



Netherlands Report

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Sustainable Governance in the
Context of the COVID-19 Crisis

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Executive Summary

In spite of all the national, regional and local crisis management efforts, never since World War Two have so many Dutch citizens died in one year: 967 persons per 100,000 inhabitants. In 1993, a year with a vehement influenza-epidemic, 901 per 100,000 inhabitants died.

Initially, the Dutch response to COVID-19 was relatively adequate: an “intelligent” lockdown to a first wave. However, the response to the gradual emergence of a second wave has been less adequate and disconcerted, and has underestimated the scale of the crisis.

Regarding economic policy performance, few countries had a better starting position: year-long prudential budgeting provided the Dutch state with “deep pockets” and the political will to empty them. This showed in the crisis response: massive financial support schemes for sustaining the jobs of contract workers (working from home, where possible) and preventing the bankruptcies of existing firms facing huge turnover losses, with the schemes extended three times until June 2021. In R&I policymaking, many new alliances and initiatives for knowledge-building were swiftly launched. Younger flex workers, however, became unemployed or were forced into low-paid retail and home delivery jobs. The economic crisis response definitely contributed to the resilience of the economy-as-is but lacked proactive sustainability initiatives. Long-term debt restructuring policies have not been announced.

The advanced state of digital transformation as well as the country’s flexible education system are two markers of social policy performance in the Netherlands. The normally excellent healthcare system proved to be a mixed blessing. Care homes for the elderly, because of their relatively large size, and lack of attention and priority in initial health crisis management, became a ‘highway’ for the virus; with a high death toll among the over 75 year-olds – in spite of the cruel prohibition on people visiting their aging, sometimes dying relatives. Existing inequality gaps (flex workers, immigrant workers, elementary school pupils and secondary school students, and vulnerable and single-parent families) deepened. Prime Minister Rutte and Minister of Finance Hoekstra managed to destroy any semblance of international solidarity in their negotiation tactics for the EU coronavirus recovery fund. Participating in EU-coordinated negotiations and purchases, the Netherlands

acquired a sufficient vaccine supply. The roll-out of the vaccination, however, was and remains seriously flawed, and ranks the second lowest in Europe (after Bulgaria).

The resilience of democracy in the Netherlands clearly showed in the country's pragmatic approach to an "intelligent" lockdown, in which the authorities relied on strongly recommending rather than mandating that well-informed and responsible citizens comply with the rules. Media freedom was well respected. During the first wave, but less so during the second wave, political polarization was limited to decent government-opposition debate. During the second wave, parliament was very active, often attempting to adjust government policy by micro-managing implementation plans. Increasingly, we see that the conspiracy theories that are peddled by right-wing populist parties and commentators are gaining track within a small subset of the population, which led to violence in February 2021. Another downside was the lack of democratic accountability. Although the Dutch government did not contemplate martial law, it governed by thoroughly undemocratic health emergency decrees, which were haphazardly and reluctantly enforced only due to a lack of credible implementation capacity. Only during the fall was democratic accountability restored by a special law, to be renewed every three months by parliament.

In line with its democratic DNA and business-like approach to governing, executive crisis governance followed pragmatist principles. For example, executive crisis governance relied strongly on scientific expertise, mobilized through boundary organizations (e.g., the Outbreak Management Team) for 'white-coat' information and feedback, as well as the usual knowledge institutes and advisory agencies for economic, social and cultural information and policy feedback. Next to expert advice, societal consultation with trade unions and business associations, and a flurry of other associations (e.g., teachers, religious leaders and sports administrators) was intensified. An information dashboard was designed to keep relevant parties and citizens up to date. In spite of this informational effort, lingering scientific uncertainties and frequent policy adjustments to changing facts on the ground created confusion and irritation among the public. Yet, support for the government's coronavirus policies remained steady at 55 – 75%.

