

# Summary

## Services in 3D

Use of services in the social domain in 2015-2019 from different perspectives: individuals, households, regions and trends

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# Summary and discussion

## S.1 Summary

### S.1.1 Insight into the use of services in the social domain

In 2015 the Dutch government devolved a number of tasks to the provincial and local authorities. The introduction of three ‘decentralisation Acts’ – the Participation Act, the Social Support Act 2015 (Wmo 2015) and the Youth Act – assigned responsibility to local authorities for offering help with work and income, social support (to people with disabilities) and youth support services. These three Acts together are sometimes referred to as the ‘social domain’, although that is an incomplete interpretation of the term.<sup>1</sup> At the request of the Ministry of the Interior and Kingdom Relations, the Netherlands Institute for Social Research (SCP) has published three reports on the state of the social domain (Pommer & Boelhouwer 2016, 2017; Pommer et al. 2018) In those earlier reports, SCP describes trends in the use of services (based on register data) as well as the consequences of the decentralisation operations for the public (based on in-depth survey research). Unfortunately, the outbreak of the coronavirus pandemic prevented the survey research from being carried out, and in this report we therefore restrict ourselves to use of services based on register data.<sup>2</sup>

#### Incomplete picture of use of services...

At the time of writing this report, we used the most recent definitive annual figures available at the time, which implies that we did not analyse any figures for 2020. In the discussion section (§ S.2), we do however briefly relate our findings to the most recent developments.

Basing our study on register data on individual services means we are not able to provide a complete picture of the use of services in the social domain, since use of general services is left out of the picture. By definition, register data are characterised by some statistical ‘noise’; registers vary from one local authority to another, for example in the distinction drawn between individual and general services, or the time of registration (when a service-user registers or when the service delivery starts).<sup>3</sup>

The register data show how many users there are of individual services. It is worth bearing in mind here that it is not possible to deduce from a high or low number of users whether people find a solution for their problem, and whether the use (in a given municipality) is too high or too low. A relatively high use of services can for example be caused by use of preventive services (which in a later phase may lead to lower use), or by the fact that the services are very easy to access. Relatively low use of individual services may in turn be associated with higher use of general services (about which we have no information), or with people obtaining a lot of help from their own social network.

### ...but still the best possible picture

Despite these shortcomings, the figures presented offer the best possible picture of trends in the social domain, given the available statistical material. Services in the social domain are a key way for local authorities to help people with problems. Trends in the use of services provide an insight into questions, for instance whether the balance is shifting from intensive to lighter forms of help. Combining figures on the use of different services sheds light on which groups are using multiple services. By also looking at the characteristics of service-users and changes in those characteristics, we obtain a picture of the groups that are reached by the different services. Looking at data at municipal level and the relationship between use of services and characteristics of the population gives us an impression of regional differences in use of services. Finally, we have access to register data extending over a longer period, enabling us to describe the ‘inflow’ and ‘outflow’ of users, i.e. users taking up services for the first time and those ceasing to use services.

Taking register data on individual services as a basis means that a proportion of the actual and potential users of services in the social domain are left out of the picture, for example users of general services or people with social problems who (for whatever reason) do not use any services in the social domain. Based on a literature review and supplementary analyses of existing survey data, as also used in earlier reports (Pommer et al. 2018), we present a first picture of these groups.

#### 5.1.2 The context of service use

##### The three decentralisation Acts (‘3D’)

This report focuses specifically on three Acts, implementation of which is the responsibility of local authorities: the Participation Act, the Social Support Act 2015 (Wmo 2015) and the Youth Act.

The aim of the Participation Act is for as many people as possible who have capacity for work to guide them into work, or to support them at work. If this proves impossible, the Act provides for everyone to receive an income if needed.

The principal aim of the Wmo 2015 is to enable people to continue living at home for as long as possible and to continue participating in society. Self-reliance (functional independence) and participation are central concepts here, and where possible lighter forms of support should be offered.

The goal of the Youth Act is to ensure that young people are able to grow up safely. For older young people, the Act also aims to ensure that they retain control over their own lives, and seek solutions together with members of their own networks and any professionals involved. The Act also seeks to offer cohesive help to families. Finally, youth protection and probation services also fall under the Youth Act.

The government’s intention with the decentralisation operations is to enable help to be provided closer to the people who need it, in a way that better matches their lives. The idea is to place more reliance on citizens’ own capacities, to focus more on prevention and to ensure that local authorities and professionals work in tandem.

## Six years of decentralisation

Six years have passed since the start of the decentralisation operations. Separate evaluations have been published on each of the three decentralisation Acts (Van Echtelt et al. 2019; Friele et al. 2018; Kromhout et al. 2018), and in a recent publication Kromhout et al. (2020) take stock of the impact of the three Acts together. These reports and evaluations show that, while a good deal of progress has been made in achieving the objectives of the three Acts, the changes have not gone beyond the level of a transition (devolution of tasks from central government to local authorities), and that there is as yet no evidence of a genuine transformation (working differently in the social domain). The aims of the Participation Act have been achieved to only a very limited extent (Van Echtelt et al. 2019)<sup>4</sup>. The shift from intensive to lighter forms of support funded under the Wmo 2015 is not (yet) apparent (Kromhout et al. 2018, 2020). There was also no reduction visible (in 2018 for the Youth Act) in use of specialist help, more prevention or more scope for professionals (Friele et al. 2018).

There are several reasons for the failure so far to achieve a transformation. Several of the sticking points can have consequences for the use of services and therefore provide a backcloth to the use of services described in this report. They include the following points (based on Kromhout et al. 2020):

- Most local authorities have set up community social care teams. Although these teams are readily accessible, they are not especially proactive or focused on prevention (Van Arum et al. 2020).
- The expectation that the decentralisation operations would lead to a shift from intensive to lighter forms of support does not yet appear to have come to fruition as regards the Wmo 2015 or the Youth Act. Local authorities are particularly concerned about the growth in the use of (specialist) youth support services (Kromhout et al. 2020). As regards the Participation Act, a shift has taken place from ‘intensive’ support services (provided under the Invalidity Provision (Early Disabled Persons) Act (Wajong) and the Sheltered Employment Act (Wsw)) to ‘lighter’ forms of support (reintegration people who are not very far removed from the labour market), though the policy has meant that people with relatively minor problems receive help more quickly, while those in need of more intensive support are not helped into work or even disappear from the radar altogether (Van Echtelt et al. 2019; Kromhout et al. 2020).
- The number of households facing multiple problems – for whom integrated support is important – remains limited (just over 8% of all service-users). However, if we also include problems outside the social domain, such as problematic debts, school drop-out, etc., this group is many times larger.
- An integrated approach requires collaboration between different actors – not just in the social domain, such as providers of Wmo-funded support and youth support services, but also actors outside this domain, such as health insurers, employers, education establishments and the Employee Insurance Agency (uwv). This collaboration is struggling to get off the ground. The demarcation of responsibilities is for example not always clear (see also IGJ 2019a, 2019b).

- Sharing information is made difficult by the privacy rules (though a bill is now in the pipeline aimed at addressing this<sup>5</sup>).
- The decentralisation operations have not made the system any less complex, and local authorities are not always able to influence access to services.
- The scope for professionals to deliver a customised service is still limited, partly because the initial focus was on the transition, leaving little (financial) scope for innovation.
- A key principle in the decentralisation operations was to address service-users' own capacities as well as help from their networks. However, this is by no means always possible.
- Vulnerable groups often live concentrated in particular regions, municipalities or neighbourhoods, leading to differences in the use of services. Aspects such as local authority policy and social cohesion can also play a role in those differences.

### S.1.3 Use of services in the social domain

#### Situation in 2018

In total, more than two million people made use of an individual service in the social domain in 2018 (see also Box S.1).<sup>6</sup> There may be an accumulation effect here: people can make use of several services simultaneously, both within and outside the areas covered by the three Acts, and also in more than one of those areas. We will look at this multiple service use in the next section

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#### Box S.1 Difference in measurement between data per Act, and multiple service use

The data on use of services under each of the three Acts is drawn from national statistics published by CBS StatLine. The figures relate to the number of services, which means that someone who uses the same service twice is counted twice.

In looking at multiple service use and the dynamic in use of services, we corrected for double-counting within services, Acts and the social domain as a whole, so that these are unique clients. However, it is not possible to take account in those statistics of the use of home and transport services (Wmo 2015) or of youth support services funded from a personal budget. As in the previous reports, we do make allowance for the users of services funded through the Sheltered Employment Act (Wsw) and recipients of benefits such as those for people without capacity for work (through the Invalidity Provision (Early Disabled Persons) Act (Wajong)), the Older and Partially Incapacitated Unemployed Workers Income Scheme; (IOAW) or the Older and Partially Incapacitated Former Self-employed Persons Income Scheme (IOAZ) and the Surviving Dependants' Act (Anw). This implies that we apply a broad definition to the target group of the Participation Act. Information on multiple service use in 2019 was not available in time to incorporate in this report, which means that 2018 is our most recent measurement year.

