

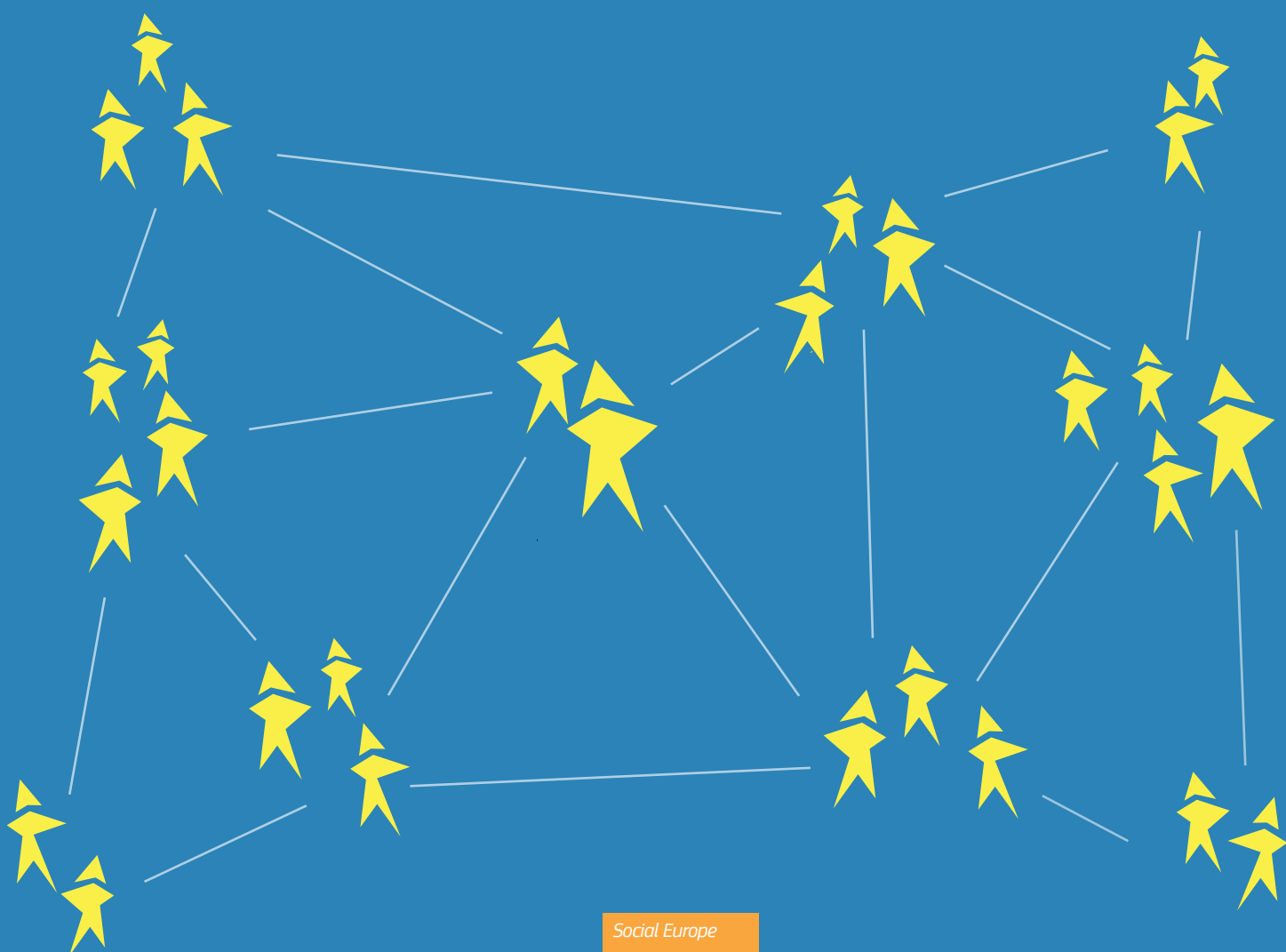


EUROPEAN SOCIAL POLICY NETWORK (ESPN)

# Social protection for people with disabilities

Netherlands

Luna van Dijk



Social Europe

**EUROPEAN COMMISSION**

Directorate-General for Employment, Social Affairs and Inclusion  
Directorate D — Social Rights and Inclusion  
Unit D.2 — Social Protection

*Contact:* Flaviana Teodosiu

E-mail: [flaviana.teodosiu@ec.europa.eu](mailto:flaviana.teodosiu@ec.europa.eu)

*European Commission*  
*B-1049 Brussels*

# **European Social Policy Network (ESPN)**

## **ESPN Thematic Report on Social protection for people with disabilities**

### **The Netherlands**

**2022**

*Luna van Dijk*

The European Social Policy Network (ESPN) was established in July 2014 on the initiative of the European Commission to provide high-quality and timely independent information, advice, analysis and expertise on social policy issues in the European Union and neighbouring countries.

The ESPN brings together into a single network the work that used to be carried out by the European Network of Independent Experts on Social Inclusion, the Network for the Analytical Support on the Socio-Economic Impact of Social Protection Reforms (ASISP) and the MISSOC (Mutual Information Systems on Social Protection) secretariat.

The ESPN is managed by the Luxembourg Institute of Socio-Economic Research (LISER) and APPLICA, together with the European Social Observatory (OSE).

For more information on the ESPN, see:

<http://ec.europa.eu/socialmain.jsp?catId=1135&langId=en>

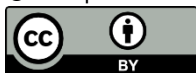
#### **LEGAL NOTICE**

The information and views set out in this document are those of the authors and do not necessarily reflect the official opinion of the European Union. Neither the European Union institutions and bodies nor any person acting on their behalf may be held responsible for the use which may be made of the information contained therein. More information on the European Union is available on the Internet (<http://www.europa.eu>).