This is remarkable because the minister of health's leadership from the very beginning was continually frustrated by persistent implementation problems around surge capacity (e.g., the availability of intensive care beds, trained nurses, protective equipment in hospitals and homes for the elderly, face masks), and uncertainties about the effectiveness and lack of political will to make face masks obligatory in all public spaces. Most important of all were

barriers to scaling up the test-and-trace capacity of municipal health services. In starting up the vaccination program, the Netherlands deliberately opted out of the European race to be first, in favor of a carefully managed process. As the second wave continues to rage and the second ‘strict’ lockdown has been extended till at least 9 February 2021, crisis management is still preoccupied with short-term tasks, and signs of long-term learning and adaptation are still “on hold.”

Key Challenges

The COVID-19 pandemic is a global crisis that cannot be managed in the traditional sense of the term. It has affected and will continue to reverberate for many years to come through all aspects of life. It has also deepened social inequalities, as the pandemic asymmetrically impacted on economically vulnerable groups, rendering a substantial segment of the Dutch population more precarious (Engbersen 2020a). From a sustainable governance perspective, it requires political responses on several levels.

On the level of short-term and immediate crisis management, the Dutch case suggests that reliance on the self-interest and reasonableness of informed citizens can be a sound strategy. The prerequisite is a responsible political leadership with a democratic ethos, supported by sound, broad scientific and professional expertise, which communicates with its citizens honestly and without hiding uncertainties. Future crisis management performance definitely needs better mobilization of the creativity and improvisational talents at intermediate governance levels, more willingness to collaborate internationally, greater readiness for rapid surge capacity, and the courage to offer citizens plausible exit scenarios (Boin et al. 2020: 123 – 142).

Given persistent doubts about the effectiveness and side effects of available vaccines, a certain implementation clumsiness in the roll-out of the vaccination program, uncertainties about new coronavirus variants, and difficulties in the international harmonization of health information certificates/passports and travel constraints, we fear that the idea of an ‘exit strategy’ may well turn out to be an expression of wishful thinking.

At the more encompassing level of the political system, and contrary to popular criticism, government remained stuck in a neoliberal frame: Measures were openly taken and continue to be taken not for the protection of individual lives, but to prevent the socioeconomic system from collapsing. The

government saved the national airport and airline, the shipping and steel industries, the agriculture and meat industry, and construction industry (all dependent on poorly protected immigrant labor). However, to this day, the government has failed to initiate a debate on the country's future economic structure in terms of earning capacity and sustainability (Asscher 2020). From a sustainable governance perspective, the paramount issue is whether government can shift reasonably quickly from a more neoliberal approach reflective of a “we should not/cannot do” mentality to a more proactive and entrepreneurial approach that is reflective of a “can-do” mentality (Mazzucato 2018; Tjeenk Willink 2020).

On the most encompassing level of the pandemic as a planetary-ecological crisis, governments need to respond to a myriad of changes triggered by coronavirus, and possible post-coronavirus waves of economic recession and climate change. For starters, short-term changes will occur in travel and tourism. In the longer run, change is to be expected in urban design, as continued online shopping and home-delivery will impact city-center retail businesses, and intra- and inter-city mobility. We will have to redefine our concept of what “the economy” is now that the coronavirus has caused us to take the possibility of health (and biodiversity and climate) emergencies more into account, and therefore to consider “essential” professions/workers as special. We will have to get used to different work patterns, as continued working from home will affect commuter traffic, work-life balance and the emancipation of women. The same goes for education at all levels, as online teaching and more personalized educational services will not go away. Labor relations will change, as work from home will affect the nature of team meetings, company solidarity and authority relations. Immigrant labor is now also seen as a public health issue. Views on good public healthcare, at all levels and scales will shift, owing to digitalization and distance care, but also to shifting public ideas of health, hygiene and care.

For sustainable governance to be truly achieved, a large cultural and mentality shift is needed: from a wealth-based to a life-based system, which promotes the sustainable flourishing of human beings on this already severely damaged, limited planet (Latour 2018).

From a transformative perspective, the pandemic has shown that different approaches to working – such as working from home rather than commuting to work, work-life balance, the importance of professional education and disparities in household tasks – are possible. This real-time experience has resulted in a debate on whether ‘going back to normal’ is perhaps not the most desirable idea.