Our estimate for 2018 is that 1.6 million persons from 1.4 million households were using multiple services in 2018 (chapter 4). If we also include the large (425,000) group of users of home and transport services without individual Wmo-2015 services, we estimate that in 2018 there were roughly 2 million users of one or more services in the social domain, from 1.8 million households.

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### Growing use of services

In 2019, roughly 600,000 people used a service provided through the Participation Act, over 1.1 million a service funded through the Wmo 2015 and more than 400,000 a service under the Youth Act (figure S.1). Use of services provided under all three individual Acts is growing. The increase is greatest for the Wmo 2015, with service use rising by 19% between 2015 and 2019, but use of Youth Act services is also growing strongly (17%). Use of Participation Act services shows relatively less change, with a slight rise being followed by a slight decline.

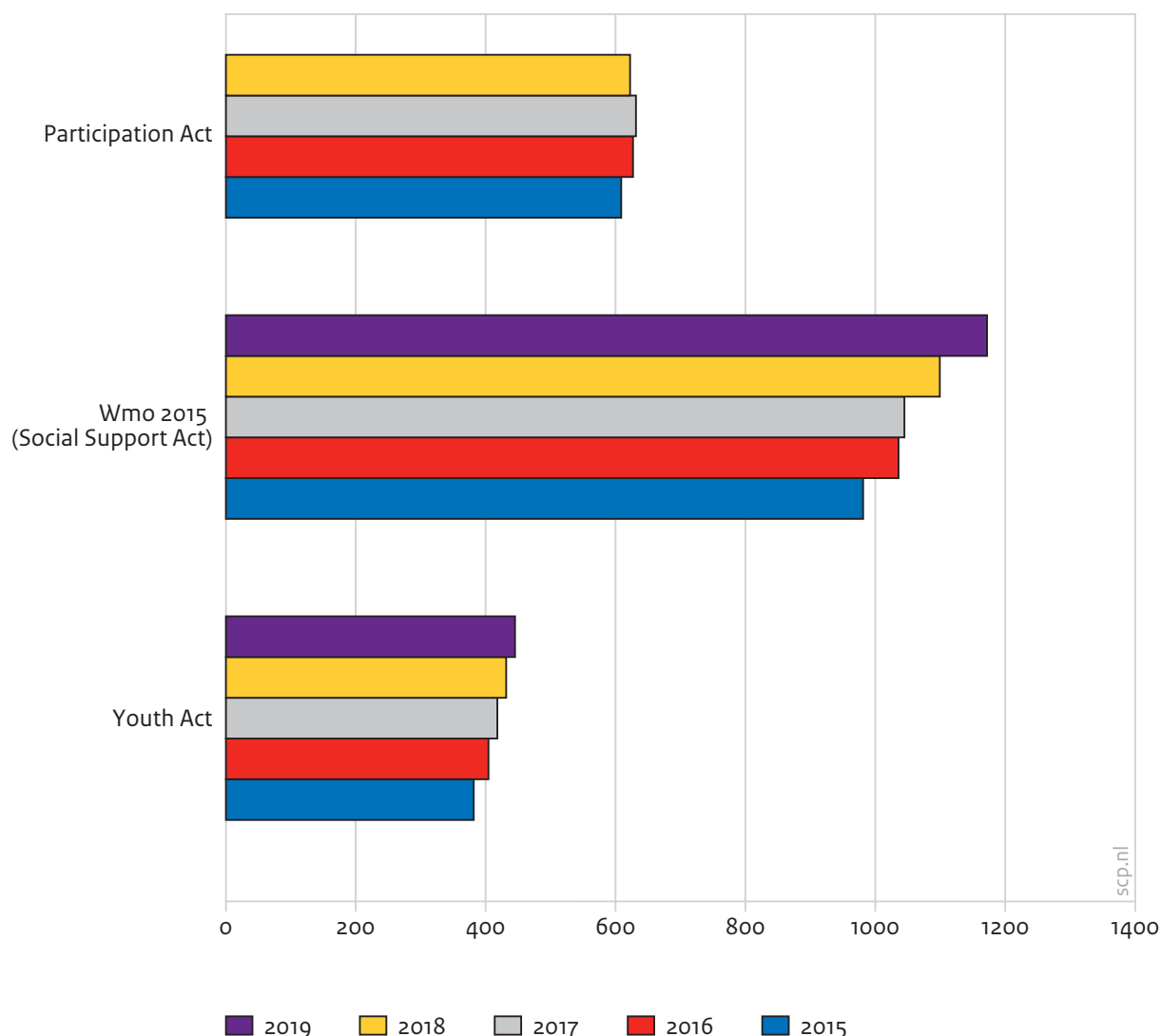
### Participation Act: social assistance benefit growing, reintegration unclear

Trends in the individual services provided under the Participation Act differ over time. The total number of social assistance benefits in payment rose between 2015 and 2017, after which it fell again. It is difficult to identify a trend for the total use of reintegration instruments, because 2019 is not readily comparable with earlier years.<sup>7</sup> As regards use of instruments which do lend themselves to comparison over time, we see an increase in use of wage cost subsidies and a reduction in the use of participation placements.

People with a non-Western migration background are overrepresented in use of both social assistance benefit and reintegration services (accounting for roughly half the users). The figures on multiple service use (chapter 4) show that users of services provided under the Participation Act include a relatively high proportion of low-income households and single-parent families. Take-up of social assistance benefits is much less dynamic than the use of reintegration services, with fewer people moving onto and off benefits, suggesting that social assistance benefit recipients are a long-term user group.

Figure S.1

Summary of service use by Act, 2015-2019 (absolute figures x 1,000)<sup>a</sup>



Example: In 2015, 380,000 young people used a Youth Act service; the figure in 2019 was 443,000.

- a The year 2019 is missing from the Participation Act figures, because the combined reintegration and social assistance benefit figures were not yet available at the time of writing this report.

Source: CBS (StatLine, SCP-Stapelingsbestand 2015, 2016, 2017; CBS stapelingsbestand 2018); SCP treatment

### Wmo 2015: growing use of support services

The use of services provided under the Wmo 2015 rose in the period 2015-2019, with just under 1 million unique clients in 2015 and almost 1.2 million in 2019. This increase manifests itself primarily in mobility aids and services, residential and respite services and support at home. Help provided with the household shows a different pattern, with falling numbers up to and including 2017, stabilisation in 2018 and an increase again in 2019. Around half of all Wmo 2015 clients are aged over 75, though the share is slightly lower in 2019 than in 2015. Those using household help and mobility aids and services are mainly

aged 75 or over. The share of over-75s using support services at home is smaller, at around a quarter; here it is 30-59 year-olds who are most strongly represented.

The dynamic in the use of Wmo 2015 services, in terms of 'inflow' and 'outflow', is greater than for the Participation Act, especially as regards support at home and household help.

### Youth Act: use of youth support services growing, youth protection and probation services declining

Youth support without residential services accounts for the vast majority of users: more than 400,000 (approximately 90% of all users of support services) in 2019. The number of users of youth support with residential services is much lower, as it is for youth protection and probation services. The rise in use of youth support services between 2015 and 2019 is due to an increase in the use of youth support with residential services. The biggest increase is in services provided by the community social care team.

Boys use youth support services more than girls, and especially youth probation services. Children from single-parent families more often use youth support services, while young people with a non-Western migration background figure relatively strongly among users of youth probation, youth protection and youth support with residential services.

Use of youth support services is highly dynamic (a relatively high 'inflow' and 'outflow' compared with the total number of programmes per year). This applies particularly for youth support without residential services; the dynamic is lower for youth protection and youth probation services.

The number of referrals to youth support services via the community social care team has increased, although most referrals are still made by general practitioners.

#### S.1.4 Use of multiple services and dynamic in the social domain

##### Roughly 10% of the population use services

At the end of 2018, the Dutch population numbered more than 17 million people living in 8 million households. If we leave Wmo 2015-funded transport services out of consideration, we find that 1.6 million people (10% of the population) used one or more individual services in the social domain, provided under the Participation Act, Social Support Act or Youth Act (see Box S.1 for more information on transport services). Given the possibility that several people within a household may be using a service, the users form part of almost 1.4 million households. This means that 17% of households in the Netherlands used one or more individual services in 2018.

