



GGZNEDERLAND

Dutch Association of Mental Health
and Addiction Care

Mental Health Care in the Netherlands

Key Figures 2012

GGZ Nederland

Amersfoort, May 2014



Incidence of mental health disorders in the population of the Netherlands

% and number of Dutch in the age of 18 - 64 years with a newly developed psychological disorder on DSM IV Axis 1 in the last 12 months*

	1,8%	191,400
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Top 5 most common disorders*

Depression	1,3%	135,600
Specific phobia	0,7%	75,700
Generalized anxiety disorder	0,6%	64,400
Alcohol abuse	0,6%	66,000
Panic disorder	0,5%	53,500

* These numbers are computed for the total population of 18-64 years in the Netherlands on 1-1-2012 (10,557,188)



Prevalence of mental health disorders in the population of the Netherlands

Some form of psychological disorder 18,0%

Top 5 most common disorders*:

Depression 5,2%

Specific phobia 5,0%

Social phobia 3,8%

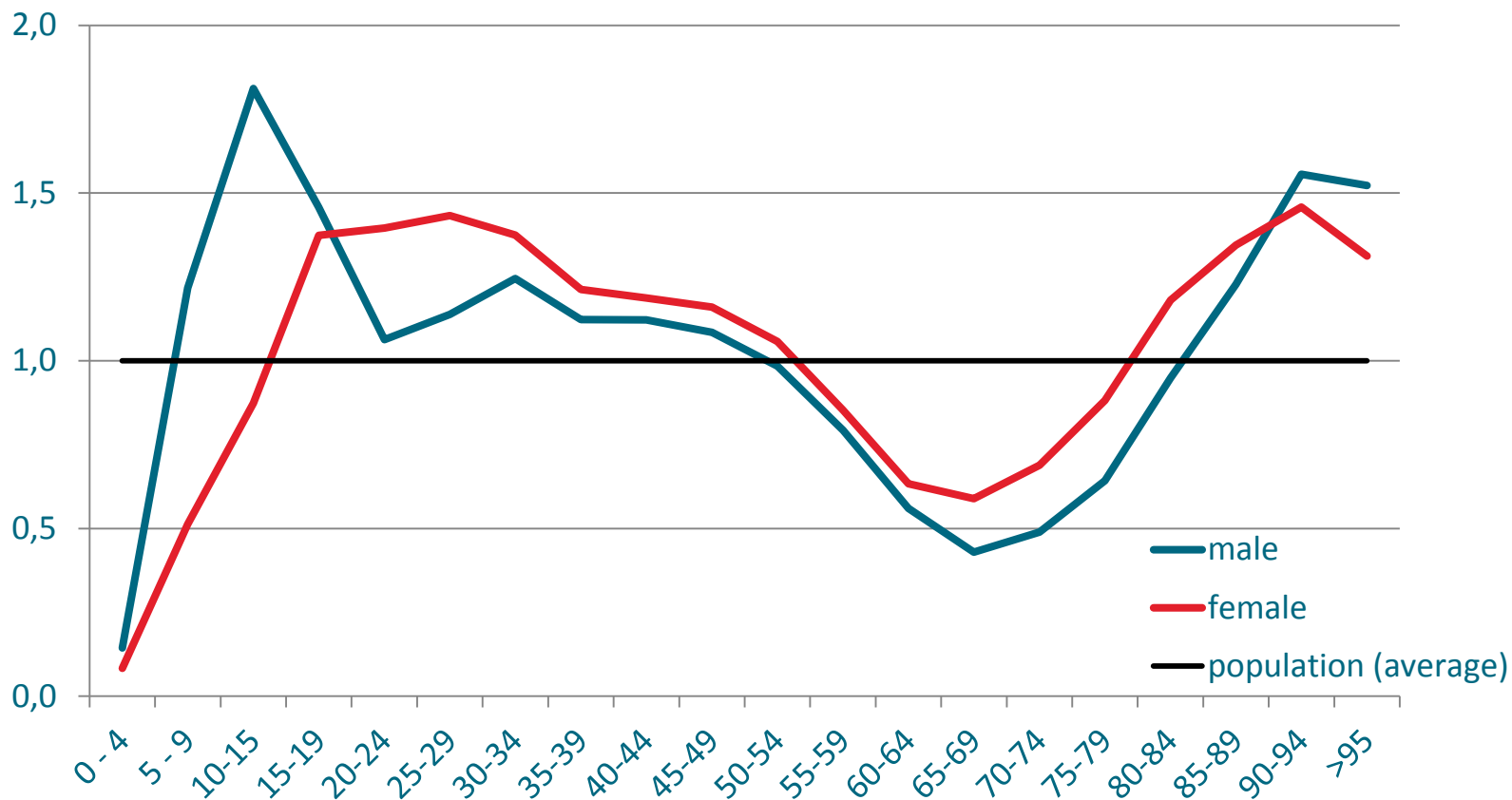
Alcohol abuse 3,7%

ADHD 2,1%

* prevalence in the past 12 months, residents aged 18-64 years



Use of mental health services per age group (2010)