Citation:

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Mazzucato, M., 2018. The Entrepreneurial State, Penguin Books

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(<https://www.groene.nl/artikel/tegen-de-utholling>)

Resilience of Policies

I. Economic Preparedness

Economic Preparedness

Economic Policy
Preparedness
Score: 9

In 2019 and until mid-March 2020, when the COVID-19 pandemic hit the Netherlands, the Dutch economy was booming. GDP growth over 2019 was 1.8%, somewhat lower than in previous years, but the seventh consecutive year of economic growth, and more than all other European countries except for Luxembourg, Ireland and Denmark (CBS, 2020). According to the World Economic Forum's Global Competitiveness Index, the country ranks fourth with one of the most competitive economies in Europe. This should provide a solid base for a recovery in economic growth. In particular, the country's investments in digital infrastructure and plans (yet to be strongly implemented) to green the economy are promising for long-term sustainable economic performance.

Three policy initiatives are worth special mention:

- First and foremost, the parliamentary adoption of the Climate Law (December 2018), which is backed up by the Climate Agreement (June 2019) – the result of the most sophisticated and largest ever effort at classic Dutch 'poldering' or stakeholder consultation.
- Since summer 2019, the ministers of finance and economic affairs have been designing the National Growth Fund, which will invest €20 billion over the coming five years in research, innovation and infrastructure to drive national (sustainable) economic growth. This policy proposal was officially ratified in September 2020.
- In 2019, the government launched Invest-NL N.V. (Inc.), a €1.7 billion private investment fund, which will support risky entrepreneurial activities, and foster sustainability in energy, circular economy, mobility, food, digitalization, care, safety and education.

ANP, 20 december 2018. Een grote meerderheid van de Tweede Kamer heeft donderdag ingestemd met de Klimaatwet. (<https://nieuws.nl/algemeen/20181220/grote-meerderheid-kamer-achter-klimaatwet/>)

World Economic Forum, Global Competitiveness Report 2020: Country Ranking (<https://www.yahoo.com/entertainment/davos-wef-global-competitiveness-report-special-edition-2020-how-countries-are-performing-on-the-road-recovery-country-ranking-083036588.html>)

Invest-NL investeringsfonds innovatieve projecten

(<https://www.subsidiebureau-nederland.nl/invest-nl-investeringsfonds-innovatieve-projecten/>)

Labor Market Preparedness

Labor Market
Policy
Preparedness
Score: 7

Following the economic boom, labor market conditions have improved. In spite of somewhat low scores for hiring/firing practices, and pay and productivity conditions, the World Economic Forum’s Global Competitiveness Index 2020 praises the Netherlands’ harmonious employee-employer relations, and ranks the Dutch labor market and employment situation second among the EU member states. Between the beginning of 2014 (the low point in the Netherlands of the financial-economic crisis when the unemployment rate reached 7.8%) and 2019, one million new jobs were created and the unemployment rate plummeted to a low of 3.3%.

Since 2018, demand for labor has been higher than supply and wages have been increasing, although less than expected and predicted. The transition from unemployment or inactivity to work was more frequent for men rather than women, for younger rather than older workers, and for people with higher rather than lower educational attainment (CBS/TNO, 2020).

In spite of its apparently sterling performance, the Dutch labor market suffers from several vulnerabilities. Most importantly, it is an increasingly two-tiered labor market, which separates (typically older) “insiders” with significant job security and (old and young) “outsiders,” who are often “platform” or “payroll” workers that lack employment protection, have little to no job security and are exposed to high work pressure. Although the proportion of fixed jobs surpassed flexible jobs in 2017, the flexibilization of jobs remains a highly salient trend. In Europe, this makes the Netherlands an outlier in terms of work flexibilization.

This “dualization” of the labor market can be attributed to government policy. For firms, flexible workers are financially much more attractive (*ceteris paribus*, by as much as 7% in labor costs) than are workers with fixed contracts. An OECD report (2019) concludes that the Dutch labor market situation will prove to be problematic over the long run, because firms will invest less in the education of their flexible workers, thereby threatening the long-term labor productivity of the economy as a whole.

