

Social support in the Netherlands: local policies and individual outcomes

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Abstract

The Social Support Act (SSA) has provided the legislative framework for the social support policy of Dutch local authorities since 1 January 2007. The main aim of the Social Support Act was the involvement in society of community dwelling people with a disability. The policy making and implementation of the SSA is put down to local authorities, which has resulted in substantial inter-municipal differences at the policy and the implementation level. A large evaluation study (consisting of several sub-studies, both quantitative and qualitative) was carried out over the period 2010-2012, with the objective of establishing whether the SSA has brought closer the policy goals.

Results show that the majority of SSA-applicants were independent and participated in society, although there were considerable differences by type and severity of disability. Although most applicants in all types of municipality were generally able to manage adequately, this applied somewhat more often in municipalities with more progressive SSA-policies. The perceived opportunities to participate and engage in social contacts differed depending on the policy progressiveness, with applicants in municipalities with the least progressive policies having fewer opportunities than those in municipalities with moderately progressive municipalities.

Introduction

In the Netherlands, one in five people aged 15 or older reports feeling severely or mildly restricted by a chronic disease, psychological complaints or physical disabilities (De Klerk et al. 2012), and almost one in twenty is socially isolated (4%; Van Beuningen & De Wit 2016). Fifteen per cent of the community dwelling population aged 18 or older receives help or support related to their illness or disability. Much of this help is delivered by people's own social network (Verbeek-Oudijk et al. 2017). When help within people's own social network (informal care) is not available or insufficient, local authorities must provide a solution. Under the Social Support Act, they are obliged to 'compensate' citizens who are unable to manage their daily life or to participate in society.

The Social Support Act (Wet maatschappelijke ondersteuning – Wmo) has provided the legislative framework for the social support policy of Dutch local authorities since 1 January 2007. The Wmo is the successor of the national Act on appliances for the disabled (Wet voorzieningen gehandicapten) and the Welfare act (Welzijnswet). The Wmo was introduced for both financial and ideological reasons. The cost increase in care and support (home care as well as institutional care) was growing at a much higher rate than the growth in Gross Domestic Product (GDP). This growth rate was feared to be financially unsustainable in the long run (TK 2003/2004). At the same time, the government signalled that people had lost the natural tendency to look after each other, and instead tended to cash their insured rights to professional care and support, with the result that social cohesion in society was at risk (TK 2003/2004). The government believed that the latter should be cherished and strengthened (TK 2004/2005: 2).

The main aim of the Social Support Act was the involvement in society of people with a disability (either physical, psychological, intellectual and/or psychosocial disabilities or problems) (TK 2004/2005: 7). 'Involvement' was characterized in two ways: independence (running a household, moving around inside and outside the home; and engaging in social contacts) and social participation (recreational). Ideally, the participation of people with disabilities should not lag behind that of those without disabilities (TK 2004/2005), but a comparative study showed that the participation levels of these two groups still differed substantially in 2012 (Meulenkamp et al. 2013: 68).

The elaboration and implementation of the Social Support Act was delegated to local authorities, which resulted in one of the biggest decentralisation operations in Dutch modern history. The national government had several reasons for delegating the Social Support Act to local authorities. Firstly, they are expected to have a better awareness of the needs of their citizens and the local circumstances and are therefore in a better position to arrange community and home care. Secondly, they are in a better position to integrate local social services, welfare activities and general facilities in their municipality. Lastly, local authorities were expected to be able to organise care more efficiently, so that the growth in care costs could be stopped. Local authorities were free to decide how they organised their policy on the Wmo and on what measures were taken to accomplish the aims of the Wmo (independence and participation).