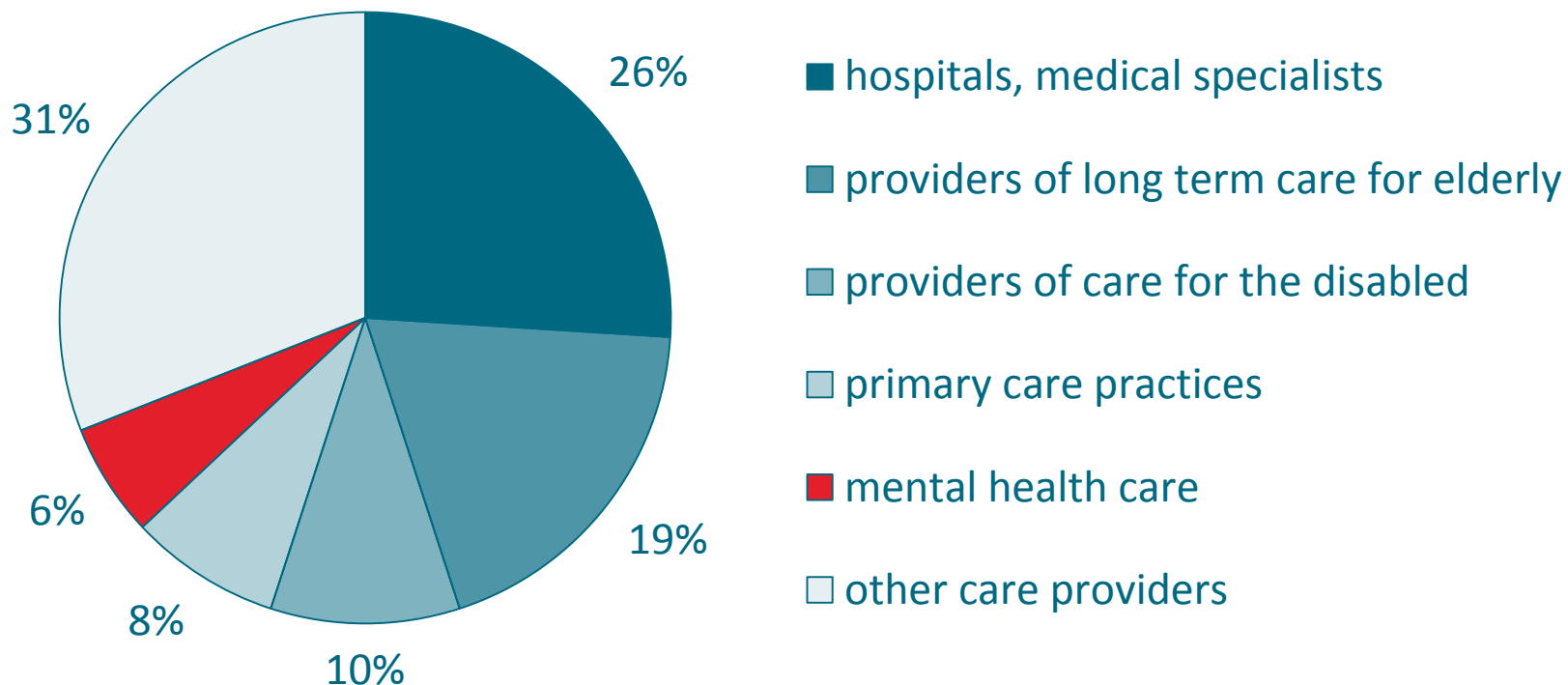
Source: GGZ Nederland (2013), GGZ in de Zorgverzekeringswet, tabellen over de jaren 2008-2010.

[Mental health care in the Health Insurance Act, tables over the years 2008-2010], GGZ Nederland 2013



Mental health budget 2012

In the Netherlands, mental health problems are the major cause of burden of disease. However, mental health providers only use 6.1 % of total health and social care budgets in the Netherlands.