Manuscript completed in September 2022

The European Commission is not liable for any consequence stemming from the reuse of this publication.  
Luxembourg: Publications Office of the European Union, 2022

© European Union, 2022



The reuse policy of European Commission documents is implemented by the Commission Decision 2011/833/EU of 12 December 2011 on the reuse of Commission documents (OJ L 330, 14.12.2011, p. 39). Except otherwise noted, the reuse of this document is authorised under a Creative Commons Attribution 4.0 International (CC-BY 4.0) licence (<https://creativecommons.org/licenses/by/4.0/>). This means that reuse is allowed provided appropriate credit is given and any changes are indicated.

For any use or reproduction of elements that are not owned by the European Union, permission may need to be sought directly from the respective rightholders.

#### **QUOTING THIS REPORT**

Van Dijk, L. (2022). *ESPN Thematic Report on Social protection for people with disabilities – The Netherlands*, European Social Policy Network (ESPN), Brussels: European Commission.

## CONTENTS

SUMMARY .....	4
1 ACCESS TO DISABILITY-SPECIFIC INCOME SUPPORT .....	5
1.1 Disability-specific benefits/pensions available to working-age people .....	5
1.1.1 <i>Wajong-uitkering</i> (Disability Assistance Act for Young People with Disabilities) 5	
1.1.2 <i>IVA-uitkering</i> (Income provision scheme for fully occupationally incapacitated people).....	6
1.2 Disability-specific old-age pension schemes .....	8
1.3 Income support aimed at covering disability-related healthcare and housing expenses .....	8
1.3.1 Healthcare.....	8
1.3.2 Housing.....	9
2 ACCESS TO SOME KEY GENERAL SOCIAL PROTECTION CASH BENEFITS.....	10
2.1 Old-age benefits.....	10
2.1.1 AOW (General Old-Age Pensions Act).....	10
2.1.2 AIO (supplementary income provision for older people).....	10
2.2 Unemployment benefits .....	10
2.2.1 <i>WW-uitkering</i> (Unemployment Benefit Act).....	10
2.3 Guaranteed minimum income schemes and other social assistance benefits.....	11
2.3.1 <i>Bijstandsuitkering</i> (Social assistance benefit) .....	11
3 PROVISION OF ASSISTIVE TECHNOLOGY AND PERSONAL ASSISTANCE.....	11
3.1 <i>Wet Maatschappelijke Ondersteuning</i> (Social Support Act).....	11
3.2 <i>Zorgverzekeringswet</i> (Healthcare Insurance Act 2005).....	12
3.3 <i>Wet Werk en Inkomen naar Arbeidsvermogen</i> (Work and Income According to Labour Capacity Act 2005) .....	12
3.4 <i>Wet Langdurige Zorg</i> (Long-Term Care Act 2016).....	12
4 NATIONAL DEBATES, REFORMS AND RECOMMENDATIONS.....	13
4.1 National debates .....	13
4.2 Recent reforms and reforms currently in the pipeline .....	13
4.2.1 Disability Assistance Act for Young People with Disabilities.....	13
4.2.2 Work and Income According to Labour Capacity Act .....	14
4.2.3 Participation Act .....	14
4.3 Good practice and recommendations on how to tackle gaps and obstacles.....	15
REFERENCES .....	16

## Summary

This report analyses some important cash and in-kind social protection provisions available to adults with disabilities (i.e. aged 18 or above). There are other important provisions available to them in other areas not covered in this report. In line with Article 1 of the UN Convention on the Rights of Persons with Disabilities, "people with disabilities" should be understood as "those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others".

People with disabilities who are involuntarily unemployed to the extent that they are not able to work or only able to work partially can claim a Wajong benefit (*Wajong-uitkering* – Disability Assistance Act for Young People with Disabilities) or an IVA benefit (*IVA-uitkering* – income provision scheme for fully occupationally incapacitated people). The Wajong benefit focuses on people diagnosed with disabilities before they reached the age of 18, and the IVA benefit on those diagnosed after the age of 18. For the Wajong benefit, the level of disability (to determine whether someone can claim this benefit) is set between 80-100%, and for the IVA benefit it is set at a minimum of 35%.

For people with disabilities, there are cash benefits to help them pay their healthcare expenses: the young disabled person's tax credit and the *Tegemoetkoming Arbeidsongeschikten* (disability allowance). Claimants of the young disabled person's tax credit should need help in finding a job or be eligible for a sickness or disability benefit.

For housing expenses, people with disabilities can claim a personal budget through the *Wet Maatschappelijke Ondersteuning* (WMO – Social Support Act) to make adaptations to their homes.

The General Old-Age Pensions Act and the AIO (supplementary income provision for older people) provide people in the Netherlands with a universal basic income when they have reached the age of 67. For both there are no specific eligibility conditions or additional forms of compensation for people with disabilities.

People in employment and those who are involuntarily unemployed are eligible for benefits under the Unemployment Insurance Act. There is no additional amount for people with disabilities.

For people with disabilities who are partially able to work, the *bijstandsuitkering* (social assistance benefit) has replaced the Wajong benefit. This benefit is the same for everyone and has no additions for people with disabilities.

For the benefits that are universal for everyone and do not differentiate between whether or not people have disabilities, problems can arise concerning permanent low income for people with disabilities. This is mostly due to them having additional living and healthcare expenses while receiving the same amount of cash benefit as people that do not have these extra expenses.

With regard to assistive technology (including devices) and personal assistance, there are four acts that govern their provision. The specific regulations that state under what conditions an assistive technology and personal assistance are to be provided, by whom and based on which act, are explained in the acts themselves and in guidelines such as the Wlz (*Wet Langdurige Zorg* – Long-Term Care Act 2016) compass by the National Health Care Institute (*Zorginstituut Nederland*).