To help local authorities to organise their policy, the Ministry of Health, Welfare and Sport together with the Association of Netherlands Municipalities, developed a 'New Direction' programme (TransitieBureau Wmo 2015). This 'New Direction' programme consists of a number of tools that offered guidance on how the principles of the Wmo could be translated into local practice. Local authorities were among other things encouraged to adopt a demand-led approach instead of a claim-led approach, to identify the real problem behind the initial demand in finding the best solution, to make an appeal to citizens' own capacities and social networks, to work result-oriented instead of resource-oriented, and to address all of the above in a comprehensive interview between citizen and civil servant. Final solutions had to be tailored to the applicants' needs and could (but did not have to) include individual resources such as mobility scooters or domestic help, or general/collective services such as meals services or social activities in a community centre. If support was needed municipalities were encouraged to put in general (welfare) facilities or collective services rather than individual support where possible. Customised solutions are assumed to have a positive effect on the final outcomes, independence and participation, because they fit closer to a person's needs and capacities than one-size-fits-all solutions.

In this article, we focus on people who applied for individual Wmo-support at the end of 2011, and who received it in 2012. We describe what social support Wmo-applicants use, to what extent the Wmo-objectives were achieved, and to what extent the received support contributed. We further test the assumption that applicants for Wmo-support who live in municipalities that work more in accordance with the New Direction approach, do better in terms of independence and participation than applicants in other municipalities.

Literature review

[to be added]

Data and methods

Data design - applicants

Respondents for this study were obtained in multiple steps. First we randomly selected 73 municipalities from the total number of municipalities (415), which beforehand were stratified by size and the degree in which they implemented the New Direction guidelines into their Wmo-policy in 2010 (also see section municipalities). Second, per municipality, a random sample of 100 applicants was drawn and around 75% of them were invited to take part in the study (by letter, sent out by the local authorities). Our aim was to interview around 50 people per municipality. In total, 5610 people were invited and 4041 took part (a response fraction of 0.72). The interviews (Computer Assisted Personal Interviews) were performed by experienced interviewers at people's residence, in the period of April up to July 2012. Thus there was a time period of roughly six to eight months between application and interview.

Data was collected through face-to-face interviews. Applicants were people who had submitted an application for individual Wmo-support at their municipality in the period of September up to November 2011. People who use public resources of the Wmo, such as social work or community centres, are usually not registered and therefore could not be included in this study. The interviews contained the following topics: the support applied for; the application procedure; the application interview with the civil servant; the result of the application; health and disabilities; and several outcome measures relating to independence, social participation and well-being. Responses were weighted to make the results representative for the population of Wmo-applicants by sex and age. More details on the data and the sampling method are available online (in Dutch) at <http://www.scp.nl/dsresource?objectid=35066&type=org>.

Data design - municipalities

Data on municipalities' Wmo-policies was collected in 2010 and 2011 through postal/web survey among all Dutch municipalities (418 for the 2010 data and 415 for the 2011 data). A total of 330 municipalities responded to the first survey (a response fraction of 0.79) and the response was found to be representative for all municipalities, both by geography and degree of urbanisation.

In order to establish outcome differences between municipalities with different progression levels of their Wmo-policy, we divided them into three categories: little, moderately and very progressive. The

progressiveness of a municipality depended on the degree in which it implemented the 'New Direction guidelines' (see the Introduction) into its Wmo-policy, in particular into the application procedure. Their progressiveness was calculated using the PCA technique (see section explanatory variables). As a result, in 2011 23% of municipalities were categorised as little progressive, 42% as moderately progressive and 35% as very progressive.

These 2011-data on the municipality-level were then matched to the applicants data (also on 2011). For 56 municipalities both data on their Wmo-policy and data on applicants for Wmo-support were available. Of these applicants, 26% lived in little progressive, 38% in moderately progressive and 36% in very progressive municipalities. More details on the data and the sampling method are available online (in Dutch: at http://www.scp.nl/Publicaties/Alle_publicaties/Publicaties_2013/Gemeentelijk_Wmo_beleid_2010).

Outcome variables

For this article we were interested in the outcome measures relating to the Wmo-objectives: independence and participation. Independence was measured by asking respondents to what extent they were able to run their household; move about in and around the house; move around outdoors; and maintain social contacts. All elements were measured on a 5-point answer scale ranging from strongly insufficient (1) to strongly sufficient (5). In addition, they were asked whether they thought they were able to remain living independently at home if they would not receive any support from the local council (yes / perhaps / no).