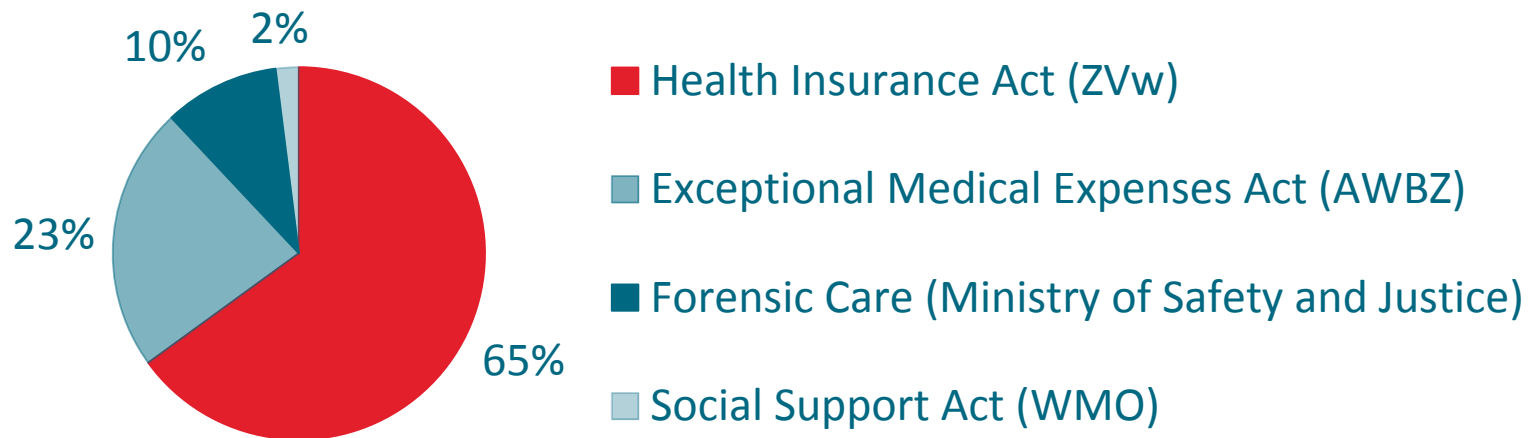


Source: CBS Statline (2013)



Funding of specialist mental health care (2012)

The Health Insurance Act (ZVW) covers curative care. This includes almost all outpatient mental health treatment as well as the first year of inpatient mental health care. Longterm mental health care is funded under the Exceptional Medical Expenses Act (AWBZ). In order to be eligible for care under the AWBZ, a person has to pass an objective assessment by the National Care Assessment Centre (CIZ). The total budget in 2012 for mental health care was € 5,82 billion.



Sources: State Budget Ministry of Health, 2012; Ministry of Safety and Justice, 2012; NZa, 2014.

