The State of Education and Training in Integrated Care in The Netherlands

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Country context

The Netherlands has a of 17.8 million people (2023, CBS.nl). The overall health status can be called good, with a life expectancy at birth if 80 years (m) and 83 years (f) and an experienced health status of good/very good in 70% of the population. Despite these numbers, 21,5% of the population experiences psychological problems, 33% has one or more chronic diseases, and 15.7% of the population (and growing) are obese. (cbs.nl, accessed 08-02-24).

Four healthcare laws are the basis of the healthcare system in the Netherlands. 'The Health Insurance Act (which provides for hospital care) and the Long-Term Care Act (which focuses on other types of care) account for the bulk of the healthcare budget available in the Netherlands.

The Long-Term Care Act is a national act governing healthcare throughout the Netherlands. In implementing the Health Insurance Act, private health insurance companies play a key role in a system based on "regulated competition" and a number of specific public requirements.

The Social Support Act and the Youth Act provide for other forms of care and support. The roughly 400 municipalities in the Netherlands are primarily responsible for enforcing these 2 acts.' (Zorginstituut Nederland, 2024). These laws operationalise the values within the healthcare system: solidarity, access for all, high-quality services. In 2022, 10% of the gross domestic product was spent on healthcare. In total, 111.000 people are employed in healthcare, of which 4.3% MD's and dentists, 19.1% nurses, and 12.2% allied health professionals (2021, cbs.nl, accessed 08-02-24).

Education and training focused on integrated care

There are three types of formal education: 1) Universities ('wo'), 2) Universities of applied sciences (Higher Professional Education, 'hbo'), and 3) Secondary vocational education ('mbo'). They all provide undergraduate and post-graduate training for regulated and registered health and social care professionals in the Netherlands. HBO and WO provide education on EQF level 5-8. In some cases, there are (private) educational organisations that also provide accredited education, mainly in CPD training.

As far as we know, there are no specific training programs on integrated care in undergraduate education. In most programs, elements of integrated care, for example, 'interprofessional collaboration', are a part.

Several educational policy reports highlight the need for learning to provide integrated care (Medical Specialist 2025 FMS, Medical Training Report 2020 NFU). Therefore, initiatives arise about learning to provide integrated care. However, these initiatives are mostly embedded and thus 'hidden' within curricula.

There are several master programs focused on improving health and social services, including on specifically focused on integrated care design, the Master Integrated Care Design, see https://www.internationalhu.com/master-programmes/master-integrated-care-design.

In continuing professional development, several initiatives for learning about integrated care exist, for example, the 'Jan van Es Institute for primary care towards integrated care' (https://jvei.nl/). This institute organises webinars addressing specific topics, such as population-based care. There are also disease-specific programs, such as ParkinsonNet, that mainly focus on the disease but also incorporate cross-boundary working.

Enabling factors

(Policy commitment, practice of IC at scale, professional body commitment, funding and organisation of education and training)

One enabling factor related to education on integrated care is that the professional bodies (for example, the Dutch Association of Medical Specialists (FMS)) mention integrated care as a shared goal.

Another factor is that funding is available for research in integrated care. For example, ZonMw (a large agency that facilitates and finances research and innovation in health, healthcare, and well-being) has several funding options for research on (elements of) integrated care.

About the International Foundation for Integrated Care (IFIC)

The International Foundation for Integrated Care (IFIC) is a not-for-profit foundation dedicated to improving the lives of people and communities by advancing the science, knowledge, and adoption of integrated care around the world.

Our vision is that individuals, families, and communities benefit from person-centred, coordinated care and support that enables them to live healthy and fulfilling lives. We work to overcome the fragmentation in health and care systems by promoting models of care that are holistic, co-produced, continuous, coordinated, equitable, and sustainable.

As the leading international voice for integrated care, IFIC brings together researchers, health and care professionals, policymakers and people, families and communities. We provide a unique platform for collaboration, knowledge exchange, and innovation to drive system change.

IFIC delivers impact through:

- **The International Journal of Integrated Care (IJIC)** – our open-access, peer-reviewed publication sharing global evidence and best practice
- **International conferences and regional networks** – connecting people and ideas across sectors and borders
- **The Integrated Care Academy** – offering education and training to develop the workforce needed for transformation
- **Applied research and implementation support** – bridging policy and practice to build more effective and sustainable care systems
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