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Volksgezondheid
& Samenleving

Dutch informal care & the growing care gap



Prof. dr. Jet Bussemaker

Professor of Science, Policy and Societal Impact, in particular in health care

Eurocarers, policy and research group
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↳ Professional background

- **Science**

- Professor of Science, Policy and Societal Impact (Leiden University)

- **Politics and policymaking**

- Member of Dutch parliament (1998-2007)
- State secretary of Health, Welfare and Sports (2007-2010)
- Minister of Education, Culture and Science (2012-2017)
- Chair of the Dutch Council for Public Health & Society (RVS) (2019-now)



↳ Report on formal & informal care

Caring differently and living differently

*Towards an equal collaboration
between formal and informal care*



↳ Dutch policy on informal care

Three ways to approach a way out of the care gap:

1. Familiarisation
2. Marketisation
3. Communitarisation

The Dutch government tends to look to the family and the community for long term care



↳ What needs to be done?

- Fundamental change in the distribution of responsibilities
- Informal care is not just a supplement
- Informal and formal carers should form a team from the beginning
- Teamwork between equal partners is necessary
- Formal and informal caregivers both take their different roles in teams and take care of each other



↳ Support informal carers

- I. Position of the informal network as teamplayer
- II. Recognise informal carers as equal partners
- III. Loosen and simplify rules and protocols



↳ Professionalisation of informal care

- Is it unacceptable to train informal carers so they can (sometimes) 'replace' professionals?
- Should we pay informal carers (more)?



↳ Research directions

- Rethinking care as a whole (paradigm shift)
- Considering behavioural and conceptual change
- Putting health (prevention) first, ailment second
- What constitutes an informal care inducing environment?



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