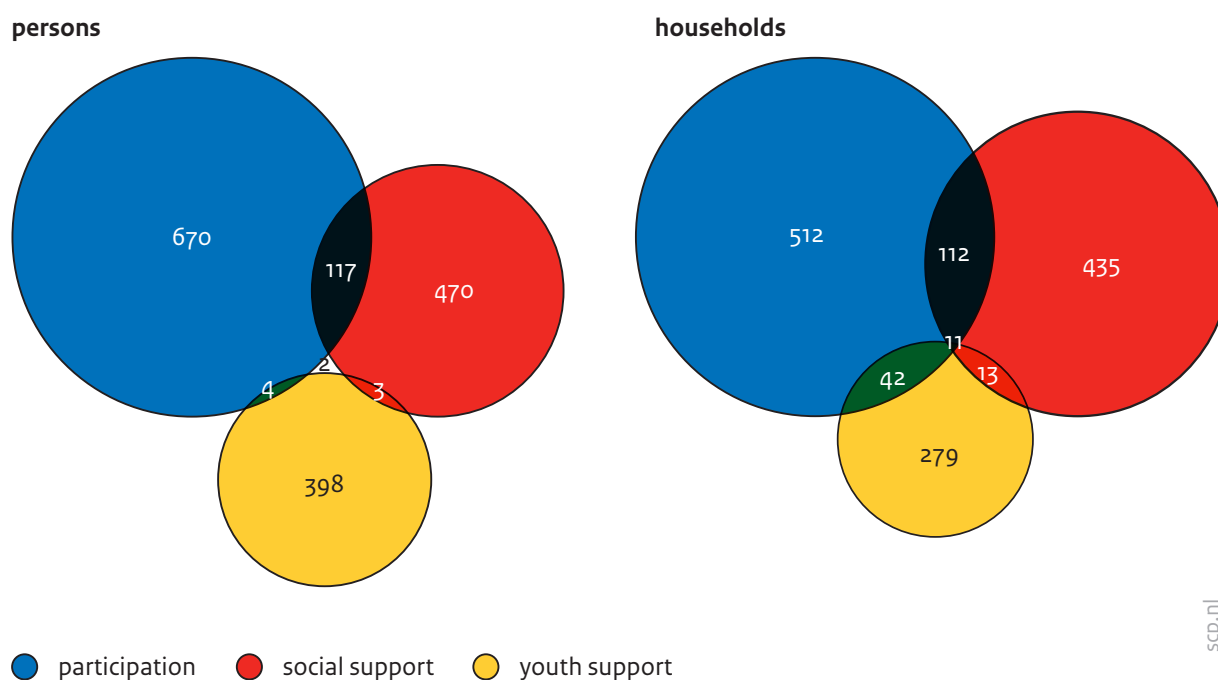


### Use of multiple services across the different Acts relatively limited

The share of multiple users, i.e. individual users of services provided under more than one of the three Acts, amounted to 8% of all users in 2018. The figure was just under 13% for households that used services. These percentages show a slight increase compared with 2015, when 6% of individuals and 11% of households used multiple services (Pommer & Boelhouwer 2016, 2017; Pommer et al. 2018). The number who use services provided under different Acts is relatively small, but still amounts to 126,000 individuals and 177,000 households (figure S.2). At individual level, this multiple use often involves combinations of Participation Act services and social support, although households often combine Participation Act services (parents receiving social assistance benefit) with youth support services (children).

Figure S.2

Use of combinations of services in the social domain by relevant Act, 2018 (absolute numbers of users (left) and households (right) x 1,000)



Example (left-hand figure) In 2018, 117,000 individuals used both a Participation Act service and a social support service.

Source: CBS (SCP-Stapelingsbestand 2015, 2016, 2017; CBS stapelingsbestand 2018); SCP treatment

### Use of multiple services under one and the same Act more common

Use of multiple services provided under a single Act is more common. For example, a third of households receiving Participation Act services use two or more of those services. The equivalent figures for social support services and youth support services are a fifth and an eighth, respectively, of households that use these services. Multiple use of Participation Act services or different forms of social support (provided under each of these Acts) rose slightly between 2015 and 2019, while multiple use of youth services declined slightly.

### Multiple use outside social domain as well

Both the use of individual services and of multiple services provided under the different Acts are common among groups who are in a vulnerable position. Low-income households and households with a non-Western migration background use multiple services across the different Acts much more often than other groups.

As stated, multiple use of services in a household is not limited to the social domain. Households with problematic debts or contacts with the police (as suspects) frequently use services in the social domain (mainly Participation Act services).

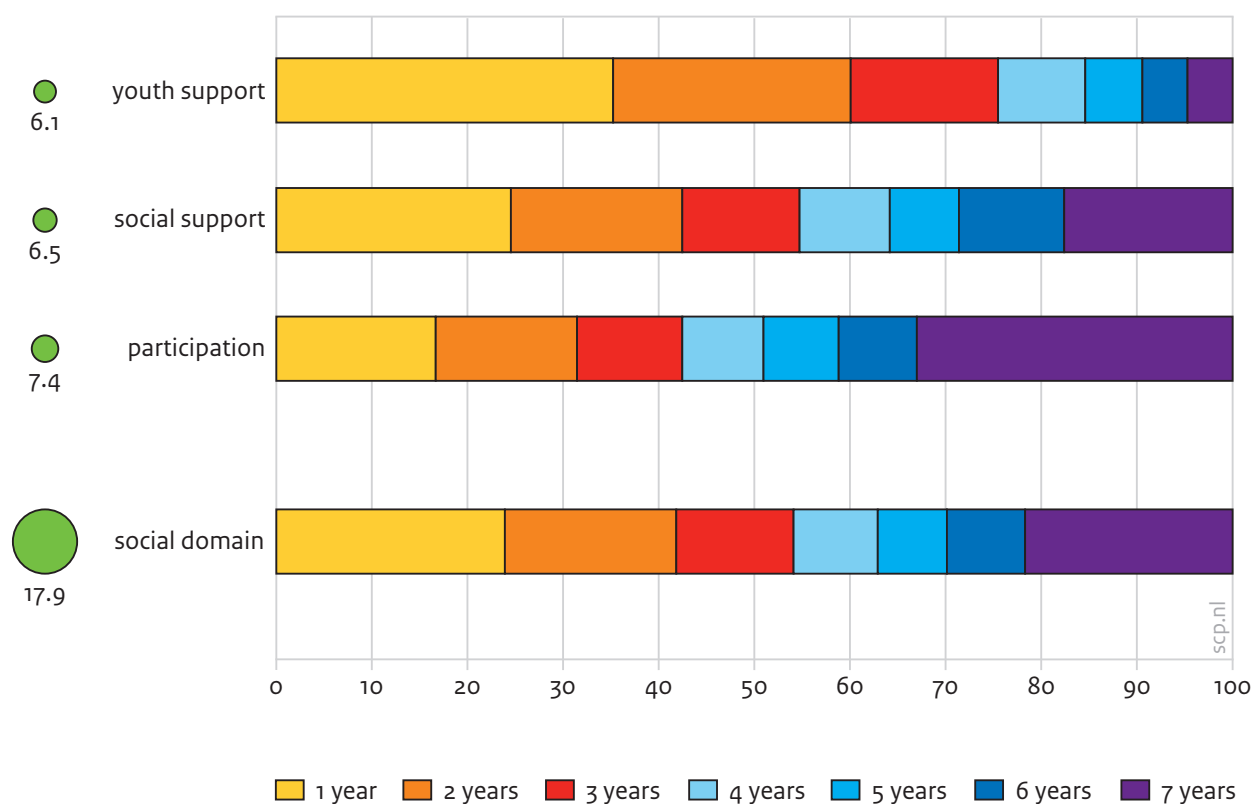
### Service use and service use dynamic greatest for youth support services

There are groups who make long-term use of services and groups who use them for only a short period (see figure S.3). Almost a third of users of Participation Act services did so throughout the entire research period (seven years); this was often social assistance benefit. 17% of users of social support services are long-term users (all seven years); this group mainly uses domestic help. The dynamic is greater for youth support services: only 5% of users of these services did so in all seven research years (often youth support with residential services, or youth protection). The reason for this is that the programmes are generally relatively short; the fact that people aged over 18 are generally no longer eligible for youth support has only a limited effect.

Reuse can be a factor for all services, i.e. users of a service who stop using it and then begin using it again more than a year later. This reuse of services is greatest for youth support, especially without residential services (17% of users). Among users of Participation Act services, reuse occurs mainly for reintegration services (12%), and in social support it occurs mainly for support at home (11%).