There are two important national debates regarding social protection for people with disabilities: these concern medical assessment under the *Wet Maatschappelijke Ondersteuning* (Work and Income According to Labour Capacity Act – WIA) and the stricter eligibility conditions and assessment framework for the Wajong and IVA benefits. There are also three recent and/or future reforms worth mentioning regarding the Disability Assistance Act for Young People with Disabilities, the WIA and the Participation Act. Furthermore, good practice within the Netherlands can be ascribed mostly to the large discretionary freedom of municipalities in administering the WMO and Participation Act. This takes the form of supporting their citizens with disabilities by helping them to find work or providing devices, cash benefits and other forms of support.

## 1 Access to disability-specific income support

Section 1 maps and assesses the access to **disability-specific** cash benefits/pensions, whether contributory or non-contributory.

### 1.1 Disability-specific benefits/pensions available to working-age people

This section describes the forms of access people with disabilities have to disability assistance schemes.

#### 1.1.1 *Wajong-uitkering* (Disability Assistance Act for Young People with Disabilities)

##### a) Eligibility conditions

Disability-related qualifying criteria: A person's earnings capacity reflects their "occupational disability level", which for the *Wajong-uitkering* (Wajong benefit<sup>1</sup>) is set at 80-100%. This means that only people with an earnings capacity equal to or below 20% are eligible for the benefit (Smits, 2018, p. 16). The assessment to determine the occupational disability level is described below under the disability assessment framework.

Age: This benefit is for young people with disabilities that arose before they reached the age of 18. The benefit stops when they reach the retirement age.

Nationality and/or residency: The claimants must live in the Netherlands.<sup>2</sup> When they move abroad the benefit stops.

Waiting period: None (i.e. it is granted from the moment the disability is certified).

Contributory history: None (i.e. no minimum contributory record is required).

Level of financial resources: None (i.e. the benefit is not means-tested).

Other: The claimants receive this benefit for as long as they are unable to work due to their disability. The benefit stops when the claimants can work. The benefit is also stopped when claimants are detained for longer than a month or do not follow the rules laid down by the Employee Insurance Agency (UWV) concerning the benefit.<sup>3</sup>

Gaps and/or obstacles: No evidence (reports, papers...) was identified on gaps/obstacles related to this benefit.

##### b) Disability assessment framework

Type of assessment: A medical assessment and a functional capacity assessment, to assess the disability and the extent to which a person can work.

Responsible authority: The assessment is carried out by the UWV.

Method: The assessor (a medical doctor) can rely on medical files provided by the applicant or choose to interview and examine them face-to-face. Based on these methods, the doctor assesses whether the applicant can perform theoretically available

---

<sup>1</sup> "Wajong" is a contraction of *Wet arbeidsongeschiktheidsvoorziening jonggehandicapten* (Disability Assistance Act for Young People with Disabilities).

<sup>2</sup> These conditions apply to EU and non-EU nationals as well as to people with refugee status if they have a Dutch residency permit

<sup>3</sup> When receiving the Wajong benefit, claimants must adhere to certain rules, such as: always showing up for their UWV appointments; always having a valid identification document; and always providing the UWV with the correct information about themselves. More rules can be found here: <https://www.uwv.nl/particulieren/arbeidsbeperkt/wajong/wijzigingen-plichten-rechten>.

jobs in the labour market that are in line with their functional limits and level of education. They do this by using a database of all available jobs in the labour market, which includes detailed descriptions of work tasks and wages. Based on this, the doctor decides whether the applicant can theoretically perform such a job, and then divides the corresponding wage level by the minimum wage in order to obtain their "earnings capacity". This indicates what percentage of the minimum wage the person is theoretically able to earn by working. If a person is theoretically able to earn 20% or less of the minimum wage, they are eligible for this benefit.

Supporting evidence: None.

Assessor: The assessment is carried out by a medical doctor.

Decision-maker: The decision is made by the medical doctor. After applying for the benefit, a decision as to whether the applicant is eligible or not will be made within eight weeks.<sup>4</sup>

Critical analysis: Not documented.

### c) Benefit entitlements

Level of the benefit: The Wajong benefit is a percentage of the minimum wage and depends on the degree to which a person is incapacitated for work (Oostveen *et al.*, 2021, p 77). A person aged 21 or over who cannot work, and does not have other sources of income, receives a monthly benefit of €1,293.74 in 2022.<sup>5</sup>

Duration of the benefit: The benefit claimant receives this benefit until they can work fully again or reach the retirement age.

Interactions with other income or other income-related benefits: Wajong benefit claimants who can partly work still receive the benefit and may keep part of their earnings from work. If they are deemed able to work according to the functional 'capacity' assessment (see above for a description of this assessment), their Wajong benefit will be 70% of the minimum wage, and they may keep 30 cents of every additional €1 they make by working. If they are deemed unable to work according to this assessment, their Wajong benefit will be 75% of the minimum wage<sup>6</sup>.

Challenges: No evidence (reports, papers...) was identified on adequacy challenges related to this benefit.

### 1.1.2 IVA-uitkering (Income provision scheme for fully occupationally incapacitated people)

The IVA-uitkering (income provision scheme for fully occupationally incapacitated people – IVA<sup>7</sup>) is part of the *Wet Werk en Inkomen naar Arbeidsvermogen* (Work and Income According to Labour Capacity Act – WIA), which provides income support and reintegration services.