Participation was measured by asking respondents how often they engaged in various activities (weekly, monthly, seldom or never). The activities were: taking part in a club or association (for sport or other recreational activities), going to a religious meeting, visiting a community centre, volunteering, going out (to a restaurant or pub), doing courses (not correspondence courses), making daytrips, or visiting cultural venues (museum, theatre, concert, lecture or movie). Respondents were asked if they were satisfied with their current activity level, or whether they preferred to do more, and also whether they were hampered by their disabilities in doing the activities.

Whether Wmo-support contributed to respondents' independence and participation was examined with direct and indirect questions. In the direct question, respondents were asked whether they felt that the support contributed either hardly, somewhat or a lot to their independence and participation. The indirect examination of the benefit of the support was based on respondents' rating of their ability to manage independently and to participate, each on a scale from 0 (not at all) to 10 (excellent), before and after receiving support from the local authority. The difference between the before and after scores was interpreted as the benefit that people had from the Wmo support.

Explanatory variables

The progressiveness of the local Wmo-policy was the main explanatory variable. But many individual factors also affect a person's independence and social participation. We therefore included a number of individual-level control variables in the multivariate models, namely age (18-54/55-74/75 or older), gender, household composition (living together/alone), level of education (low/middle/high), self-reported net household income (low/high), fatigue (no/sometimes/often) and recent

deterioration of health (yes/no). Physical disabilities were established using 18 questions on the degree of difficulty in performing daily activities (such as washing or dressing), household activities (heavy household work, changing beds, shopping) and mobility (climbing stairs, standing for ten minutes), based on Katz et al. Based on these questions, a Mokken scale was constructed for physical disabilities which can be divided into four categories: none, mild, moderate or severe (Oudijk et al. 2011). People with a moderate disability can generally perform certain activities only with difficulty, while those with a severe disability are no longer able to perform some activities unaided. Non-physical disabilities were measured as self-reported psychological complaints (yes/no), self-reported intellectual disabilities (yes/no), and self-reported psychosocial problems (yes/no). Lastly, two personality traits were included: mastery (measured by five items from the shortened Pearlin Mastery Scale (Pearlin and Schooler 1978) and self-efficacy (measured by the three 'initiative' items from the self-efficacy scale developed by Sherer et al. 1982).

Municipalities' progression towards the 'New direction' was captured by six survey items, that were included in both the 2010 and the 2011 data. Using a CATPCA procedure (Categorical Principal Component analysis), one factor was extracted from the data that to capture the new direction principles in one single dimension. The six survey items loaded well onto this factor and they had sufficient internal reliability (Cronbach's $\alpha = 0.78$). The six survey items are shown in Box 1.

Box 1. The six selected survey questions used to capture municipalities' progression level towards the New Direction

1. Number of aspects that get attention in the comprehensive interview between an applicant and civil servant (max. 12 aspects)
- Five indicators of local authorities' working method in the application procedure, expressed as a relative position between two opposites (score range 1-7 per indicator):
2. In the interview with the applicant, there is a narrow focus on the reported problem, or a wide focus on an applicant's functioning in several life domains.
 3. In discussing the demand for support with the applicant, the possible solution is steered by what municipal support is available, or by the applicant's own capabilities.
 4. Applicants are helped as much as possible with individual forms of support, or mostly with general or collective services.
 5. When determining suitable support, the possible contribution of general and collective services is or is not explicitly considered.
 6. Local authorities takes professional care or informal care as the starting point when determining suitable support.

The CATPCA standardized all the answers on the six items and transferred them to a scale. This transformation was firstly done with the 2010-data. The resulting scale was divided into quartiles and the second and third quartiles were then merged, resulting in three categories.. This procedure was then repeated on the 2011 data, but using the cutting points between the categories for 2010. By doing so we could establish whether a municipality's policy had become less or more progressive compared to 2010.