Figure S.3

Persons who used a combination of services under all three Acts in the period 2012-2018 (in percentages of total use (bullets, left) and the number of years of use (in percentages of use per service (bar chart, right)<sup>a, b, c, d, e, f, g</sup>



Example: Of the total number of people entered in the Municipal Personal Records Database (BRP) in the period 2012-2018, 5.4% used only a Participation Act service in one or more years (bullets on left of figure). Around 30% of these persons used this service for all seven calendar years (bars on right of figure).

- a The calculation is based on persons who were entered in the BRP throughout the entire period 2012-2018.
- b The average use in the first column is higher than in the individual years, because this refers to use in one of the seven years studied.
- c For 2012 we have no information on the use of home and transport services. For 2012, 2013 and 2014 we have no information about sheltered housing. As a result, the multi-year use of these services is underestimated.
- d In 2014 the registered use of youth support services is low due to problems with youth mental health services. As a result, the multi-year use of youth support services is underestimated.
- e The use of youth support with residential services has been adjusted. In 2012 and 2014, the selection from indications under the former Exceptional Medical Expenses Act (AWBZ) for low-intensity care packages which were transferred to the Youth Act were not fully transposed into the basic data. The selection was however based on the corresponding selection in 2013. This probably results in a slight overestimate of the use of youth support with residential services.
- f Excluding users of personal budgets via the Youth Act.
- g Excluding users of transport services without other services.

Source: CBS (SCP-Stapelingsbestand 2015, 2016, 2017, CBS-Stapelingsbestand 2018); SCP treatment

### S.1.5 Differences between municipalities

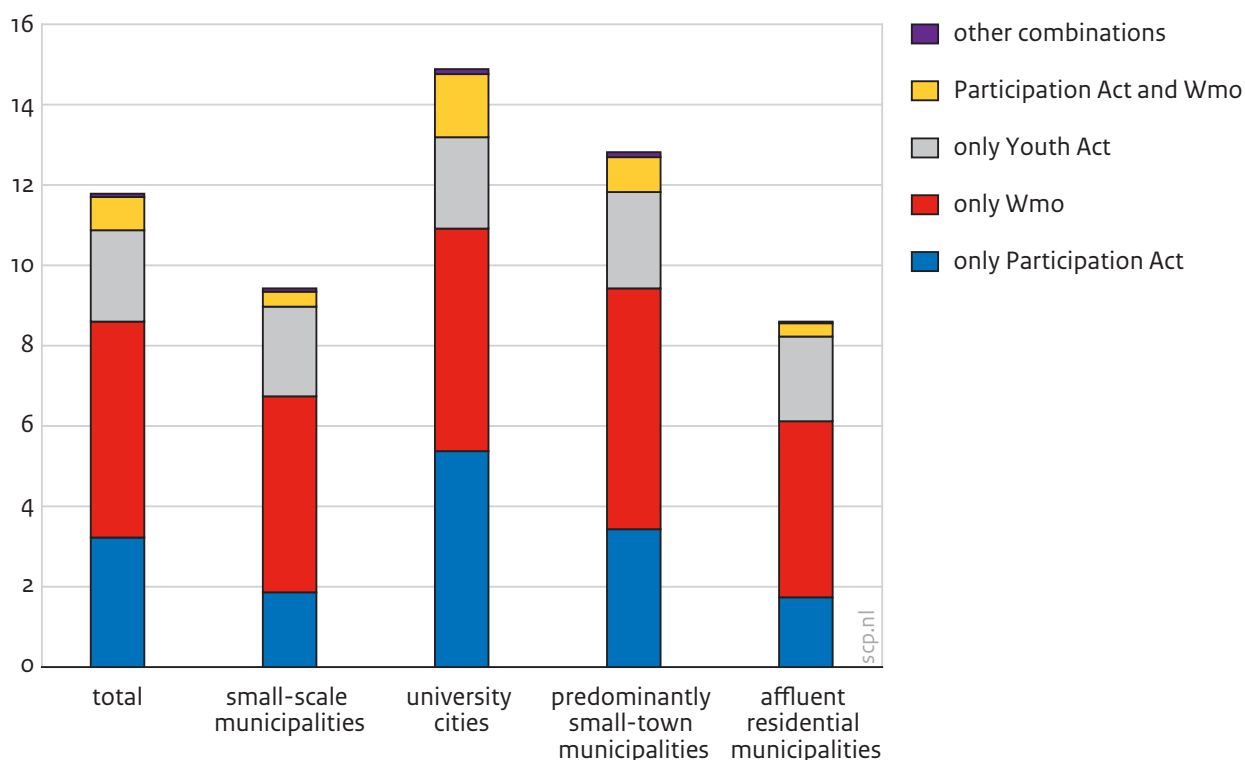
The population profile of the municipality and the policy pursued by the local authority influence the use of services in the social domain. Some groups are more likely to have problems, and therefore to use services, than others. These groups, which are in a vulnerable position because of those problems, are often concentrated in particular municipalities or regions. We first look exclusively at demographic and socioeconomic characteristics. In a municipality with more young people, for example, use of youth support services is likely to be higher than in municipalities with fewer young people, while in a municipality where lots of older people live, the use of Wmo 2015 support services will be higher than in municipalities with few older people. Zooming in on these characteristics creates an initial impression of the background to differences in use of services between municipalities. Since not all differences can be explained by demographic and socioeconomic characteristics, we then go on to look at other characteristics, which can also be of specific relevance for the use of services provided under the different Acts.

In this report we look at four types of municipality: small-scale municipalities; university cities; predominantly small-town municipalities; and affluent residential municipalities.<sup>8</sup> We find that use of services – both per capita act and for the social domain as a whole – varies depending on the type of municipality (figure S.4). Service use is high in municipalities which we characterise as university cities and predominantly small-town municipalities, and low in small-scale municipalities and affluent residential municipalities. Total use of services in university cities is for example more than six percentage points higher than in affluent residential municipalities, and the use of Participation Act services almost seven percentage points higher. Although these differences are lower for Wmo 2015 and Youth Act services, at just over three percentage points, they are still substantial. The picture remains virtually unchanged over the period 2016-2018.

The differences between municipalities can thus be attributed in part to the demographic and socioeconomic characteristics of the population. Those characteristics do not explain all the differences between municipalities; policy and social cohesion in the municipality also influenced use of services; however, we have no information on these factors. What we do have information on are factors such as the presence of physical disabilities, use of medicines, housing situation and available care.

Figure S.4

Use of one or more services in the social domain by Act or combination of Acts in 2018, by municipality type (in percentages of the population)<sup>a</sup>



a Based on data from 298 municipalities.

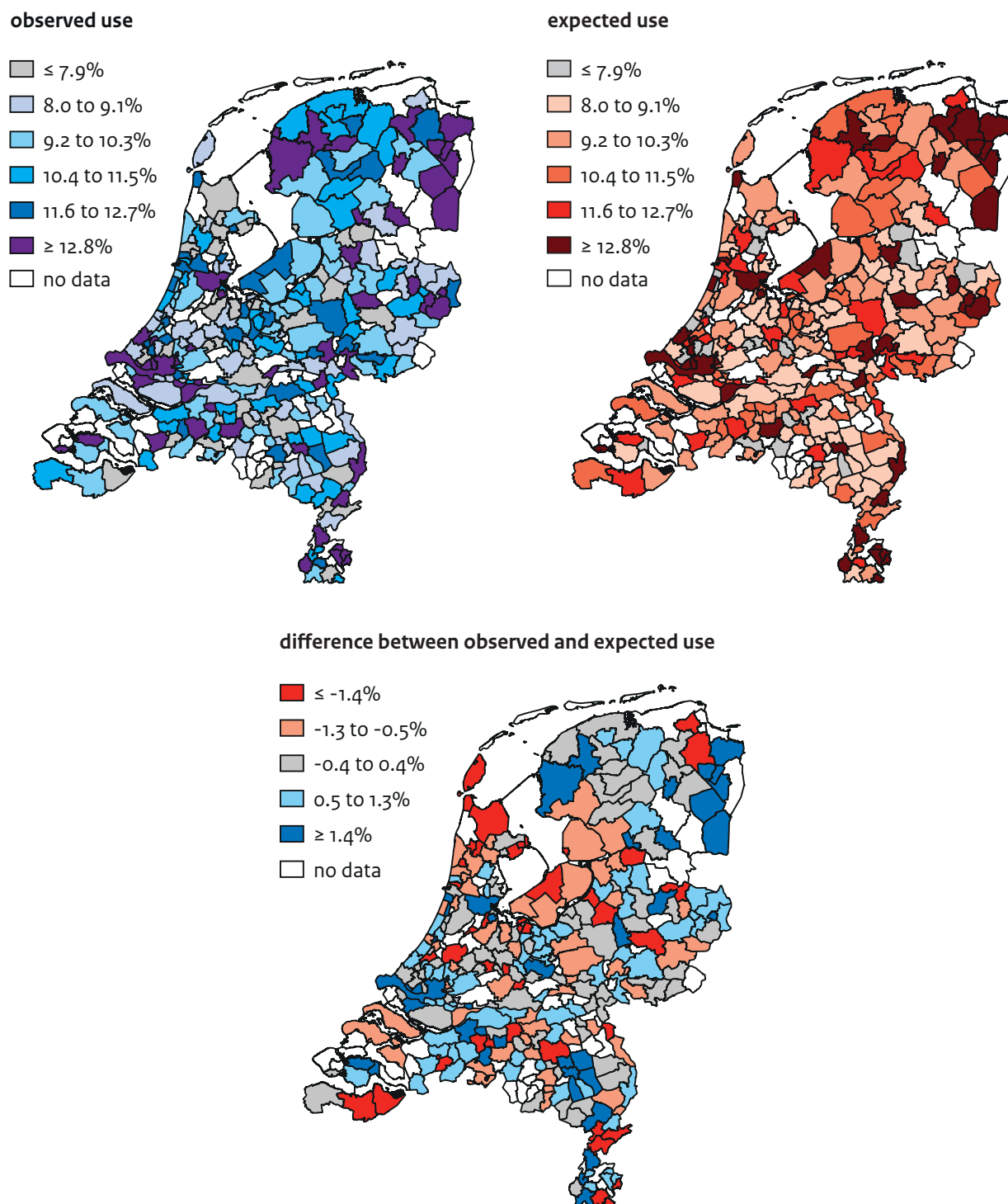
Source: CBS (StatLine; Gemeentelijke Monitor Sociaal Domein); SCP treatment