#### a) Eligibility conditions

Disability-related qualifying criteria: The minimum occupational disability level in order to be eligible for an IVA benefit is 35%. This means that people who are able to perform

<sup>4</sup> <https://www.uwv.nl/en/individuals/invalidity-benefit/applying-for>

<sup>5</sup> <https://www.uwv.nl/particulieren/rekenhulpen/hoog-hoog-is-mijn-wajong-uitkering/index.aspx>

<sup>6</sup> It is possible for some people deemed unable to work according to the functional 'capacity' assessment to do some work and thus receive some earnings. In this case, they may keep 25 cents of every additional €1 they make by working.

<sup>7</sup> "IVA" is a contraction of *Inkomensvoorziening Volledig Arbeidsongeschikten* (income provision scheme for fully occupationally incapacitated people).



jobs that earn more than 65% of their previous wage are not eligible for an IVA benefit (Smits, 2018, p. 16).

Age: This benefit is for claimants whose disabilities were diagnosed after the age of 18.

Nationality and/or residency: The claimant must live in the Netherlands to claim this benefit. The benefit ends when the claimant lives abroad for longer than three months.<sup>8</sup>

Waiting period: This benefit can be applied for after a minimum of three weeks, and up to a maximum of 68 weeks, of illness or disability. An application can only be submitted once. If the application is rejected, it cannot be resubmitted for another two years.<sup>9</sup>

Contributory history: None (i.e. no minimum contributory record is required).

Level of financial resources: None (i.e. the benefit is not means-tested).

Other: Benefit claimants can apply for this benefit when they have been registered as being wholly and permanently incapacitated for the previous two years.

Gaps and/or obstacles: No evidence (reports, papers...) was identified on gaps/obstacles related to this benefit.

## **b) Disability assessment framework**

Type of assessment: A medical assessment and a functional capacity assessment, to assess the disability and the extent to which a person can work.

Responsible authority: The assessment is provided by the UWV.

Method: The assessor (a medical doctor) can rely on medical files provided by the applicant or choose to interview and examine them in person. Based on these methods, the doctor assesses whether the applicant can perform theoretically available jobs in the labour market that are in line with their functional limits and level of education. They do this by using a database of all available jobs in the labour market, containing detailed descriptions of work tasks and wages. Based on this, the doctor decides whether the applicant can theoretically perform such a job, and then divides the corresponding wage level by the last wage the person earned, to obtain their "earnings capacity". This indicates what percentage of the minimum wage the person is theoretically able to earn by working.

Supporting evidence: None.

Assessor: The assessment is carried out by a medical doctor.

Decision-maker: The decision is made by the medical doctor. After applying for the benefit, the decision as to whether the applicant is eligible or not will be made within eight weeks.<sup>10</sup>

Critical analysis: Not documented.

## **c) Benefit entitlements**

Level of the benefit: Claimants receive a benefit that depends on the income they earned in the year before becoming ill or disabled, whether they still have a job, and how many hours they are still able to work. For claimants who do not work, the IVA benefit equals 75% of the last wage the person earned, up to a wage level of €4,975.53 per month.

---

<sup>8</sup> An exception is when the person lives in a country that has concluded a treaty with the Netherlands on the payment of benefits. These conditions also apply to EU nationals, non-EU nationals and people with refugee status who have a Dutch residence permit.

<sup>9</sup> <https://www.uwv.nl/particulieren/ziek/ziek-wia-uitkering/wia-uitkering-aanvragen/detail/wanneer-vraag-ik-een-wia-uitkering-aan/vervroegd-wia-iva-aanvragen>

<sup>10</sup> <https://www.uwv.nl/en/individuals/invalidity-benefit/applying-for>

All earnings above this maximum wage level are not considered when calculating the IVA benefit.<sup>11</sup>

Duration of the benefit: The benefit stops when the claimant can fully work again, reaches the retirement age or is detained.

Interactions with other income or other income-related benefits: When an IVA benefit claimant decides to start working again, their benefit is withheld in whole or in part. If the claimant starts to work again and their current work income is 20% or less than their previous work income, they will keep 30% of this income, added to 75% of the IVA benefit they were entitled to.

Challenges: No evidence (reports, papers...) was identified on adequacy challenges related to this benefit.

## 1.2 Disability-specific old-age pension schemes

No statutory disability-specific old-age pension schemes exist in the Netherlands. The pensions of people with disabilities are provided via the general pension system (please refer to Section 2.1).

## 1.3 Income support aimed at covering disability-related healthcare and housing expenses

### 1.3.1 Healthcare

#### 1.3.1.1 Tegemoetkoming Arbeidsongeschikten (Disability allowance)

##### a) Brief description

The *Tegemoetkoming Arbeidsongeschikten* (disability allowance) provides a yearly cash benefit to people with disabilities to cover their extra healthcare expenses. Claimants should have a right to either an IVA, WAO<sup>12</sup>, Wajong or WAZ benefit<sup>13</sup> in order to be eligible; and they should also be incapacitated by 35% or more, or be entitled to help to find or keep a job.<sup>14</sup>

##### b) Main gaps/obstacles

People who are (according to the UWV assessment framework described in Section 1.1) incapacitated by less than 35%, but are still not able to work, do not get this allowance. These people might get into financial trouble since they are not eligible for this benefit but also not able to work. In addition, this benefit is only for people who have a right to an IVA, WAO, Wajong or WAZ benefit, so not everyone is eligible.

##### c) Main adequacy challenges

None.

---

<sup>11</sup> <https://www.uwv.nl/particulieren/bedragen/detail/maximumdagloon>

<sup>12</sup> The WAO is a contraction of *Wet op de Arbeidsongeschiktheidsverzekering* (Disablement Benefits Act). This insurance has been replaced by the WIA (which the IVA is part of). Only people that already receive this benefit keep on receiving it.

<sup>13</sup> WAZ is a contraction of *Wet Arbeidsongeschiktheidsverzekering Zelfstandigen* (Self-employed Persons Disablement Benefits Act). Because this insurance has been abolished since August 1, 2004, only people that were self-employed and occupationally incapacitated before August 1, 2004, can still receive this benefit.

