# National Fiche – The Netherlands

## COVID-19 cases

On 8 September 2020, The Netherlands registered 6,244 COVID-19 related deaths[[1]](#footnote-1) out of around 17.4 million people[[2]](#footnote-2). Data on deaths and cases of COVID-19 were not disaggregated by disability status[[3]](#footnote-3). Data Statistics from the Netherlands showed that mortality rate doubled between 30 March to 5 April 2020 compared to average rate for the first weeks of 2020[[4]](#footnote-4). In mid-May, around 1,700 residents of care homes died from COVID-19[[5]](#footnote-5).

## Emergency, lockdown, and confinement

Even though the Netherlands did not declare a state of emergency, the authorities adopted a series of measures to combat the COVID-19 pandemic.

The Public Health Act provided “extensive powers to the mayor of the central municipality of Safety Regions (Veiligheidsregio’s) including the authority to hospitalize for isolation without delay and to quarantine individuals”[[6]](#footnote-6).

From 12 March 2020, public locations were closed at national level. Vulnerable people including the older persons and people with underlying health conditions were advised to avoid public transport and large groups. The State did not impose a strict lockdown but advised the population to avoid outings unless for a walk and to work from home when possible[[7]](#footnote-7). The measures adopted by the Dutch Government impacted persons with disabilities’ daily life since in a survey conducted by Iederin, 60% of respondents who usually receive professional support, have experienced reduced, changed or no support due to the COVID-19 pandemic[[8]](#footnote-8).

Additionally, the Netherlands Institute for Human Rights received complaints on the lack of adaptations of rules on the lockdown and social distancing having a disproportionately negative impact on persons with disabilities[[9]](#footnote-9).

## Involvement of organisations of persons with disabilities

At first, the Dutch Government did not consult nor involved DPOs in national policy to tackle the COVID-19 pandemic. Thus, on 6 May 2020, Iederin - The Dutch Network for People with Disabilities or Chronic Illness called on the Cabinet and the House of Representatives to involve people with disabilities and chronically ill persons in the elaboration of the plans for “1.5 meters society”. The Dutch Network considered that measures must be inclusive and include the resumption of care and support suspended by the COVID-19 crisis and formulated eight recommendations in this regard for the “1.5 meters society”[[10]](#footnote-10). Iederin also stressed that general measures adopted to fight the coronavirus were not suitable and tailored to many persons with disabilities or chronic illness. The organisation called for the involvement of experts and their organisations in the elaboration of protocols and plans to prevent discrimination and exclusion and to listen to the needs of persons with disabilities[[11]](#footnote-11). Following this call, the Ministry of Health, Welfare and Sport worked with Iederin and other organisations of persons with disabilities on a COVID strategy for persons with disabilities. Iederin welcomed this step forward as an opportunity to include persons with disabilities in the “1.5 meters society”, taking into account their needs and to prevent exclusion and other issues[[12]](#footnote-12). Iederin called other Ministries to commit in considering persons with disabilities’ inputs while adopting measures[[13]](#footnote-13).

Iederin also monitored the situation of persons with disabilities or chronic illness during the COVID-19 pandemic through different surveys and made sure that they were not left behind. Results of these surveys highlighted the effect of the COVID-19 crisis on the quality of life, and on physical and mental health of persons with disabilities. For instance, out of 532 respondents to a survey, 45% had their physical health deteriorating and 40% experienced feelings of loneliness[[14]](#footnote-14).

For children in institutions, with the limitations on visits, parents reported socio-psychological and emotional problems experienced by their children. Many parents called on some flexibility on the visit policy[[15]](#footnote-15).

## Communications and announcement

The first coronavirus press conference held by the government did not include sign language interpretation nor captioning; making it impossible for deaf and hard of hearing persons to understand the information provided[[16]](#footnote-16). Organisations of persons with disabilities expressed the feeling of exclusion experienced by persons with disabilities and called on the government to take action to mitigate this situation and provide accessible information[[17]](#footnote-17).

After this call for action, the following press conferences included sign language interpreters[[18]](#footnote-18).

## Institutions and closed settings

Under a new law adopted in January 2020, a city mayor has the possibility in case of emergency, to decide of the compulsory admission (“IBS”) to a psychiatric institution if a person becomes a danger for her/himself or for others. Testing positive to coronavirus can be considered as a reason for deciding on forced isolation of a person who does not cooperate[[19]](#footnote-19). As a result, an increase in compulsory admissions in mental health care have been noted in the first half of 2020.

However, experts pointed out a misuse of the law rather than the corona virus crisis as a reason for the rise[[20]](#footnote-20). The Government also allowed to deviate from the usual step-by-step plan in the application of the law WZD on Coercion and Care (for persons with intellectual and geriatric disabilities) in the context of the pandemic. As an example, in the case of understaffing or capacity problems due to the coronavirus the usual procedure (“MSY”) involving external experts and evaluation periods cannot be arranged, then care providers can organize care in different ways[[21]](#footnote-21).

To protect older people, as from 20 March 2020 visits were not allowed in nursing homes and small-scale residential accommodation for the older persons[[22]](#footnote-22).

Recommendations banning visits of older people living at home and in care institutions were eased by the Authorities on 28 April 2020[[23]](#footnote-23).

## Health care

The Netherlands Institute for Human Rights received complaints “on the (alleged) priority given in intensive care to those whose life expectancy and/or quality of life after treatment is expected to be higher”[[24]](#footnote-24). The Dutch government published guidelines to ensure the continuation of care for individuals who are completely dependent on domiciliary care or day care, and with no social network to support them. For those individuals who can fall back on their own social network and non-essential homecare, activities are currently postponed. One or two regular informal care-givers are allowed to visit those that require care from 29th April”[[25]](#footnote-25).