We see high use in the large cities and in the peripheral regions of the Netherlands. This applies both for services under each individual Act and for the social domain as a whole (figure S.5, dark-coloured municipalities at the top left of the figure). Based on the extensive set of characteristics, we apply the approach used in earlier SCP studies on regional differences in the social domain (e.g. Ooms et al. 2017; Pommer et al. 2018; Schellingerhout et al. 2020) to examine differences between individual municipalities in more detail. These characteristics also lead to the expected use (S.5, right). However, differences remain between municipalities which we cannot explain using these characteristics (figure S.5, bottom; blue indicates that the observed use is higher than expected, pink/red that the observed use is lower than expected).

It is worth noting that the level of use is not a measure of the performance of the local authority; a high level of use may for example be linked to a vulnerable population, but also to having a clear picture of the people who need help.

Figure S.5

Use of services in the social domain<sup>a</sup>, 2018 (in percentages of the population, observed (top left), expected (top right) and the difference between them (bottom))<sup>b</sup>



a In some municipalities there is no information on the use of one of the dependent variables, or the local authority did not supply data about the Wmo 2015 for the Municipal Social Domain Monitor (*Gemeentelijke Monitor Sociaal Domein*). The analysis was carried out on data from 290 municipalities.

b Here the expected use percentage was deducted from the observed use percentage.

Source: CBS (StatLine); SCP treatment

### S.1.6 The social domain beyond the individual services

Register data on individual services do not give a complete picture of the actual/potential use of services in the social domain: In this report we therefore provide additional information about services with partial registrations, about services without registrations and about non-use. This gives us an overall picture of the size of the group of potential users. There are general, freely accessible services, for which no registers are available with national coverage, or which are only partly registered, so that it is not possible to give national figures. This is the case for sheltered housing, and in particular shelters. Although information is available on most sheltered housing, services sometimes fall outside the social domain registers, or the figures are not submitted to Statistics Netherlands (CBS). Groups who make use of sheltered housing are mainly people with intellectual disabilities, mental health problems or debts who need support with independent living. Sheltered housing can also be used by victims of domestic violence. The total use of shelters is even less clear. Groups who make use of shelters are homeless people, young people living on the streets and people without documents.

There are also general services for which the use is not registered. Closer analysis of survey research (Social Domain Index) sheds light on the use of three such services: general social work, community centres and meals services. The survey data indicate that general services not only meet a need on the part of people who are already using individual services, but also of people who are not using any individual services: one in ten people who do not use an individual service do use one of these three general services. These are often people with problems: often older people, single people and people with a lower education level or without work.

The survey data show that there is a sizeable group of people who, although they have problems, do not use any general or individual services. However, it is not easy to identify well-defined groups from these figures, because it is unclear whether these non-users need publicly funded help. It may be that they are able to solve their problems themselves or with help from their network, and if they do need help, it is not always clear which individual or general services would benefit these groups most.

Finally, there are groups of people who we know do not use any services, but where it is difficult to estimate the number of people involved, or to what extent they are faced with problems. Two examples are the 'invisible young' and 'stay-at-home children'. The invisible young are young people aged between 15 and 27 years who are not in education, do not work and are not known to the Employee Insurance Agency (UWV) or the local authority. It is unclear how many of them there are and what proportion of them have problems. 'Stay at home children' are younger children who live at home and do not go to school. Although the numbers of these children are known, it is unclear what proportion of them are in a problematic situation.

## S.2 Discussion

### S.2.1 Trends

In this report we describe trends in use of services in the social domain in the Netherlands between 2015 and 2019. A large number of people – around two million each year – receive care and support provided under one of the three Acts governing services in the social domain (Participation Act, Social Support Act, Youth Act). The groups that use these services are often in a vulnerable position, so one might argue that the services are used by the people for whom they are intended. For example, people aged over 75, often with less robust health, are important users of services provided under the Social Support Act (Wmo 2015). Services provided under the Participation Act are relatively often used by people with a non-Western migration background and people with a lower education level, who are often in a vulnerable position on the labour market. However, earlier reports (Van Echtelt et al. 2019; Friele et al. 2018; Hilderink et al. 2020; Kromhout et al. 2018, 2020) have also shown a number of worrying or notable trends. We look at a number of these trends below, based on the findings of our research and the sticking points highlighted in other research.

#### Slight increase in users of services in the social domain

Around 10% of individuals and 17% of households in the Netherlands made use of a service in the social domain in the period 2015-2019. Use of services provided under the Wmo 2015 and the Youth Act showed an increase. There were also some shifts in the use of specific services (for example, an increase in the number of young people receiving youth support services, and more use of reintegration services). The characteristics of the users are stable over time, and did not differ markedly in 2019 from 2015. Wmo 2015 services are for example largely used by the over-75s, and boys use youth support services more than girls.

#### Sticking points in youth support services

Use of youth support services increased between 2015 and 2019, which is not in line with demographic developments, as the number of young people in the Netherlands is declining. Although we see a slight fall in the use of youth probation and protection services, the use of youth support services, which accounts for around 90% of the total, increased sharply in the period 2015-2019. This suggests that the mental health of young people is deteriorating, as also posited among others by the National Institute for Public Health and the Environment (RIVM) (2018). It is also possible that this increase is due to a greater focus by local authorities on prevention and early identification, especially in the initial phase of the decentralisation operations in 2015. Over the longer term, prevention could lead to a reduction in the use of (more intensive forms of) youth support services, but this cannot be determined with certainty at this juncture.

The growth in youth support services is a concern for local authorities (including financially), because it is difficult to identify precisely what lies behind it (see also chapter 2). This makes it difficult to get a grip on expenditure on youth support services. We should



note here that many of the referrals to youth support services are made via general practitioners or the courts, and therefore lie outside the sphere of influence of local authorities. In line with our results, recent research by Andersson Elffers Felix (AEF) (Hilderink et al. 2020) shows that the increase in the number of clients for youth support services is due to the fact that the number of new users remains reasonably constant over the years, but the number of those who stop using these services is declining. One conclusion of the report is that the per-client cost and duration of youth support services has increased.<sup>9</sup> The numbers of clients joining and leaving youth probation services are roughly in balance. That is not very surprising, since use of these services is linked to the number of available places. However, research by the Dutch Health and Youth Care Inspectorate (IGJ) suggests that there are also some structural problem areas. The IGJ recently observed among other things that there are capacity problems in providing care to the target groups for youth protection and probation (IGJ 2019a), and that issues with waiting lists mean young people are having to wait too long for help (IGJ 2019b).

