Environment (*Rijksinstituut voor Volksgezondheid en Milieu*) (2014), Dutch National Atlas of Public Health (*Nationale Atlas Volksgezondheid*), Bilthoven, *Rijksinstituut voor Volksgezondheid en Milieu*, available at: [www.zorgatlas.nl](http://www.zorgatlas.nl) . [↑](#footnote-ref-17)
18. Federation of Patients and Consumer Organisations in the Netherlands (*Nederlandse Patiënten Consumenten Federatie*) (2014), *Care map the Netherlands* (ZorgkaartNederland), Utrecht, Nederlandse Patiënten Consumenten Federatie, available at [www.zorgkaartnederland.nl](http://www.zorgkaartnederland.nl) . [↑](#footnote-ref-18)
19. Federation of Patients and Consumer Organisations in the Netherlands (*Nederlandse Patiënten Consumenten Federatie*) (2014), *Care map the Netherlands* (ZorgkaartNederland), Utrecht, Nederlandse Patiënten Consumenten Federatie, available at [www.zorgkaartnederland.nl](http://www.zorgkaartnederland.nl) . [↑](#footnote-ref-19)
20. Netherlands, 2015 Social Support Act (*Wet maatschappelijke ondersteuning 2015*), 9 July 2014, available at: <http://wetten.overheid.nl/BWBR0035362/geldigheidsdatum_01-05-2015> . [↑](#footnote-ref-20)
21. Netherlands, Long-Term Care Act (*Wet langdurige zorg),* 4 December 2014, available at: <http://wetten.overheid.nl/BWBR0035917/geldigheidsdatum_01-05-2015> . [↑](#footnote-ref-21)
22. Netherlands, Ministry of Health, Welfare and Sport (*Ministerie van Volksgezondheid, Welzijn en Sport*) (2015), 'Gebruik persoonsgebonden budget',Web page, available at: [www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-persoonsgebonden-budget](http://www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-persoonsgebonden-budget) . [↑](#footnote-ref-22)
23. Netherlands, Ministry of Health, Welfare and Sport (*Ministerie van Volksgezondheid, Welzijn en Sport*) (2015), 'Gebruik zorg zonder verblijf',Web page, available at: [www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-zorg-zonder-verblijf](http://www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-zorg-zonder-verblijf) . [↑](#footnote-ref-23)
24. Netherlands, Ministry of Health, Welfare and Sport (*Ministerie van Volksgezondheid, Welzijn en Sport*) (2015), 'Gebruik zorg zonder verblijf',Web page, available at: / [www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-zorg-zonder-verblijf](http://www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-zorg-zonder-verblijf) . [↑](#footnote-ref-24)
25. Netherlands, Ministry of Health, Welfare and Sport (*Ministerie van Volksgezondheid, Welzijn en Sport*) (2015), 'Gebruik zorg met verblijf', available at:

    <http://www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-zorg-met-verblijf> . [↑](#footnote-ref-25)
26. Netherlands, Ministry of Health, Welfare and Sport (*Ministerie van Volksgezondheid, Welzijn en Sport*) (2015), 'Volledig pakket thuis', available at:

    [www.monitorlangdurigezorg.nl/over-mlz/begrippen/volledig-pakket-thuis](http://www.monitorlangdurigezorg.nl/over-mlz/begrippen/volledig-pakket-thuis) . [↑](#footnote-ref-26)
27. Netherlands, Ministry of Health, Welfare and Sport (*Ministerie van Volksgezondheid, Welzijn en Sport*) (2015), 'Gebruik zorg zonder verblijf',Web page, available at: [www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-zorg-zonder-verblijf](http://www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-zorg-zonder-verblijf) . [↑](#footnote-ref-27)
28. Netherlands, Ministry of Health, Welfare and Sport (*Ministerie van Volksgezondheid, Welzijn en Sport*) (2015), 'Gebruik zorg zonder verblijft',Web page, available at: / [www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-zorg-zonder-verblijf](http://www.monitorlangdurigezorg.nl/kerncijfers/gebruik/gebruik-zorg-zonder-verblijf) . [↑](#footnote-ref-28)
29. Netherlands, Centre for Care Assessment (*Centrum Indicatiestelling Zorg or CIZ*) (2015), CIZ Basisrapportage AWBZ, available at: <http://ciz.databank.nl/report/awbz.html> . [↑](#footnote-ref-29)
30. Netherlands, Youth Act (*Jeugdwet*), Chapter 5, available at: <http://wetten.overheid.nl/BWBR0034925/Hoofdstuk5/geldigheidsdatum_18-05-2015> . [↑](#footnote-ref-30)
31. Foster care Netherlands, (*Pleegzorg Nederland*) (2015), 'Organisaties voor pleegzorg', Webpage, available at: [www.pleegzorg.nl/pleegzorgorganisaties/](http://www.pleegzorg.nl/pleegzorgorganisaties/) . [↑](#footnote-ref-31)
32. Fostercare Netherland (*Pleegzorg Nederland*) (2014), Factsheet pleegzorg Nederland, Utrecht, Pleegzorg Nederland, available at: [www.pleegzorg.nl/media/uploads/over-pleegzorg/2013\_factsheet\_pleegzorg\_def.pdf](http://www.pleegzorg.nl/media/uploads/over-pleegzorg/2013_factsheet_pleegzorg_def.pdf). [↑](#footnote-ref-32)
33. Netherlands Statistics (*Centraal Bureau voor de Statitiek*) (2013), '220 duizend Nederlanders voelen zich zwaar belast door mantelzorg', News release 22 April 2013, available at: [www.cbs.nl/nl-NL/menu/themas/gezondheid-welzijn/publicaties/artikelen/archief/2013/2013-027-pb.htm](http://www.cbs.nl/nl-NL/menu/themas/gezondheid-welzijn/publicaties/artikelen/archief/2013/2013-027-pb.htm) . [↑](#footnote-ref-33)
34. De Boer, A. & De Klerk, M. (2013), Informele zorg in Nederland. Een literatuurstudie naar mantelzorg en vrijwilligerswerk in de zorg [Informal care in the Netherlands. Literature review of informal care and and volunteering in the care sector; Unofficcial tranlsation], The Hague, The Netherlands Institute for Social Research (SCP), available at: [www.scp.nl/dsresource?objectid=34913&type=org](http://www.scp.nl/dsresource?objectid=34913&type=org) . [↑](#footnote-ref-34)
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36. Boonzaaijer, G. Van der Erf. S. & Heida, J.P. (2015), *Acute Geestelijke Gezondheidszorg: Knelpunten en verbetervoorstellen in de keten, The Hague,*

    *Strategies in Regulated Markets, available at:* [*www.rijksoverheid.nl/bestanden/documenten-en-publicaties/rapporten/2015/02/11/acute-geestelijke*-gezondheidszorg-knelpunten-en-verbetervoorstellen-in-de-keten/acute-geestelijke-gezondheidszorg-knelpunten-en-verbetervoorstellen-in-de-keten.pdf](http://www.rijksoverheid.nl/bestanden/documenten-en-publicaties/rapporten/2015/02/11/acute-geestelijke-gezondheidszorg-knelpunten-en-verbetervoorstellen-in-de-keten/acute-geestelijke-gezondheidszorg-knelpunten-en-verbetervoorstellen-in-de-keten.pdf) . [↑](#footnote-ref-36)
37. Oranjefonds (2015), 'Wat zijn maatjesprojecten?', Web page, available at: [www.oranjefonds.nl/wat-zijn-maatjesprojecten](http://www.oranjefonds.nl/wat-zijn-maatjesprojecten) . [↑](#footnote-ref-37)