## Social Protection

As of the day of drafting the fiche (20 September 2020), information about disability-related social protection during the pandemic was not found but it could be there.

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   8 September 2020. Available in Dutch at: <https://www.rivm.nl/documenten/wekelijkse-update-epidemiologische-situatie-covid-19-in-nederland> [↑](#footnote-ref-1)
2. Statistics Netherlands (CBS), available at: <https://www.cbs.nl/en-gb> [↑](#footnote-ref-2)
3. As of the day of drafting the fiche (20 September 2020), data disaggregated by disability status was not found but it could be there. [↑](#footnote-ref-3)
4. FRA Bulletin II, [Coronavirus pandemic in the EU – Fundamental Rights implications: With a focus on contact-tracing apps](https://fra.europa.eu/sites/default/files/fra_uploads/fra-2020-coronavirus-pandemic-eu-bulletin-may_en.pdf) [↑](#footnote-ref-4)
5. J.M.G.A. Schols, E.P. Poot, N.M. Nieuwenhuizen, W.P. Achterberg, Dealing with COVID-19 in Dutch Nursing Homes, The Journal of Nursing Home Research, Res 2020;6:30-34, 6 July 2020. Available at: <https://www.jnursinghomeresearch.com/2270-dealing-with-covid-19-in-dutch-nursing-homes.html#:~:text=It%20is%20absolutely%20no%20surprise,be%20affected%20by%20COVID%2D19.&text=In%20the%20meantime%2C%20despite%20a,19%20(mid%2DMay)>. [↑](#footnote-ref-5)
6. FRA Bulletin I, Coronavirus COVID-19 outbreak in the EU Fundamental Rights Implications, Country report – the Netherlands, 23 March 2020. Available at: <https://fra.europa.eu/sites/default/files/fra_uploads/netherlands-report-covid-19-april-2020_en.pdf> [↑](#footnote-ref-6)
7. Ibid. [↑](#footnote-ref-7)
8. Survey conducted by Iederin and answered by 532 persons with disabilities and people supporting persons with disabilities. Results of the survey conducted from 7 -12 April 2020 can be downloaded at: <http://www.edf-feph.org/sites/default/files/resultaten-panelenquete-april-2020.docx> [↑](#footnote-ref-8)
9. Equinet’s response to COVID-19 – Netherlands, available at: <https://equineteurope.org/covid-19-response/#data> [↑](#footnote-ref-9)
10. Iederin, How do you make the 1.5 meters society inclusive ?, 22 May 2020. Available in Dutch at: <https://iederin.nl/maak-de-anderhalvemetersamenleving-inclusief/> [↑](#footnote-ref-10)
11. Iederin, Appeal to the House of Representatives: “Involve us in the way out of this crisis”, 6 May 2020. Available at: <https://iederin.nl/oproep-aan-tweede-kamer-betrek-ons-bij-de-uitweg-uit-deze-crisis/> [↑](#footnote-ref-11)
12. Iederin, Public transport protocol established; no attention to accessibility of public transport, 14 May 2020. Available at: <https://iederin.nl/ov-protocol-vastgesteld-geen-aandacht-voor-toegankelijkheid-van-het-ov/> [↑](#footnote-ref-12)
13. Iederin, Covid strategy in the making: UN CRPD in times of crisis, 20 May 2020. Available in Dutch at: <https://iederin.nl/covid-strategie-in-de-maak-vn-verdrag-handicap-in-crisistijd/> [↑](#footnote-ref-13)
14. Results of the survey conducted from 7 -12 April 2020 can be downloaded at: <http://www.edf-feph.org/sites/default/files/resultaten-panelenquete-april-2020.docx> [↑](#footnote-ref-14)
15. Iederin, Care burnout lurks with informal care for children with intellectual disabilities, 23 April 2020. Available in Dutch at: <https://iederin.nl/zorg-burn-out-ligt-op-de-loer-bij-mantelzorg-kinderen-met-een-verstandelijke-beperking/> [↑](#footnote-ref-15)
16. FRA Bulletin I, Coronavirus COVID-19 outbreak in the EU Fundamental Rights Implications, 23 March 2020. Available at: <https://fra.europa.eu/sites/default/files/fra_uploads/netherlands-report-covid-19-april-2020_en.pdf> [↑](#footnote-ref-16)
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19. Article from Dutch media de Gelderlander, Dakloze coronapatiënt uit Nijmegen gedwongen opgenomen en in isolatie geplaatst, 2 April 2020. Available in Dutch at: <https://www.gelderlander.nl/nijmegen/dakloze-coronapatient-uit-nijmegen-gedwongen-opgenomen-en-in-isolatie-geplaatst~a27aa12a/> [↑](#footnote-ref-19)
20. Article from deVolkskrant, Flinke toename acuut gedwongen opnamen psychiatrie, experts wijzen naar ‘kapotte wet’, 1st September 2020. Available in Dutch at: <https://www.volkskrant.nl/nieuws-achtergrond/flinke-toename-acuut-gedwongen-opnamen-psychiatrie-experts-wijzen-naar-kapotte-wet~bd48ef54/> [↑](#footnote-ref-20)
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23. FRA Bulletin II, [Coronavirus pandemic in the EU – Fundamental Rights implications: With a focus on contact-tracing apps](https://fra.europa.eu/sites/default/files/fra_uploads/fra-2020-coronavirus-pandemic-eu-bulletin-may_en.pdf) [↑](#footnote-ref-23)
24. Equinet’s response to COVID-19 – Netherlands, available at: <https://equineteurope.org/covid-19-response/#data> [↑](#footnote-ref-24)
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