### Changing role of community social care teams

Community social care teams are an important access route to services in the social domain (Kromhout et al. 2020). Our research shows a changing role of community teams within youth support services. The number of referrals to these services from community teams rose in the period 2015-2019, and community teams themselves are also increasingly providing youth support services themselves (see also Van Dodeweerd 2020). Community teams thus now play a bigger role in youth support services. This could offer local authorities an opportunity to gain a better picture of the growth in these services. However, more research is needed on this, possibly in combination with the role of community teams in the delivery of social support services. Research by the Netherlands Bureau for Economic Policy Analysis (CPB) (Benda et al. 2020) shows that the deployment of community social care teams and GP practice nurses has not led to a decrease in the number of children receiving secondary care (all youth care and support services which require a referral). Other research, also by CPB (Van Eijkel et al. 2020a), suggests that the deployment of community teams does not lead to a reduction in use of Wmo 2015 services. Kromhout et al. (2020) also note a shortfall in outreach work by community social care teams.

### No visible shift from intensive to non-intensive individual social support and youth care services

An expected outcome of the decentralisation operations was that local authorities would provide (non-intensive) generally accessible services first, before deploying specific (intensive) individual services. As the use of general services is not registered (or at least not uniformly), it is unclear whether this envisaged shift has actually taken place. There has been a visible increase in use of individual youth support services (Youth Act) and social support services (Wmo 2015). Part of the increase in use of social support services in 2019 may perhaps be explained by the introduction of the subscription tariff (VNG 2020). As regards

youth support services, it is more difficult to give an explanation for the increase in use (Van Dodeweerd 2020, see also above).

There thus appears to be no evidence of a reduction in use of social support services (Wmo 2015), but that can only be definitively determined when we know more about the deployment of general services.

There are a number of developments in youth support services which could indicate the start of a reduction in service use. Our research shows an increase in the amount of youth support services being provided by community social care teams, potentially indicating a shift towards more generalist help (which is what community teams often provide), with more specialist support being provided by specialist providers. An increase in deployment of community teams could also be an indication of a greater focus on prevention. We also see an increase in the proportion of help provided by young people's networks, enabling them to continue living and being supported in the home setting. Finally, an increase can be observed in family-specific help, in which the focus is not just on the child, but on the whole family.

The evaluation of the Participation Act (Van Echtelt et al. 2019, see also Kromhout et al. 2020) does reveal a shift from 'intensive' to 'non-intensive', primarily because the access criteria were adjusted. It should be noted here that there are financial incentives for local authorities to help large numbers of people into work. As a result, people who need a little support receive help more often, while people with bigger problems are more often ignored. Making statements about such a trend is made more difficult by the changes introduced in 2019 in the way reintegration services are recorded. Our data do show a reduction in the number of people receiving social assistance benefits between 2015 and 2019, and a concomitant increase in use of reintegration instruments, with a fall in the use of participation placements and a rise in sheltered workshop places and wage cost subsidies. It is unclear whether this constitutes a reduction in service use as intended on the introduction of the decentralisation operations.

### Multiple use and multiple problems

As also found in earlier Overall Reports (Pommer & Boelhouwer 2016, 2017; Pommer et al. 2018), a relatively limited percentage of individuals and households make use of multiple services provided under more than one of the three relevant Acts. In 2019, just under 8% of individuals and 13% of households used services in the social domain. However, the problems facing those households are considerable, and the quality of life in those families is lower than in other households (see e.g. Schellingerhout 2020). The figures on use of multiple services increase if we also include related problems, such as debts or coming into contact with the police as a suspect (see e.g. chapter 4). Problematic debts are for example often accompanied by more use of services in the social domain, especially in relation to participation. Households in which there has been contact with the police because a family member is a suspect also more often use these services (again, especially participation services). It is therefore important when configuring support to look beyond the immediate problems in the areas covered by the three decentralised Acts. Other research suggests

that the costs of helping multi-problem families are in many cases high (Kann-Weedage et al. 2016).

There was a slight increase between 2015 and 2018 in the percentage of individuals and households making use of multiple services, and the coronavirus crisis may lead to a further increase (see § 5.2.2). This could mean that there are more families with multiple problems, but it could also mean that local authorities are trying to offer more integrated help (in line with the principles of the decentralisation operations) and accordingly more often offer help provided under more than one of the Acts simultaneously.

### Regional/local differences are important

There are wide local and regional differences in the use of services in the social domain, as several studies have shown in recent years (e.g. Batterink et al. 2018; Engbersen & Uyterlinde 2017; Engbersen et al. 2018; Gilsing et al. 2020; Pommer et al. 2018; Schellingerhout et al. 2020). The analyses in this report confirm this once again (chapter 5). There are wide differences between municipalities in the use of services provided under all three of the relevant Acts (Participation Act, Social Support Act (Wmo 2015), Youth Act). In all cases, and across the social domain as a whole, service use is high in the large cities and in the peripheral regions of the Netherlands. These regional differences do not arise in a vacuum, but are partly linked to the degree to which people in disadvantaged positions are concentrated in particular regions. As also observed by Schellingerhout et al. (2020), the patterns of high use in the large cities and the peripheral regions are not unique to the social domain; there are for example disadvantaged urban neighbourhoods where there is not only high use of services in the social domain, but where there are also many problems with debts and crime (see e.g. Gemeente Amsterdam 2019; Gemeente Rotterdam 2018; Waarstaatjegemeente.nl 2019). The problems in the peripheral regions of the Netherlands also appear to be greater in many respects than elsewhere. Large tracts of these regions are for example faced with a contracting and ageing population, which means there are relatively more people with health problems (CBS 2017). The economic situation is also often less healthy in such regions: poverty is more common, incomes are often low and unemployment often high (Hoff & Van Hulst 2019; Waarstaatjegemeente.nl 2019). Our research shows that the differences between municipalities can be explained only partially by characteristics of the population or of the municipality itself, echoing the findings in the Overall Reports (Pommer et al. 2018). Determining with any precision whether service use is relatively high or low is only possible by carrying out further research in the municipalities themselves. Looking at regional level at neighbourhoods or municipalities where the use of services is higher or lower than might be expected based on background characteristics can throw up options for gaining a better picture of trends in the use of services. Something like this is happening at the moment in the Haaglanden region around The Hague) for youth support services (Gilsing et al. 2020). This research showed that social cohesion and perceived safety within a neighbourhood are important supplementary characteristics which are associated with the use of youth support services. Those characteristics could also play a role in other regions or municipalities.

The wide regional differences, coupled with the finding that those differences cannot be fully explained by characteristics of the population, underline the importance of strong local governance, which is able to respond to the specific regional circumstances. In a recent report (*Rust, Reinheid, Regelmaat*), the Dutch Council for Public Administration (ROB 2021) points out the importance from a governance perspective of a good and clear distribution of responsibilities between central and local, as well as sufficient scope and opportunities for local authorities to shape policies themselves.

### Service use can be long-term

There are differences in the inflow and outflow of users of the services provided under the three Acts in the social domain. Youth support services, for example, generally involve shorter programmes, and are therefore characterised by a high dynamic. When it comes to social support services, especially domestic help tends to be used for a long time. That is not surprising, given that these services do not eliminate problems, but rather support people in dealing with them. But there are also many people who make long-term use of services under the Participation Act, and who are thus not able to participate in the labour market without help. There is also a large group who cease using a service and then begin using it again later. Although the extent of this ‘re-entry’ is not a direct indication for the quality of the service, it does suggest that the client’s ‘problem’ was not permanently resolved by the help provided earlier. Whilst all this means that efforts can be made to reduce the amount of help provided, it also implies that there are always likely to be groups whose problems will be such that long-term or repeated help is needed. A proportion of people with intellectual disabilities will for example need lifelong help, while for others continuous low-level support will be sufficient, which can be given when needed (Eggink et al. 2020).

### Social reforms on track?

SCP recently published an evaluation of five years of decentralisation operations in the social domain: ‘Social reforms on track?’ (*Sociaal domein op koers?*, Kromhout et al. 2020). That report shows that a great deal of progress has been made in achieving the objectives of the three Acts, but that the main effect to date has been a transition (devolution of tasks from central government to local authorities), with only limited evidence so far of a genuine transformation (working differently in the social domain).

The data on the social domain presented in this report largely corresponds with the data presented in *Social reforms on track?*, but sometimes offers more detail and nuance. We have already made some comparisons with *Social reforms on track?* above; here we reiterate our supplementary findings.<sup>10</sup>

Kromhout et al. (2020) report that it is unclear whether a shift is taking place in use from individual to general services, partly because we know little about the use of general services. Our study also makes clear that there is a large group of people who use general but not individual services.