Municipalities' score on the individual items differed between the various progression levels towards the New Direction. Very progressive municipalities had a pronounced preference for encouraging the use of informal care (item 6, Box 1) or general and collective services (item 4, Box 1), whereas the moderately progressive municipalities did not have such a pronounced preference; they showed

more variation in their appeal on informal care. Little progressive municipalities most often had a pronounced preference for the opposite: professional support and individual support. Both moderate and very progressive municipalities covered on average more topics (9.7 and 10.2) in the comprehensive interview, and thus showed a more holistic problem-approach, than little progressive municipalities (covering on average 5.6 topics).

Analysis

The data were analysed taking into account the survey design characteristics of the data (stratified sample of persons within municipalities, and respondents weighted to correct for gender and age composition of the sample compared to the national population of Wmo-applicants).

Descriptive analyses consisted of summary statistics and frequency tables. Multivariate analyses consisted of linear and logistic regression models, which included both individual-level and municipality-level variables. The model parameters have been used to calculate adjusted percentages (for categorical outcome variables) and adjusted averages (for continuous outcome variables).

Results

Socio-demographic characteristics and received support

People who apply for Wmo-support are often female, older and living alone, compared to the general Dutch population (Table 1). More than half of the applicants (58%) had also applied for Wmo-support in the past. As a result, applicants are very likely to use more Wmo-support than what they applied for in their last application. Table 2 presents the types of support, care and facilities applicants use altogether. The majority of applicants received domestic care (83%), and/or used transportation to move around outside (such as a mobility scooter, adjusted bicycle or taxi pass) (71%). General facilities were not often used, with exception of the social alarm (22%).

Table 1. Demographics of Wmo-applicants (2012) compared to the Dutch population (2011) (percentages)

	Wmo-applicants	Dutch population
Age		
0-17	3	21
18-65	28	63
65 or older	69	16
Gender (female)	67	51
Household composition (living alone) ^a	47	17
Housing situation		
Independent	88	99
Independent with care ^b	9	.
In an institution	3	1
Ethnicity (Dutch or Western migrant)	93	89

a. compared to living together with others

b. living independent with care means that a person lives independently but has easy access to care, for example in sheltered housing, service flats, and homes in areas with 'integrated neighbourhood services'.

Source: SCP (WMO-V'12) and CBS Statline

Table 2. Types of support used by Wmo-applicants in total ^a, 2012 (percentages^b; n = 3760)

Help by (informal or formal) caregivers^c	
Domestic care	81
Personal care or nursing care	29
Supervision	23
Combination of domestic care and other forms of care	37
Mobility aids and transportation (n= 4007)	
Wheelchair	23
Mobility aids for moving around inside the house	45
Housing adjustments and home aids	63
Transportation solutions for moving around outside	71
A combination of resources	64
General facilities (n = 3883) ^c	
Meal service	9
Odd-job service / repair service	10
Grocery shopping service	2
Laundry service (including collection and delivery service)	1
Social alarm system (?)	22
Telephone circle (?)	1

a. total type of resources implies the resources received as a result of the last Wmo-application combined with the support they already had.

b. percentages can be over 100%, because respondents can have more than one resource.

c. selection of adult Wmo-applicants who live independently

Bron: SCP (WMO-V'12)

Achievement of the Wmo-objectives independence and social participation

With all the support they had available, most applicants felt independent. Most felt (more than) able to run their household (88%), (well) able to move around within their home (91%) and (well) able to move around outside (81%). The majority of applicants felt that their possibilities for social contact were adequate (82%), and almost all (96%) had contact at least once a week. Yet, compared to the general population, three times as many applicants could were classified as 'socially isolated' (28% versus 9% in the general population).

Most applicants (70%) felt they had sufficient possibilities to participate in activities. However, also 69% reported feeling hampered by their disabilities in performing (certain) activities. Nevertheless, most applicants (81%) actually participated in at least one activity. Some activities were done more frequently, such as weekly participation in a club or association, going to a religious meeting or visiting a community centre. Other activities were mostly undertaken on a monthly basis, such as going out, making a daytrip or visiting cultural venues. On the whole, 44% of all applicants participated weekly and 12% at most monthly. Two thirds (68%) of applicants would prefer to participate more in at least one activity.