In late 2018, the government established an independent expert commission tasked with designing policies that would align labor law, social security and fiscal policies with a view to redesigning the labor market to benefit all workers in a sustainable national economy. Late January 2020, this commission presented a report, “In what kind of country do we want to work?” (Commissie Borstlap, 2020). It recommended promoting less burdensome hiring/firing practices, a level-playing field in taxation for all workers, better arrangements for lifelong learning, more fixed labor contracts and more equal insurance arrangements. Although its full policy impacts will become visible only in the new government’s coalition agreement (after March 2021), the new Balanced Labor Market Law (Wet Arbeidsmarkt in Balans) came into force on 1 January 2020. The new law incrementally begins to correct for the imbalances between fixed and flexible labor conditions.

The commission has also recommended intensifying activate and inclusive labor market policies, despite the fact that the current government budget (mainly for privatized employment agencies) already equals the total amount for university education without any proof of cost effectiveness. Economic growth, fiscal policy and technological change are much more determining variables for policy success (De Correspondent, 2014).

Active labor market policy tools that existed prior to the coronavirus crisis would have done little to cushion the negative effects of the crisis. All the existing policy tools targeted individual workers (e.g., unemployment benefits, financial compensation for being fired and learning support to access new jobs). The government realized that relying on the old, individualized tools would trigger an avalanche of cases that would severely overburden the implementation capacity of the bureaucracy and the courts. Therefore, almost overnight, they created new policy tools that aimed to increase job security (not income security) by allowing employers (i.e., firms and enterprises) that had suffered substantial reductions in sales and turnover to request financial and tax support in order to continue paying and avoid firing their employees. This has been pretty effective: neither unemployment nor bankruptcies have increased during the pandemic. It is not clear, however, what will happen when these job security measures expire after June 2021.

:
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OECD, June 2019. OECD Input for the Netherlands Commission for Regulation of Work. (pdf) Commissie Borstlap, 2020. In welk land willen we werken? (<https://www.rijksoverheid.nl/documenten/rapporten/2020/01/23/rapport-in-wat-voor-land-willen-wij-werken>)
De Correspondent (Rutger Bregman), 19 February 2014. Het failliet van de Nederlandse werklozenindustrie (<https://decorrespondent.nl/754/het-failliet-van-de-nederlandse-werklozenindustrie>)
CBS/TNO, 2020. Dynamiek op de Nederlandse arbeidsmarkt (https://www.cbs.nl/-/media/_pdf/2020/06/de-nederlandse-arbeidsmarkt-2019.pdf)

Fiscal Preparedness

Fiscal Policy
Preparedness
Score: 8

Since the European sovereign debt crisis began, the Dutch government has steadily improved the health of government finances. In 2017, the fiscal deficit turned into a surplus. In 2019, public debt stood at 48.6% of GDP, well under the EU reference level of 60%. In the first quarter of 2020, public debt increased marginally to 49.5% (CBS, 2020). Demand for Dutch state bonds increased, providing the state with access to comparatively cheap loans. This allowed the government to conduct an expansionary budget policy that it could justify politically as an investment in the future earning capacity of the Dutch economy. It has allowed the government to delay promised risk-assessment procedures, despite serious risk factors in the global economy (Brexit, trade conflicts) and the high probability of a new recession in the near future (Gradus and Beetsma, 2017; Raad van State, 2019).

The government's rosy picture notwithstanding, the national budgetary system has been criticized because national budget cuts are disproportionately allocated to local-government budgets even though national policy has in recent years burdened local governments with new tasks (e.g., in the social domain, youth and elderly care) without structural budget compensations. Ad hoc nationwide increases have not diminished the volatility of local-government budgets. Overall, local government budgets are expected to decline despite the recent period of economic prosperity (VNG, 2019).

From the perspective of democratic and public accountability, since 2016, the General Accountability Office (Algemene Rekenkamer) has warned that an ever-larger share of nationally collected taxes (fully two-thirds in 2019) is spent without any parliamentary budgetary oversight (Algemene Rekenkamer, 2016).