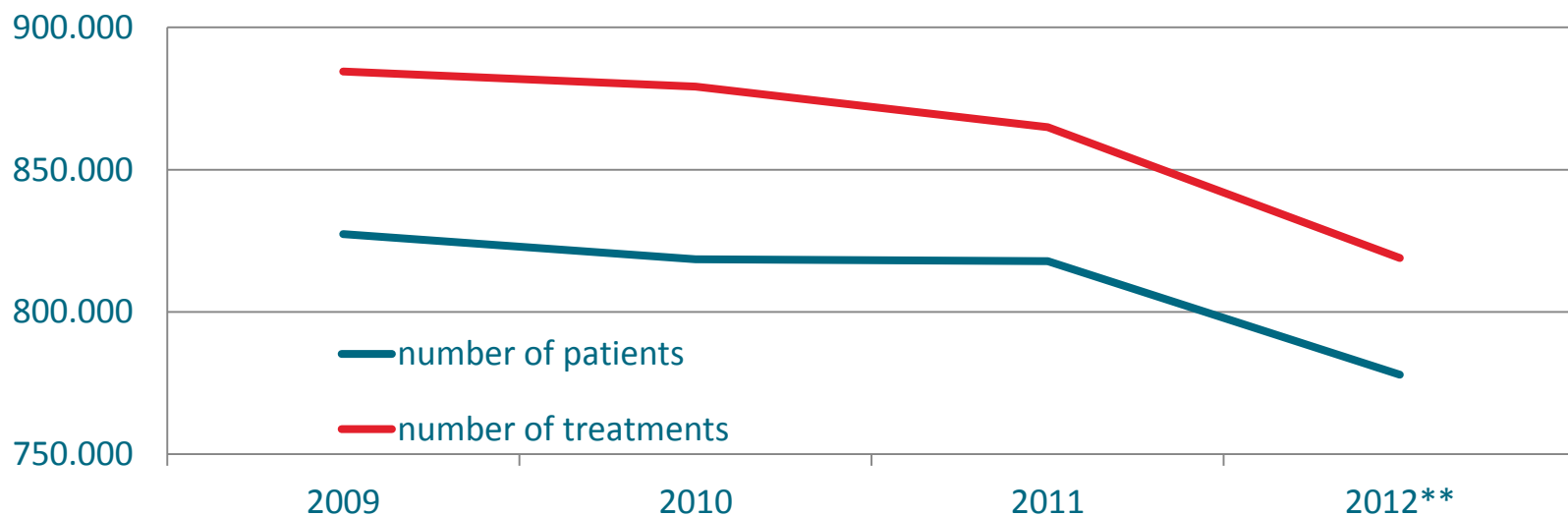


Number of patients and treatments under the Health Insurance Act 2009 - 2012

	2009	2010	2011	2012*	2012**
number of patients	827,300	818,500	817,900	731,500	777,900
number of treatments	884,500	879,200	864,900	764,200	818,900

* preliminary data, excluding December 2012

** estimation for total of 2012, bases on the period November 2011 to October 2012



Source: GGZ Nederland (2014), Sectorrapport 2012: feiten en cijfers over een sector in beweging [Mental health industry report 2012, facts and figures on an industry in transition].



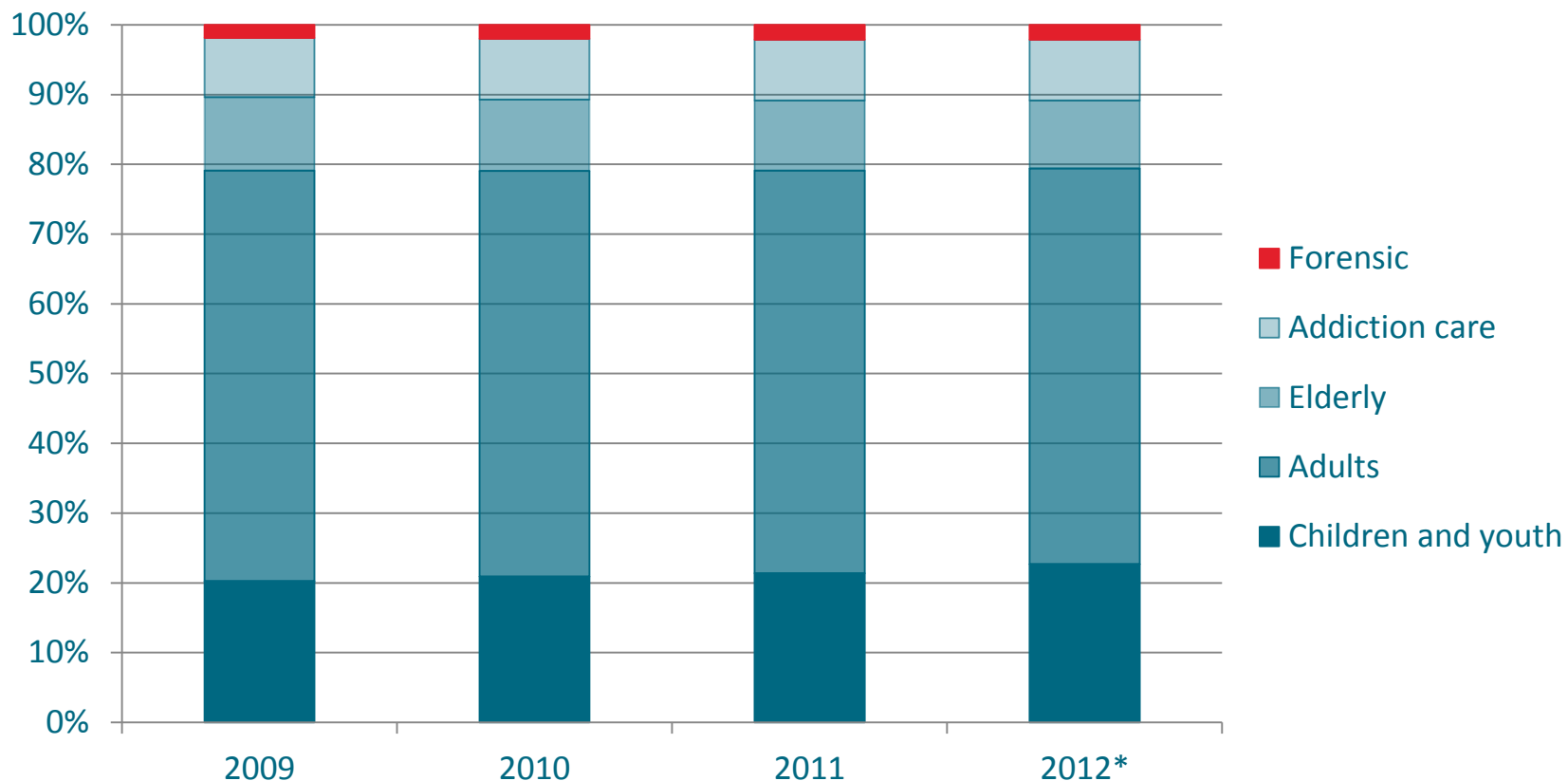
Number of treatments per sector of mental health care 2009 – 2012