The contribution of support to independence and social participation

The contribution of support was measured both directly and indirectly (see section 'Outcome variables'). The direct measurement showed that around two-thirds of the applicants felt that support contributed a lot to their ability to run their household and move around inside and outside

their home. One-third felt it contributed somewhat and almost no one felt that support made little or no contribution.

For applicants' ability to meet other people and to keep contact, the contribution made by support was felt to be more limited. Roughly one third (38%) of applicants who experienced sufficient opportunities for social contacts, felt the support made a large contribution and 28% felt it made some contribution. However, also a third felt that support hardly contributed.

The contribution of support to participation seemed to be more limited as well. Of applicants who experienced sufficient opportunities to engage in activities, four out of ten felt that the support made a large contribution to this. Almost five out of ten experienced some contribution from the support and slightly more than one in ten experienced virtually no contribution.

The indirect measurement of support showed that on average, applicants rated their ability to manage independently as 5.2 on a scale from 0-10 before receiving support and 7.9 after receiving support. Applicants rated their ability to participate in activities as 5.7 before receiving support and as 6.8 after receiving support. This means that the average improvement was 2.7 points for independence against 1.1 point for participation. The gain from support differed between applicants with different background characteristics. Younger applicants (15-55 years) and those with a low education derived more independence and participation from support than older applicants and those with a higher education. Applicants with a severe disability gained more independence from support than their opposites (applicants with mild disability). Applicants with a low income experienced less improvement in participation opportunities than their opposites. Also, applicants with psychosocial problems gained less improvement in their participation opportunities compared to those without these problems.

Lastly, applicants were asked whether they thought they could continue to live at home independently if they would not receive support. 57% of them stated that this would not be possible. For 26% this would be possible and 17% doubted it.

Local authorities (partially) refused applications of some applicants (around one in ten applicants). Of these applicants, fewer considered themselves sufficiently independent than of those who had received everything they had applied for or whose application was still being dealt with. Although this former group felt less independent than the latter one, they experienced just as much opportunity to participate and they participated just as much.

The relationship between progressiveness of Wmo-policy and independence and social participation

Table 3 shows the percentages of independence and social participation-outcomes by municipality type. First of all, it can be seen that the vast majority of applicants reported to be independent, able to keep social contacts, and able to participate, in all three different types of municipalities. But we also observe some interesting differences. Firstly, in the moderately and very progressive municipalities, more applicants were (very) sufficiently able to run their household, move in and around their house and outdoors and participate than in little progressive municipalities. Contrary to our hypothesis that more progressed municipalities would have more positive outcomes, just as many applicants were independent and participated in municipalities with moderately progressive Wmo-policies as in municipalities with very progressive Wmo-policies. In moderately progressive municipalities more applicants felt (very) able to maintain social contacts than in little progressive

municipalities. No difference was found between municipalities' progression towards the New Direction and applicants' ability to live at home independently, or applicants' risk of being socially isolated (not shown).

Table 3. Wmo-applicants that report (very) sufficient ability in four areas of independence and to participate in activities, by progressiveness of the Wmo-policy in their municipality, 2012 (adjusted percentages^a; n= 2366)

	little progressive^b	moderately progressive	very progressive
(very) sufficiently able to run the household	84	90*	90*
(very) sufficiently able to move about in and around the house	87	92*	90*
(very) sufficiently able to move around outdoors	73	85*	81*
(very) sufficiently able to maintain social contacts	80	84*	83
(very) sufficiently able to participate in activities	65	74*	74*

a. adjusted percentages means that percentages were statistically adjusted for the relationship with age, gender, level of education, income, household composition, severeness of the disability, intellectual disability, longstanding psychological complaint, psychosocial problem, deteriorating health, mastery and self-efficacy. Refer to authors for unadjusted percentages.

b. Reference category. Reading example: both in moderately and very progressive municipalities more applicants were (very) sufficiently able to run their household compared to municipalities with little progressive Wmo-policies.