Linked to this, like Kromhout et al. (2020) we observe no shift from intensive to non-intensive services in the use of individual services provided under the Youth Act and the Wmo 2015. There are however some trends which could indicate a shift towards lighter forms of youth care. There is for example a shift towards more help being provided via community social care teams, especially youth support services; The help provided through these teams is often generalist and not specialist. There is also an observable reduction in the share taken by youth protection and youth probation within youth support services. The shift towards lighter forms of help under the Participation Act is continuing. As also indicated by Kromhout et al. (2020), however, it remains unclear whether this reduction is as intended with the decentralisation operations, or whether it reflects the fact that people requiring more intensive forms of help are being ignored.

Kromhout et al. (2020) also comment on a lag in participation by people with a work-limiting disability. In line with this finding, our study shows that there is a substantial group of 're-entrants' into Participation Act services (they cease using services one year and begin using them again in a subsequent year). This implies that the services used by this group have made only a limited contribution to their participation in the labour market. As Kromhout et al. (2020) also report, the group of multiple users is small, but their share in the group of service-users is rising. Our data also confirm once again that they are a vulnerable group, who often also have problems in other areas (debts, contacts with the police). An integrated approach therefore needs to go beyond the social domain alone. Kromhout et al. (2020) observe that collaboration in the social domain remains problematic, whereas the increase in the percentage of multiple-use households amply demonstrates the importance of such collaboration.

This report shows that too little is known about people who do not have a support network and who receive no (informal or professional) help, or about people who are not receiving any help despite having problems. This fits in with the finding of Kromhout et al. (2020) that it is not always possible for people to rely on their own capacity and network. In other words, local authorities generally have an inadequate picture of the resilience, capacity and social networks of their residents.

In the evaluation of five years of decentralisation, Kromhout et al. (2020) set two challenges for parties involved in the social domain: (1) be realistic and think broadly; and (2) think from the perspective of the citizen. Our findings once again reinforce the importance of these challenges. Use of services (youth support and social support) shows a rising trend, and the reason for this is not always clear, making it difficult to gain a clear understanding of it. There is moreover a large group of potential users of services in the social domain, who may become actual users due to a change in circumstances (such as the coronavirus, for example). Thinking broadly is necessary because there are users who make use of multiple services in the social domain, but also of services outside the social domain. Given the large group of potential users, an approach to the social domain couched in

terms of the social responsibilities of citizens, i.e. expecting more from the citizen, is also appropriate.

### 5.2.2 Coronavirus and use of services in the social domain

The most recent figures presented in this report relate to the calendar year 2019.<sup>11</sup> It is uncertain whether the trends described will have continued in 2020 and will still continue in the years ahead. The coronavirus crisis has a major impact on the life situation of all groups in society and on the social problems with which they are confronted. There are for example families who are seeing their incomes drop and who may be forced to rely on social assistance benefit (Muns et al. 2020; Olsthoorn et al. 2020). At the same time, people are more frequently affected by loneliness or depression (De Klerk et al. 2021; Marangos et al. 2020; Plaisier et al. 2020).

The changing circumstances may influence the demand for services in the social domain. In many cases, there are as yet no definitive figures for 2020. In this section we describe the potential impact of the Covid-19 crisis on the use of services in the social domain.

#### Increase in number of potential users?

The services provided in the social domain are a response to social problems that people can have which they are not able to resolve themselves. It seems logical to assume that the Covid-19 crisis will have led to an increase in the number of people with such social problems and thus to an increase in the number of potential users.

As yet, however, the impact cannot be determined unambiguously. The impact of the economic crisis brought on by the coronavirus crisis is potentially considerable for the labour market position and income of many people, although the government support packages provide a buffer. The number of bankruptcies was for example at its lowest level in 2020 than at any time in this century (CBS 2021a). Another example: the potential impact of the coronavirus crisis on mental health is high (Marangos et al. 2020), but so far appears to be less bad than feared (De Klerk et al. 2021). During the first wave of the pandemic the number of suicides fell, as did the number of people going to their GP with mental health problems (Trimbos.nl).

At the same time, there are many signs that lots of groups are faring worse. There are more people with financial problems (Nibud 2020) and a sharp rise in unemployment in the spring of 2020<sup>12</sup> (especially among young people, low-skilled workers and people with a non-Western migration background) means there are more people at a remove from the labour market. At the lower end of the labour market, in particular, for example in flexible jobs, lots of people have lost their jobs or are in danger of doing so (CBS 2020a, 2020b; CPB 2020). There is a growing number of young people with mental health problems (De Klerk & Feijten 2021). There are indications that loneliness increased during the first wave of the pandemic (Marangos et al. 2020). In the summer of 2020 (just after the first wave), the well-being of the Dutch population declined (Plaisier & De Klerk 2020; see also Plaisier et al. 2020). The pressure on informal carers is increasing, partly because of the pressure on the social networks of those in need of help (De Boer et al. 2020). Professionals, for exam-

ple in mental health care, report a sharp increase in pressure of work and falling well-being (Van Bon-Martens et al. 2020). More cases of child abuse are also being reported by professionals (Vermeulen et al. 2021).

All in all, it seems likely that the number of potential users of services in the social domain will have increased due to the coronavirus pandemic. Will this also lead to an increase in actual use of those services?

### Increase in use of services?

The fact that the number of potential users of services in the social domain is rising need not automatically mean that demand for those services will increase. People with problems may for example find help within their own networks, or may be able to choose to buy in help themselves. It is also uncertain whether local authorities will be able to meet any increased demand; no information is available on this.

The figures that are available for 2020 show a mixed picture as regards the trend in the use of services. For example, take-up of social assistance benefits may have increased as a result of the pandemic, while use of youth support services has fallen. In many cases there may be a delayed effect which is not yet visible (it takes some time for increased demand to become visible in the usage figures). In many cases, the figures available are provisional.

### Participation

The number of social assistance benefits in payment appears to be rising through 2020 and 2021 (CBS 2021b), but it is not possible to make a firm direct link to the Covid pandemic. There appears to be a seasonal component in the number of social assistance benefits claimed, which also increased in the early months of 2018 and 2019. On the other hand, the number of people moving onto social assistance benefits was higher in 2020 and the number of people moving off these benefits appears to be lower than in previous years (CBS 2021c).

The use of reintegration instruments appears to be lower than in 2019 (CBS 2021d), but here again the figures are provisional. The reason for this reduction is not clear, and nor is the way in which this pattern relates to the Covid crisis: are local authorities using fewer reintegration instruments because of financial difficulties, or simply because the pandemic means there are fewer opportunities to guide people towards the labour market? Many of the reintegration instruments require people to be physically present at their workplace, something that is often not possible due to the pandemic.

### Social Support Act (Wmo) 2015

According to provisional figures from Statistics Netherlands (CBS), the number of clients receiving social support services provided under the Wmo 2015 was slightly higher in the first half of 2020 than in 2019 (CBS 2021e). In particular, there was a slight increase in the use of domestic help. The reason for this increase is unclear. It may be that these are for-

mer coronavirus patients who need extra help at home after discharge from hospital. The use of other forms of help fell slightly.

The findings of survey research do suggest a negative impact of the Covid crisis on the use of social support services (Nannes & Kanne 2020). In response to one survey, a quarter of Wmo 2015 clients reported in October 2020 that they were experiencing a negative impact on their care or support (these effects were not specified in any further detail). Half of council officials working in the social domain also reported that the pandemic had had (major) negative consequences for the care provided to residents in their municipality (Nannes en Kanne 2020).

### Youth Act

The most recent figures from Statistics Netherlands (CBS) show that the number of young people using youth support services was lower in 2020 than in 2019, and back to roughly the same level as in 2018 (CBS 2021f). The reduction is especially visible in ambulant care. In addition, the number of young people receiving youth protection remained roughly the same in 2020 as in 2019, while there was a slight fall in use of youth probation services (CBS 2021g).

The reason for this development cannot be definitively determined, but it is logical to assume a relationship with the coronavirus (and the restrictions). The fall was particularly marked in the initial phase of the pandemic. In addition, fewer programmes were started in 2020, and fewer were also completed (leading to an increase in the average length of programmes). It is as if youth support services were kept 'on hold' for a time, with limited numbers entering new programmes and those already on them spending longer completing them. This would imply that the number of new starters will increase again once the pandemic is over.

Since the onset of the crisis, attention has been given to the danger of an increase in domestic violence and child abuse (Vermeulen et al. 2021). That is because the pandemic has a negative impact on the characteristics which are associated with domestic violence and child abuse, namely poverty, mental health problems, and tensions within the household. Very recently researchers from Leiden University (Vermeulen et al. 2021) published an estimate based on reported incidents that the number of cases of child abuse has probably been three times higher during the pandemic than before it.