	2009	2010	2011	2012*
Children and youth	179,200	183,700	184,800	173,500
Adults	520,400	511,500	499,300	433,200
Elderly	93,100	90,100	87,000	74,800
Addiction care	75,200	76,200	75,300	66,600
Forensic care	16,500	17,800	18,500	16,200
TOTAL	884,400	879,300	864,900	764,300

* preliminary data, excluding December 2012



Distribution of treatments per sector of mental health care 2009 – 2012



* preliminary data, excluding December 2012

Source: GGZ Nederland (2014), Sectorrapport 2012: feiten en cijfers over een sector in beweging [Mental health industry report 2012, facts and figures on an industry in transition].



Long term treatment for people with severe mental illness



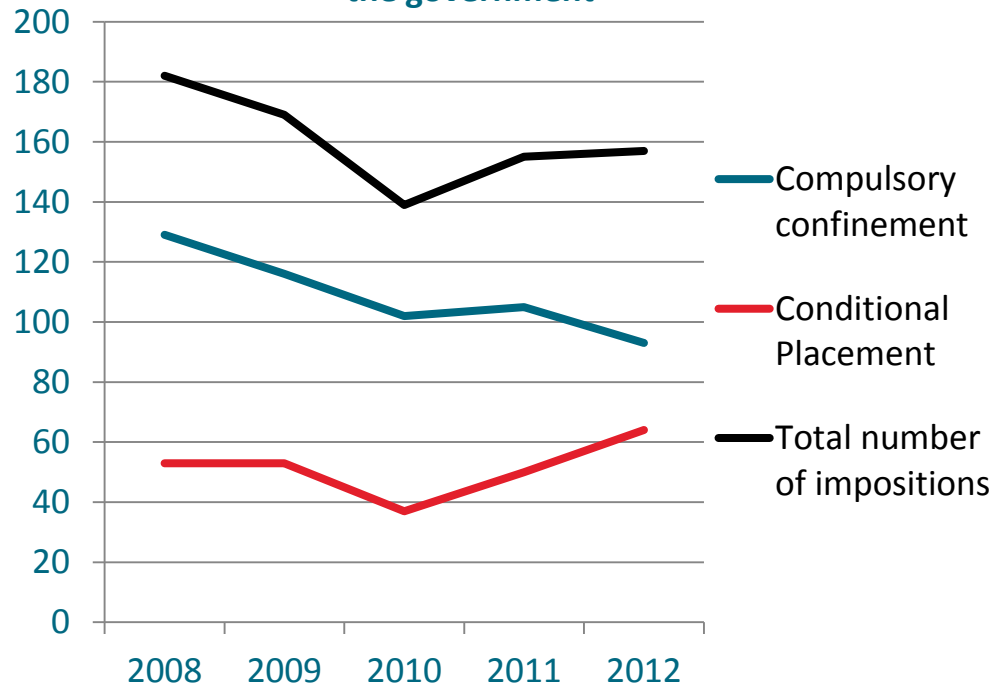
Source: CIZ (National Care Assessment Centre), 2014