<sup>14</sup> <https://www.uwv.nl/particulieren/overige-onderwerpen/tegemoetkoming-arbeidsongeschikten/index.aspx>

## 1.3.2 Housing

### 1.3.2.1 Wet Maatschappelijke Ondersteuning (Social Support Act)

#### a) Brief description

Municipalities must ensure that people can continue to live at home for as long as possible. The municipality provides support at home through the *Wet Maatschappelijke Ondersteuning* (WMO – Social Support Act). Municipalities are responsible for supporting people who are not self-reliant. This form of support depends on a claimant's personal situation. When someone turns to the municipality for support under the WMO, the municipality must investigate their personal situation. In case of emergencies, there is no time for an investigation. The municipality must then help within 24 to 48 hours. In such cases, the municipality arranges a temporary customised service such as (extra) domestic help, guidance at home or care elsewhere. Under this act, people with disabilities can claim a personal budget, which they can use for home adaptations as well as some healthcare expenses such as care and assistance (as mentioned in Section 1.3.1).<sup>15</sup> To receive WMO support the recipient must pay a contribution of €19 per month if they are aged 18 or over. This contribution or "subscription fee" applies to all applicants (people who are not in a condition to live independently).<sup>16</sup>

#### b) Main gaps/obstacles

When someone applies for WMO support, the municipality has a maximum of six weeks to investigate their personal situation and reach a conclusion. In case of emergencies only, the municipality reacts within 24 or 48 hours. The normal maximum of six weeks, however, is quite a long period for people who are not in an emergency but would benefit from receiving WMO support as soon as possible.<sup>17</sup>

#### c) Main adequacy challenges

The personal budget can only be used for specific types of care.<sup>18</sup> This can result in people still not receiving what they really need to live independently. Municipalities conduct an annual client satisfaction survey for recipients of WMO support. However, the results of this are not aggregated on a national level.<sup>19</sup>

The fixed contribution for WMO support is intended to make support affordable for people with low and middle incomes. According to the municipalities, this also attracts people with higher incomes, since WMO support does not have an income requirement and the contribution is considerably lower for them, with a maximum of €19 per month. They do not therefore contribute according to their income, thus putting pressure on WMO support. The government therefore wants to work towards a fairer personal contribution for domestic help with national standards and with an eye on affordability for people on low and middle incomes. This keeps help and support available.<sup>20</sup>

---

<sup>15</sup> <https://www.rijksoverheid.nl/onderwerpen/zorg-en-ondersteuning-thuis/wmo-2015>

<sup>16</sup> <https://www.rijksoverheid.nl/onderwerpen/zorg-en-ondersteuning-thuis/vraag-en-antwoord/eigen-bijdrage-wmo-2015>

<sup>17</sup> <https://www.rijksoverheid.nl/onderwerpen/zorg-en-ondersteuning-thuis/vraag-en-antwoord/ondersteuning-gemeente-wmo-2015-aanvragen>

<sup>18</sup> For example: personal care, nursing, individual guidance, group guidance, transport to and from daycare, domestic help, overnight accommodation: <https://www.zilverenkruis.nl/zorgkantoor/klanten/pgb/welke-zorg-met-budget-betalen>.

<sup>19</sup> For example, in the municipality of Pekela in 2020, 88% of respondents said they knew where to apply for WMO support, 83% said they were helped quickly after applying, 87% said they felt they were taken seriously, and 91% said the support they got was of good quality: [https://www.pekela.nl/Onderwerpen/Actueel/Nieuws/Archief/2021/Positieve\\_resultaten\\_clientvervalsnderzoek\\_Wmo/Cli\\_ntervaringsonderzoek\\_Wmo\\_2020\\_Gemeente\\_Pekela](https://www.pekela.nl/Onderwerpen/Actueel/Nieuws/Archief/2021/Positieve_resultaten_clientvervalsnderzoek_Wmo/Cli_ntervaringsonderzoek_Wmo_2020_Gemeente_Pekela).

<sup>20</sup> <https://www.rijksoverheid.nl/regering/coalitieakkoord-omzien-naar-elkaar-vooruitkijken-naar-de-toekomst>

## 2 Access to some key general social protection cash benefits

This section describes the situation regarding access by people with disabilities to social protection benefits for risks other than disability.

### 2.1 Old-age benefits

#### 2.1.1 AOW (General Old-Age Pensions Act)

##### a) Eligibility conditions

This scheme has no eligibility conditions that differ for people with disabilities.

##### b) Additional amount/compensation included and adequacy issues

As soon as someone reaches the retirement age, all other disability benefits are terminated. People with disabilities do not receive additional pensions or compensation relative to people without disabilities.

##### c) Gaps/obstacles

When people with disabilities reach the retirement age their disability benefit is changed to an AOW pension. People with disabilities are entitled to the same amount of pension as other people without disabilities. However, the costs of living and healthcare are higher for people with disabilities, and they have not been able to build up an occupational pension to supplement their AOW pension. In addition, the amount of pension might be lower than their initial disability benefit was. This can result in people with disabilities experiencing financial difficulties after retirement.

#### 2.1.2 AIO (supplementary income provision for older people)

##### a) Eligibility conditions

This scheme has no eligibility conditions that differ for people with disabilities.

##### b) Additional amount/compensation included and adequacy issues

There is no additional amount/compensation for people with disabilities within this scheme.

##### c) Gaps/obstacles

The gaps/obstacles mentioned under the AOW also apply to AIO support. Moreover, the AIO only supplements income up to the social minimum, rather than the full AOW level. This means that people who receive an AIO supplement face a larger (possible) drop in income upon retirement.