An increase in domestic violence and/or child abuse is not yet visible in the registers of 'Veilig Thuis' ('Safe at Home') organisation (CBS 2021h). These figures relate to the first half of 2020. It should be noted, however, that by no means all cases of domestic violence and child abuse are reported (see also chapter 6).

Youth care professionals report that the pandemic has made their work more difficult (MEE 2020). This is partly because young people's problems are more difficult to assess remotely, and it is difficult to build a relationship with new clients.



Summarising, we can say that the expectation is that the pandemic is leading to an increase in the use of services in the social domain. That increase will only become apparent over time; it is not yet clearly visible in the (provisional) figures for 2020.

### Consequences for and of non-use?

The Covid crisis can influence groups who do not use services in the social domain in a number of ways.

- There are signs that people deliberately chose to avoid the care system whilst the Covid restrictions were in place, out of fear of infection or because of a desire not to overburden the system (see Plaisier & De Klerk 2020). It is possible that this also played a role for the (other) services in the social domain.
- Some services in the social domain were shut down during the first wave of the pandemic or provided in a different way, for example via video calls (such as daycare and youth support). Informal carers were also often unable to provide their support.
- In this report (chapter 6) we discuss the potential user groups which are hard to find for policy and research. The Covid crisis led to a marked reduction in face-to-face contact with (potential) clients, which may have exacerbated the invisibility of these groups and made it even more difficult to contact them. Several parties have warned that an invisible demand may have arisen (MEE 2020; De Vries & Pols 2020; Werkgroep-Halsema 2020).

The consequences will also depend on people's own resilience and the support and help they are able to receive from those around them. During the first lockdown, we saw a great willingness for people to help and care for each other. It remains to be seen whether this was also the case during the later lockdown (from the end of 2020).

### Consequences only visible later and may differ from region to region

The consequences of the coronavirus crisis for the use of services and the social domain cannot yet be determined accurately. Those consequences are also likely to vary between different municipalities and regions, as groups that are at high risk of suffering negative consequences from the pandemic (such as people who have difficulty finding work) are not evenly distributed across the different regions.

This means that we need to be alert going forward for adverse developments, such as an increase in households with multiple problems who are unable to remedy the situation themselves. The figures already reveal a (small) increase in the percentage of multiple-use households in the social domain between 2015 and 2018, and Statistics Netherlands (CBS) has shown that the number of households using multiple services in the social domain on the reference date of the end of June 2020 was slightly higher than at the end of December 2019 (CBS 2021i). The growth in multiple problems can also occur outside the social domain (e.g. debt problems); the coronavirus crisis could exacerbate this trend.

In order to keep track of the consequences of the coronavirus crisis for vulnerable groups who may be able to use services in the social domain, good data will be needed. We discuss this in the next section.

### 5.2.3 Future monitoring in the social domain

In this report we have described trends in the use of individual services in the social domain. We have also taken a first step towards exploring the invisible segment of the social domain: the use of general services, potential user groups who are difficult to keep on the radar and people who do not use any services (even though they may well have a need that lies within the social domain). The descriptions in this report make clear that much of the information needed to provide proper steering within the social domain is lacking, and that additional input is also needed: starting more from the perspective of people with problems rather than users of services.

Table S.1 visualises the topics on which we would ideally like more information, and what the actual state of our knowledge is. The table mentions different user groups in the social domain, starting from the basis of the total group of people with social problems in the particular field concerned. We would ideally like to know how big each of these groups is, what the characteristics of the group members are and, perhaps most importantly (but not a topic covered in this report), what the quality of life is of members of the different groups and what role services play in that.

Table S.1

Current state of knowledge on use of services in the social domain

	size and characteristics of the group	quality of life/ contribution of services
people with problems in the social domain (potential users)		
able to do everything themselves or solve problems in own network	?	?
unable to do everything themselves or solve problems in own network		
makes no use of services	?	?
makes use of general services	?	?
makes use of individual services	✓	✓

?: We have insufficient knowledge in this field.

✓: There is some knowledge in this field.

In reality we only know the size, characteristics and quality of life of groups who make use of individual services in the social domain (although measurements of quality of life date from several years ago, in Pommer et al. 2018). For the Wmo 2015, even that overview is not fully complete<sup>13</sup>, and the data on use and characteristics is based on registers which

contain statistical noise. We have already referred to the differences in registration methods between local authorities.

We know too little about the people who use general services, about people who need but do not make use of services (or are invisible in the registers) and about people who have problems which they are able to solve themselves or in their own networks. It is important that information is also collected on these missing groups.

It could be said that, from the perspective of self-reliance, independence and reduction in publicly funded support, the goal of the decentralisation operations is to ensure that as many people as possible are in the groups ‘able to do everything themselves or with their own network; or ‘makes use of general services’. To achieve this, it must be clear what the make-up of these groups is and precisely what determines which group someone belongs to.

As in the previous report (Pommer et al. 2018), we would stress the need for permanent monitoring. National monitoring is necessary to provide central government with information to help it fulfil its system responsibility, and to give local authorities a frame of reference for their own policy development. The way in which the monitoring is currently set up, however, is becoming increasingly problematic since the practice in individual municipalities adds a further differentiation and there are key differences between municipalities in what is included in the different services.

The limited picture of the different groups arises partly because when collecting data we draw on registers of individual (customised) services. To improve the picture of developments in the social domain, SCP will opt for a different approach in future research, namely questioning people on the basis of an expected probability of having problems. We will begin the data collection with the group in the first cell of table S.1: potential users of services.

Qualitative research, for example among targeted groups, may also shed light on the use of general services and the relationship with the use of tailored individual services. The investigation begun in this report, focusing on general services, non-users and invisible groups, could be further expanded and deepened.

Monitoring of the functioning of the social domain should in the future also provide an insight into people’s quality of life, the services they use, the implementation practice and the administrative and financial frameworks. Good information as a basis for policy is also very important for robust local governance (ROB 2021). SCP will be pleased to make a contribution to this.

## Notes

- 1 Other services, such as debt counselling and special education, are sometimes also included in the social domain.
- 2 Preparatory work is under way for a new survey, but it is not yet clear when it will be possible to implement this. The report will in any event not be published before mid-2022.
- 3 Obviously, giving an outline of use of services does not provide a complete picture of the functioning of the entire system; that requires information about quality of life, implementation practice, administration and finance (e.g. Kromhout et al. 2020; Pommer et al. 2018).

- 4 For example, for people who were previously on the waiting list for a sheltered employment placement under the Sheltered Employment Act ((Wsw) and who now fall under the Participation Act, access to sheltered employment has been closed off. The chances of traditional social assistance benefit recipients finding work have barely increased since the introduction of the Participation Act. The chance of finding work has increased for young disabled people, but this is often part-time and (increasingly) temporary work (Kromhout et al. 2020).
- 5 Bill on addressing multiple problems in the social domain ('Wams').
- 6 This figure relates to use of individual services in 2018, the most recent year for which we have information on the social domain as a whole (which takes into account multiple service use). There is also sufficient information available in StatLine on use of services under the three individual Acts in 2019.
- 7 Due to changes in the municipal statistics on reintegration (Statistiek Re-integratie door Gemeenten (SRG)).
- 8 The four municipality types can be characterised as follows (Vermeij et al. 2021):  
Small-scale municipalities: few single-person and single-parent households; relatively low education level; relatively high assets; average incomes; few migrants.  
University cities: young; lots of single-person households; lots of highly educated people; low incomes; lots of residents with debts and on unemployment benefits; lots of migrants.  
Predominantly small-town municipalities: low education level; low assets; relatively large number of residents with debts; lots of disability benefits.  
Affluent residential municipalities: relatively advanced age; prosperous; high education level.  
The distribution of municipality types across the Netherlands can be found in chapter 5 of this report, figure 5.2.
- 9 Hilderink et al. (2020) also point to the possible upward impact on costs of the greater focus on early identification and prevention.
- 10 Some of the trends and sticking points highlighted by Kromhout et al. (2020) fall outside the scope of our study, and we are therefore unable to say anything about them; they are the scope for local authority policy; innovations in implementation practice; whether or not customisation is used; how caring society is; the complexity of the system of services in the social domain.
- 11 More recent national figures, particularly regarding multiple use, are not available.
- 12 The unemployment rate is now falling again; see cbs.nl.
- 13 There are two sources of information on the use of individual Wmo 2015 services, neither of which is entirely complete. The Municipal Social Domain Monitor (GMSD) lacks information on the use of services in a number of municipalities, while the data from the Central Administration Office (CAK) contains no information on the use of home and transport services.