The relationship between progressiveness of Wmo-policy and the contribution of support

Table 4 shows the average score that Wmo-applicants attached to their overall independence and participation opportunities, by type of municipality. It can be seen that both independence and participation opportunities increased after receiving support (columns 1 and 2). The improvement in independence is considerable, ranging from 2.5 to 2.8 on a scale from zero to ten. Yet the score improvement did not differ between municipalities' progression towards the New Direction (column 3).

The improvement in perceived participation opportunities was modest (ranging from 0.7 to 1.2), but there were differences between municipality types. In little progressive municipalities the degree of participation after receiving support increased less than in the moderately or very progressive municipalities.

As described before, the categorization of municipalities into little, moderately and very progressive was derived from six separate survey items relating to the New Direction. For more insight we examined whether these items influenced independence and participation separately.

With regard to independence, we found that applicants felt more independent when local authorities conducted a comprehensive interview and when applicants' functioning in several life domains was assessed. Applicants' participation was sometimes positively affected (e.g. where a comprehensive interview was held and potential contribution of general and collective services was considered) and sometimes negatively (when municipalities relied heavily on appealing to people's own capacities and social networks).

Table 4. The relationship between progressiveness of Wmo-policy and the average improvement in applicants' independence and ability to participate in activities, before and after receiving Wmo-support, 2012 (adjusted averages^a)

	before support	after receiving support	improvement
<i>independence</i>			
little progressive ^a	5,3	7,8	2,5
moderately progressive	5,1	7,9	2,8
very progressive	5,4	8,0	2,6
<i>participation</i>			
little progressive ^a	5,9	6,7	0,7
moderately progressive	6	7,2*	1,2*
very progressive	5,8	7	1,2*

a. Adjusted averages means that averages were statistically adjusted for the relationship with age, gender, level of education, income, household composition, severeness of the disability, intellectual disability, longstanding psychological complaint and psychosocial problem. Refer to authors for unadjusted averages.

Conclusion and discussion

Most applicants felt independent and felt that they had sufficient possibilities to participate with all the support they had. The Wmo-support contributed to both applicants' independence and ability to participate, but the contribution to independence was larger. There thus appears to be a more direct relationship between independence and Wmo-support than between participation and Wmo-support. From this summary of average results for the Netherlands it can be concluded that Wmo-support made an important contribution to applicants' self-reported independence and participation. In that sense, we can conclude that the objectives of the Social Support Act are being realised. On the other hand, compared to the general population, the actual participation level of Wmo-applicants still lags behind and three times as many applicants are socially isolated (Kromhout et al. 2014: 241 and 271).

The progression level of municipalities' Wmo-policy towards the New Direction had a modest but significant effect on the proportion of applicants who felt able to participate and felt independent in most life domains. In the more progressive municipalities (moderately or very progressive), these outcomes were a few percentage-points higher. These municipalities also showed a larger increase in applicants' ability to participate after receipt of the support. The increase in independence after receipt of the support was not affected by the degree of municipalities' progression towards the New Direction.

Remarkably, outcomes in moderately progressive municipalities were similar to those in very progressive municipalities and, in both, were significantly better than the outcomes in little progressive municipalities. Our analysis of the separate elements of the New Direction revealed that this is probably due to the difference in municipalities' implementation of particular policy elements. Approaching a person's request for support and the possible solutions from a broad and holistic perspective worked out positively for independence of applicants, and was most often done in both

very and moderately progressed municipalities. Appealing to people's own capacity and social network, which was a pronounced preference of very progressive municipalities, did not work out well for applicants' participation. Little progressive municipalities had a pronounced preference for the opposite (professional support and individual support) and the appeal on people's own capacity in moderate municipalities varied. We therefore conclude that some elements of the New Direction work out well for outcomes for citizens in need of social support, while other elements seem to work against it. Whether the government's assumption about the positive overall effect of the 'New direction' approach is true remains therefore ambiguous. The picture may become clearer over time, as a big and fundamental change like the New Direction takes many years to evolve.