### 2.2 Unemployment benefits

#### 2.2.1 WW-uitkering (Unemployment Benefit Act)

##### a) Eligibility conditions

This scheme has no eligibility conditions that differ for people with disabilities. People with disabilities only have a right to this benefit if they have a recent employment history. Otherwise, they can claim other benefits that are aimed specifically at people with disabilities who are not able to work, such as the benefits described in Section 1.1.

##### b) Additional amount/compensation included and adequacy issues

There is no additional amount/compensation for people with disabilities.

##### c) Gaps/obstacles

None.

## 2.3 Guaranteed minimum income schemes and other social assistance benefits

### 2.3.1 Bijstandsuitkering (Social assistance benefit)

#### a) Eligibility conditions

The *Bijstandsuitkering* (social assistance benefit) scheme (under the Participation Act) has no eligibility conditions that differ for people with disabilities.

#### b) Additional amount/compensation included and adequacy issues

People with disabilities do not get an additional amount/compensation within this scheme. The social assistance benefit does provide extra support to claimants with disabilities to help them find and keep employment. This extra support, for example, includes job coaching, workplace adaptations or wage subsidies for the employer.<sup>21</sup>

#### c) Gaps/obstacles

Whereas young people with disabilities who have some earnings capacity could previously apply for a Wajong benefit, they now rely on the social assistance benefit (people who already received a Wajong benefit before 2015 keep their benefit).<sup>22</sup> The social assistance benefit is generally lower than the Wajong benefit. In addition, the Participation Act does not provide claimants with the same possibilities as Wajong recipients to keep earnings from work while keeping their benefit. This means that the social assistance benefit does not provide the same level of income support as the Wajong benefit.

## 3 Provision of assistive technology and personal assistance

In this section, the focus is on the provision of assistive technology (including devices) and personal assistance. There are four acts that govern the provision of devices such as lifts or wheelchairs and personal assistance. These are the WMO, the Healthcare Insurance Act, the WIA and the Wlz (*Wet Langdurige Zorg – Long-Term Care Act 2016*). The specific regulations that state under what conditions assistive technology and personal assistance are to be provided, by whom and based on which act, are explained in the acts themselves and in guidelines such as the Wlz compass by the National Health Care Institute (*Zorginstituut Nederland*). There are no specific gaps and/or obstacles yet known for people with disabilities in accessing forms of support through these acts.

### 3.1 *Wet Maatschappelijke Ondersteuning (Social Support Act)*

The WMO makes municipalities responsible for providing and financing social support for people with disabilities over 18. This includes providing care, assistance, or devices. For children this is regulated via the Youth Care Act. Assistance through the WMO is provided to people with disabilities as well as without disabilities.

Municipalities deliver most provisions in-kind in the form of services. This may include adaptations to the house, such as installing an elevator/lift, an adapted kitchen, alert devices, or means for local transport, such as wheelchairs or adapted bikes. The provision is income- and means-tested, and municipalities have a certain freedom in deciding which devices and services will or will not be provided. This is done by investigating the applicant's personal situation. Claimants must be registered within the municipality as residents and be legally residing within the Netherlands.

---

<sup>21</sup> <https://www.rijksoverheid.nl/onderwerpen/participatiewet/vraag-en-antwoord/hoe-met-arbeidsbeperking-bij-werkgever-aan-de-slag>

<sup>22</sup> <https://www.rijksoverheid.nl/onderwerpen/bijstand/vraag-en-antwoord/wanneer-heb-ik-recht-op-bijstand>

Personal assistance provided under the WMO and Youth Care Act takes the form of “*personal aid to clean the house, to accompany people with disabilities who need supervision to keep them safe or who need help performing daily activities which can be characterised as personal care. This would be care in the form of help coming out of bed, getting dressed, washed, help with preparing food etc.*” (Smits, 2017, p 12).

### **3.2 Zorgverzekeringswet (Healthcare Insurance Act 2005)**

The *Zorgverzekeringswet* (Healthcare Insurance Act 2005) states that healthcare insurance companies should provide medical devices when needed. This is usually assessed by a doctor. This provision is part of the basic insurance package – which covers all citizens, as health insurance is obligatory in the Netherlands. People who apply for any such device (or medical care in general based on the basic healthcare package) are subject to paying a healthcare deduction, which is €385 in 2022. Depending on the types of devices being provided, an extra contribution may be required.

Assistance based on the Health Insurance Act can be provided in the form of medical care at home. Medical care is all care for which nurses should be engaged (which is not personal care). In addition, sign language interpreting for activities outside education or work is considered as medical care, and the provision thereof follows the same rules as other care provided under this act (*Ibid.*, 2017, pp. 12-13). Assistance through this act is provided to people with disabilities as well as without disabilities.

### **3.3 Wet Werk en Inkomen naar Arbeidsvermogen (Work and Income According to Labour Capacity Act 2005)**

Under the WIA, people with disabilities can obtain assistive devices or other support needed for work or education in regular schools. These provisions vary and can include: adapted cars; adapted individual transport (compensation for the costs of an adapted car or compensation for taxi costs); location-bound provisions such as adapted workplaces and ramps; and person-bound devices such as electronic equipment or adaptations to laptops etc. The “usual costs” should be met by the claimant. For example, in the case of adapted transport 14 cents per kilometre is to be paid by the claimant, since this is the average cost of a kilometre of travel by public transport. But the contributions may vary according to the type of device or form of support.

Forms of personal assistance provided under the WIA include, for example, sign language interpreters, and job coaching for people with intellectual disabilities or a psycho-social condition. Assistance under this act is provided to people with disabilities as well as people with temporary illnesses.

Provisions based on this act are restricted to employees only. People with disabilities who have their own company or work in sheltered employment cannot apply for these provisions (*Ibid.*, 2017, p. 13).