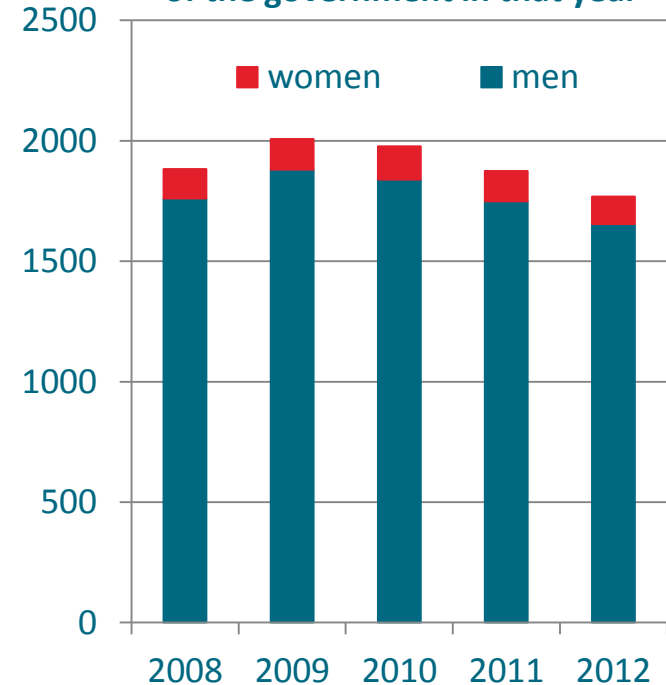
Placements at the disposal of the government (Ministry of Security and Justice)

Placement at the disposal of the government (TBS) can be imposed by a court when someone with a mental disorder has committed a severe offence and is found to be (partially or fully) irresponsible for his/her criminal behaviour.

Number of new placements at the disposal of the government



Number of people at the disposal of the government in that year



Source: DJI (2013). Forensische zorg in getal 2008 – 2012 [Forensic care in numbers 2008 – 2012]. Ministerie van Veiligheid en Justitie.



Number of primary and specialist mental health care providers between 2008 - 2011

This is an estimate of all health care providers in primary and specialist mental health care. The 181 service providers in specialist mental health are eligible for membership of GGZ Nederland, 113 were actually members of GGZ Nederland.

		2008	2009	2010	2011
Primary mental health care providers	Health care psychologists	3,956	4,031	N/A	N/A
	Other (such as psychiatrists, educational counsellors)	197	174	N/A	N/A
	TOTAL	4,153	4,205		
Specialist mental health care providers		2008	2009	2010	2011
	Mental health organisations within budget parameter system	182	179	178	181
	Mental health organisations outside budget parameter system	16	58	N/A	N/A
	Self employed psychologists	1,220	1,518	N/A	N/A
	Self employed psychiatrists	455	466	N/A	N/A
TOTAL	1,873	2,221	178	181	

Source: NZa (2012)



Number of jobs and employees between 2009 – 2012

	2009	2010	2011	2012**	(%) growth 2009-2012
Number of employees	81,350	84,930	85,780	85,300	4.9
Number of jobs (FTE)*	65,700	66,830	67,480	67,100	2.1

* only for members GGZ Nederland

** estimation based on numbers PGGM for year 2012

Sources: Number of people working: AZWinfo.nl (2013);

Number of jobs in fulltime equivalents: Jaarverantwoording Zorginstellingen (2013)





GGZ Nederland is the sector organisation of specialist mental health and addiction care providers in the Netherlands. The aim of GGZ Nederland and its members is to ensure the availability of high quality, accessible, affordable and sustainable mental health care.

In 2013, its 113 members were responsible for a market share of 80.6% in the health insurance market and more than 90% in child and youth care, sheltered housing, addiction care and forensic care

Seated in Amersfoort, its 66 employees represent the interests of its members in an on-going and constructive dialogue with client organisations, health insurers, national and local governments, professional associations and trade unions.



Membership of GGZ Nederland 2010 – 2013 by type of service providers

Despite the increase in membership between 2010 and 2013, the market share decreased from 90.3% in 2009 to 80.6% in 2011 for common mental disorders. For other types of services, the market share is still more than 90% in 2013.

Members with mental health care output	2010	2011	2012	2013
Integrated mental health care organisation	32	31	32	33
Forensic care	7	7	7	7
Child and youth psychiatry	13	13	14	14
Outpatient mental health care (RIAGG)	13	13	16	24
Sheltered Housing (RIBW)	22	23	23	23
Addiction care	11	12	12	12
TOTAL	98	99	104	113

Source: GGZ Nederland (2014), Sectorrapport 2012: feiten en cijfers over een sector in beweging
[Industry report 2012, facts and figures on an industry in transition].





These data were supplied by member organisations of GGZ Nederland. In some cases, other sources have been used. For more information, please refer to the full report at:

http://www.ggz nederland.nl/uploads/publication/GGZ-Nederland_Sectorrapport_2012-web.pdf

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