In this study, there appears to be a more direct relationship between independence and Wmo-support than between participation and Wmo-support. Perhaps it is more difficult for municipalities to provide tailored support that actually facilitates and stimulates applicants' participation, because the Wmo-objective of participation is less concrete compared to the objectives of independence (i.e. being able to run a household and to move around in and around the house and outdoors). It is also possible that the individual Wmo-support received is not enough to increase participation, but that additional support is needed, such as general support of welfare support. For this study we mainly interviewed applicants who applied for individual Wmo-support, and have probably missed applicants who were helped with general and collective forms of support (because they are not registered).

Participation of Wmo-applicants lags behind to that of the general Dutch population (which contains much fewer people with disabilities). Thus the ideology behind the Wmo, equal participation opportunities for all people, still remains far from reality. It is questionable, however, whether it is realistic to expect Wmo-support to bridge the gap. More generally, it is questionable to what extent equal participation for people with and without disability is possible in the first place. Applicants in this study who wanted to participate more often felt restricted by their disabilities, and many indicated that support could not compensate this completely. But by no means do we argue that social support is meaningless. On the contrary: without Wmo-support, the participation gap between Wmo-applicants and the general population would likely be even larger.

Municipalities that follow the principles of the New Direction more closely, were assumed to be more likely to make an appeal to applicants own capacity and to provide customised solutions and therefore have better results than other municipalities (who followed the principles less closely). The first part of this assumption is confirmed in this study: the very progressive municipalities had a pronounced preference to make an appeal towards informal care (capacity of applicants' own social network) instead of professional care. The second part – more likely to providing customised solutions and therefore have better results – was not confirmed in this study.

We thought it striking that moderately progressive municipalities showed as good results as very progressive municipalities for participation and social contacts. Closer investigation showed that these municipalities implemented a selection of the New Direction guidelines: they seem to apply general and informal support forms where possible, and individual support forms where needed. Moderately progressive municipalities may therefore be best at mixing elements from the old policy (solve demand for support with professional care and provisions) and the New Direction policy (challenge people to do as much as they still can, and to mobilise their own social network) in order to provide a customised solution.

Discussion

Of the 73 municipalities that provided data on applicants, 56 also provided data on their Wmo-policy. The distribution of these 56 municipalities over the three categories of progression towards the New Direction was similar to that of all Dutch municipalities. Further, the 73 municipalities that provided data on applicants were randomly selected. Therefore we believe that the results can be generalized to all municipalities in the Netherlands.

Unfortunately we were only able to examine applicants who received individual Wmo-support. Wmo-applicants who were redirected towards general provisions or collective provisions are rarely registered by municipalities and could therefore not be included in this study. This is unfortunate because redirecting applicants towards other forms of support is one of the guidelines of the New Direction. Indeed, 45% of municipalities indicated that they mainly help applicants with general and collective provision and 72% takes these provisions into account when determining the best solution for the applicant's application for Wmo-support (Kromhout et al. 2013: 172). To examine the effect of Wmo-policy to its full extent, applicants that were redirected to other forms of provisions would need to be included, as would applicants who were helped to solve their support need with their own or their social network's capacities.

Special about this study is the connection between Wmo-policy from the municipalities point of view and the experiences of Wmo-applicants in each of those municipalities. This enabled us to directly examine the link between a municipality's policy and its applicants' independence and participation, and the variation therein between types of municipalities. To our knowledge this had not been done before. The New Direction programme, which is intended to offer municipalities a coherent set of guidelines, appears to contain elements with opposing effects on the independence and participation of their citizens in need of social support. The results suggest that a carefully selected mix of elements, tailored to the particular situation of each municipality, offers the best chances for developing well-working social support.

Since information on municipalities' Wmo-policy was obtained through self-report, socially desirable answers cannot be ruled out. It is therefore possible that the answers given in the municipal survey reflect intentions more than actual policy. However, because the municipalities were randomly selected, it is likely that municipalities with more socially desirable answers are by chance equally divided over the three Wmo-policy categories (i.e. progression towards the New Direction). However, if all municipalities rendered their Wmo-policy more progressive than it actually is, the effect found of the policy on applicants' independence and participation would be an underestimation of the actual effect.

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