### **3.4 Wet Langdurige Zorg (Long-Term Care Act 2016)**

Under the Wlz, residential institutions and care homes are responsible for the provision of assistive or medical devices to their residents. Eligibility for these devices is decided by care-providers and is based on the rule that proper care should be provided. The care provided under this act is somewhat restricted, which means that devices can only be provided for care at the location or during day activities and transport to daycare centres. Within these institutions and homes the residents receive personal assistance/care from care-givers (*Ibid.*, 2017, p. 14). Assistance under this act is provided to people with disabilities as well as without disabilities.



## 4 National debates, reforms and recommendations

### 4.1 National debates

The regional UWV office in Zwolle has decided, contrary to the law, to grant WIA benefits without a medical assessment. This decision was made because of the major shortage of medical examiners. Normally, people can apply for a WIA benefit after two years of sick leave, and subsequently need to be medically examined to be awarded the benefit. In this case, the UWV opted not to carry out this medical examination for a group of 30 applicants aged over 60. The aim was to eliminate the large backlog of medical assessments.<sup>23</sup>

Because of the eligibility conditions and assessment framework for the Wajong and IVA benefits becoming stricter, some people with disabilities become reliant on social assistance benefits based on the Participation Act. The Participation Act is designed to support and encourage people with disabilities to work with regular employers as much as possible (rather than in forms of sheltered employment). In order to facilitate this, the Jobs and Jobs Quota Act (*Wet banenafspraak en quotum arbeidsbeperkten, Wet BQA*) was enacted, which stipulates that 125,000 additional jobs would be created for people with disabilities by 2026. Research shows that people with disabilities who fall under the Participation Act have slightly higher chances of finding employment than those who fall under the Wajong. However, this is often in temporary and part-time jobs. In addition, their incomes have dropped because the social assistance benefit is lower than the Wajong benefit (SCP, 2019). The major trade union FNV has voiced concerns that this group is thus permanently “trapped” in a low-income situation.<sup>24</sup>

### 4.2 Recent reforms and reforms currently in the pipeline

In this section some recent reforms or reforms currently in the pipeline will be described for benefits that have an influence on people with disabilities.

#### 4.2.1 Disability Assistance Act for Young People with Disabilities

Due to the new Wajong Simplification Act, the different types of Wajong benefit have become more similar to one another. The new rules came into effect partly on 1 September 2020 (the first bullet point below), and partly on 1 January 2021 (the last four bullet points).<sup>25</sup>

- If a person follows a course, this will no longer affect their Wajong benefit.
- The amount of a person's Wajong benefit is calculated in a different way. From 15 January 2021 they can see exactly how much their benefit is on their payment specification, which they can find on the UWV website.
- A person can receive a guaranteed amount<sup>26</sup> if their Wajong benefit has become lower due to the new rules.

---

<sup>23</sup> <https://nos.nl/artikel/2412970-uwv-werkte-wachtlijsten-uitkeringen-weg-zonder-beoordeling-arts>

<sup>24</sup> <https://www.binnenlandsbestuur.nl/sociaal/nieuws/mensen-met-arbeidsbeperking-gevangen-in-de.17428916.lynkx#:~:text=De%20bijstand%20werkt%20niet%20voor,werken%20afhankelijk%20van%20een%20bijstandsuitkering>

<sup>25</sup> <https://www.uwv.nl/particulieren/arbeidsbeperkt/veranderingen-wajong/index.aspx>

<sup>26</sup> The rules of the Wajong benefit have changed since 1 January 2021. The UWV now calculates a person's benefit in a new way. To prevent someone's benefit from going down if they also have income, there is now the guarantee amount. This works as follows. The UWV calculates the amount of Wajong benefit using the rules from before 1 January 2021. This is the minimum amount someone will receive: the guarantee amount. The UWV also calculates the amount of someone's Wajong benefit using the new rules. Every month these two amounts are being compared with each other. The claimant always gets the higher amount.

- If a person's Wajong benefit has stopped and their health is deteriorating, they can still receive a Wajong benefit until they reach the retirement age. It does not matter by which complaints this is caused.
- A person can stop their Wajong benefit themselves.

For Wajong benefit claimants there has also been a new reform concerning their guaranteed amount. Since January 2021, after the introduction of the new law, the guaranteed amount remains valid for 12 months after a claimant loses their job. If a Wajong benefit claimant has not found a new job after those 12 months, they can no longer claim that amount. Research by the UWV into the job prospects of Wajong benefit claimants, however, shows that these have decreased. This is most likely due to the COVID-19 crisis, when a lot of businesses had to close temporarily or permanently. The outgoing State Secretary Wiersma has therefore announced that he will give all Wajong benefit claimants who lost their jobs in 2021 the opportunity, until 1 January 2023, to find a new job while retaining the guaranteed amount. After 1 January 2023, the period of 12 months will be applied again.<sup>27</sup>

#### **4.2.2 Work and Income According to Labour Capacity Act**

Proposals in the 2021 coalition agreement "Confidence in the future" included discontinuing the test of whether WIA claimants' earnings capacity has changed in the first five years after accepting a job. The aim of this measure was to remove a barrier for people to start working again and help with the uncertainty about the possible loss of entitlement to a WIA benefit in the event of job loss.<sup>28</sup>

For the WIA, there has also been a recent reform, which means that the UWV will stop reclaiming advances paid to people who had to wait too long for a WIA assessment. The UWV has decided to do this, in consultation with the Ministry of Social Affairs and Employment, because the growing demand for socio-medical assessments and the COVID-19 measures have caused delays to increase significantly. The UWV does not want people to become the victims of this and get into financial problems. People who have already (partly) made the repayment will get that money back from the UWV. No new chargebacks will be made for the time being.<sup>29</sup>

