



Ministry of Health, Welfare and Sport

Long-term care in the Netherlands Implications for the work-life balance?

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Main questions

1. Does a large formal long-term care system lead to lower need for informal care?
2. How to best integrate and support informal care givers in a large public system?
3. What are the implications for the work-life balance of people?



Reforms of 2015: three pillars

1. More aging at home. Less people in institutions
2. Care at home by health insurers and municipalities
3. Normative reorientation? More individual and social responsibility!

A close-up photograph of a hand in a blue sleeve using a white chalk to write the word 'REFORM' in capital letters on a dark chalkboard. The hand is positioned at the bottom right of the word, with the chalk tip touching the letter 'M'.

REFORM



Q1. Comparison of informal care and size of ltc system

	Inf. care workers	Hours of inf. care	Public ltc % of gdp
Netherlands	14%	9h	4,3%
Slovak Rep.	13%	19h	0,2%
France	20%	6h	1,3%
EU average	15%	12h	1,3%

Sources: Verbakel et al and OECD health data 2015



Q.2 How to integrate and support informal care?

- Professionals and informal care givers working together and supplementing each other
- Government programmes to support informal care
- Pay attention to role of employers



Q3. Implications for work-life balance?

- Many part-time jobs and other arrangements will help finding the balance
- Special attention for role of women needed.
- Still many informal care workers will face a burden and need support

Trying to figure out when I can have that meltdown that I am entitled to...





Conclusions

1. Spending resources on long-term care is not just a cost
2. The formal and informal sector should work together
3. Always take into account the burden for informal care givers and their work-life balance
4. More insight is needed



Thank you for your attention

Any questions?

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