#### **4.2.3 Participation Act**

Under the Participation Act a change was introduced to the benefits employers can receive when hiring an employee with a disability. These benefits are meant to create more jobs for people with disabilities. Before 2019, employers could receive a subsidy on the wage they paid to their employees with disabilities. Now employers can also claim wage dispensation. For the wage subsidy, an employer pays at least the minimum wage to an employee who is not able to earn the minimum wage under the Participation Act (people with an occupational disability). The difference in wage value is compensated by the government in the form of a wage subsidy. For wage dispensation, an employer pays the fair wage value, which can therefore be a wage lower than the minimum wage. Instead of the employer receiving a subsidy, the employee now receives a supplement to this "low wage" from the UWV and/or the municipality as compensation. Wage dispensation was supposed to replace wage subsidy completely, but after national and parliamentary debates it was decided that this was not desirable due to the negative consequences for workers with disabilities. These include a lower income, little incentive to work, limited pension and unemployment benefit coverage, and an increased administrative burden for employees. In addition, this wage dispensation would be means-tested, meaning workers

---

<sup>27</sup> <https://www.nieuwsszw.nl/tijdelijke-verlenging-termijn-garantiebedrag-wajong/>

<sup>28</sup> Letter to Parliament by the minister for social affairs and employment on 'Diverse topics WIA', dated 1 June 2021.

<sup>29</sup> <https://www.uwv.nl/overuwv/pers/persberichten/2021/uwv-stopt-met-terugvorderen-wia-voorschotten.aspx>



with disabilities with large savings or a working partner would not receive it (Oostveen, 2018, p. 2).

### 4.3 Good practice and recommendations on how to tackle gaps and obstacles

In this section good practice and recommendations on how to tackle gaps and obstacles will be discussed.

Good practice within the Netherlands can be ascribed mostly to the large discretionary freedom of municipalities to support their citizens with disabilities with help in seeking work, devices, cash benefits, supports etc. The municipalities base their support on the assessment of the individual situation. You can see this discretionary freedom of municipalities in the operation of the WMO and the Participation Act. In the renewed agenda of the Association of Municipalities (VNG), its aim is to find ways to support people with disabilities, empower them, and enable them to live in their home as long as possible. In a publication the VNG presented 10 types of good practice. The research organisation ZonMw also presented good practice regarding people who are dependent on long-term care, on a website about better care. However, a private association of parents of people with intellectual disabilities also publicised some examples of poor practice (Smits, 2017, p. 42). The decentralisation of care in the case of the WMO and Participation Act (which provide the municipalities with their discretionary freedom) also has its downsides and risks. Not all municipalities (are able to) provide the same types of care. For example, in the municipality of Amsterdam service dogs are not provided through the WMO, but in the municipality of Nieuwegein they are. This means that there are discrepancies in the kind and amount of care people are provided with in different municipalities, which creates inequality. This discrepancy in provision can be ascribed to decentralisation being accompanied by considerable budget cuts.<sup>30</sup>

The recommendations made by Smits are mostly on the monitoring of the needs of people with disabilities (Smits, 2017). The effects of policies based on social protection for people with disabilities could be monitored more frequently and be given more priority. For example, people with disabilities are disproportionately affected by poverty increases. However, when there is an increase in poverty among people with disabilities this does not gain much attention among policy-makers. In addition, dependency and its effects on people with disabilities could be monitored, since many people with disabilities are reliant on their household members and on minimum level benefits. When these fall short, this can affect a person's quality of life. In addition, the data-gathering could be aimed more at analysing net disposable income and the effects of obligatory contributions for care, since people with disabilities are disproportionately affected by poverty increases and their financial situation is precarious (*Ibid.*, pp. 42-43).

---

<sup>30</sup> <https://www.rtlnieuws.nl/nieuws/nederland/artikel/5196890/scp-wmo-decentralisatie-zorg-wet-maatschappelijke-ondersteuning>

## References

- Oostveen, A. (2018). *Wage subsidies for disabled workers in the Netherlands*. ESPN Flash Report 2018/39.
- Oostveen, A., Van Waveren, B., De Vaan, K., Renooy, P., Van Bergen, K., Van de Grift, M., Molleman, S., Berends, S., Anderson, K. (2021). *ESPN Country Profile. The Netherlands 2020-2021*. ESPN. (Internal document).
- Smits, J. (2017). *ANED Country report on Social Protection and Article 28: The Netherlands*. ANED.
- Smits, J. (2018). *ANED 2017-18 Country report on Disability assessment: The Netherlands*. ANED.

## **Getting in touch with the EU**

### **In person**

All over the European Union there are hundreds of Europe Direct Information Centres. You can find the address of the centre nearest you at: <http://europa.eu/contact>

### **On the phone or by e-mail**

Europe Direct is a service that answers your questions about the European Union. You can contact this service

- by freephone: 00 800 6 7 8 9 10 11 (certain operators may charge for these calls),
- at the following standard number: +32 22999696 or
- by electronic mail via: <http://europa.eu/contact>

## **Finding information about the EU**

### **Online**

Information about the European Union in all the official languages of the EU is available on the Europa website at: <http://europa.eu>

### **EU Publications**

You can download or order free and priced EU publications from EU Bookshop at: <http://bookshop.europa.eu>. Multiple copies of free publications may be obtained by contacting Europe Direct or your local information centre (see <http://europa.eu/contact>)

### **EU law and related documents**

For access to legal information from the EU, including all EU law since 1951 in all the official language versions, go to EUR-Lex at: <http://eur-lex.europa.eu>

### **Open data from the EU**

The EU Open Data Portal (<http://data.europa.eu/euodp/en/data>) provides access to datasets from the EU. Data can be downloaded and reused for free, both for commercial and non-commercial purposes.