Citation:

Raad van State, 13 September, 2019. Septemberrapportage begrotingstoezicht 2019

VNG, VNG-reactie op de Rijksbegroting 2020. Bijzondere ledenbrief, 24 September 2019

R. Gradus and R. Beetsma, "Houdbaarheidssaldo uitstekend kompas voor begrotingsbeleid," *Me Judice*, 5 September 2017

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CBS, Kwartaalmonitor Overheidsfinanciën 01. Eerste kwartaal 2020. (<https://www.cbs.nl/nl-nl/achtergrond/2020/26/overheidsfinancien-eerste-kwartaal-2020>)

Research and Innovation

Research and
Innovation Policy
Preparedness
Score: 9

Despite relatively low R&D expenditure, the Netherlands remains one of the world's most innovative economies. R&D expenditures stood on 2.17% of GDP, lower than target of 2.5% and lower than other top performing countries.

Nevertheless, the European Innovation Scoreboard 2020 ranks the Netherlands fourth in terms of innovation leaders (behind Sweden, Finland and Denmark). R&D investment figures understate actual R&D intensity.

The Dutch economy is more R&D intensive than could be expected given its sectoral make-up (i.e., with many services and comparatively few R&D intensive industrial sectors, e.g., pharmaceuticals). Many Dutch multinational firms' R&D occurs in foreign countries (which can boost their productivity both in the Netherlands and elsewhere), while there is less investment by foreign multinationals in R&D taking place within the Netherlands. Moreover, Dutch investments in intangible assets (e.g., linkages in research between government, business and knowledge institutes) do not show up in quantitative studies of R&D development, despite boosting its effectiveness and efficiency.

Returning to earlier ideas about mission-driven innovation (e.g., the Delta plan in the Netherlands and the United States' Apollo plan) and following more recent EU ideas about mission-driven innovation policy, since 2018, the Dutch government has been working on the design and implementation of such a policy. Its four major missions are: energy transition and sustainability; agriculture, water and food; health and care, and safety. Per mission, strong linkages or collaborative arrangements between government, researchers, business and civil society are needed. In addition to mobilizing the usual suspects (e.g., knowledge institutions, companies, research funders and ministries), there are roles for startups, regional authorities and citizens' organizations as well. Examples of the implementation of mission-driven innovation are the Investment-Fund NL (see "Economic Preparedness"), which supports private sector sustainability initiatives; the National Investment Fund, which supports large-scale future nationwide earning capacity focused projects, and was jointly launched by the ministers of economic affairs (Wiebes) and finance (Hoekstra) (see "Economic Preparedness"); and the National Science Agenda, which was drawn up (in response to inputs from a citizen survey) by the Netherlands Organization for Scientific Research (NWO) and the so-called Knowledge Coalition, which is made up of universities, universities of applied sciences, university medical centers, the Royal Netherlands Academy of Arts and Sciences, the Netherlands Organization for Scientific Research, the Confederation of Netherlands Industry and Employers, the Royal Association MKB (SME) Nederland, and the Federation TO2 (the institutes for applied research).

Citation:

Publications Office of the EU. European Innovation Scoreboard 2020 (<https://op.europa.eu/en/publication-detail/-/publication/1457a9d4-084f-11eb-a511-01aa75ed71a1/language-en/format-PDF/source-165388993>)
Commission Staff Working Document, Country Report The Netherlands 2020, section 4.4. Competitiveness, reforms and investment (<https://eur-lex.europa.eu/legal-content/EN/TXT/?qid=1584543810241&uri=CELEX%3A52020SC0518>)

Rathenau Institute, June 2020. Mission-driven innovation policy: what, how, why? (<https://www.rathenau.nl/en/knowledge-ecosystems/mission-driven-innovation-policy-what-how-why>)
Nationale Wetenschapsagenda (<https://www.nwo.nl/onderzoeksprogrammas/nationale-wetenschapsagenda>) (<https://youtu.be/DvHtmJFA31Y>)
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II. Welfare State Preparedness

Education System Preparedness

Education Policy
Preparedness
Score: 7

In 2019, the Dutch education system was performing strongly, with attainment somewhat exceeding the OECD average. The greatest concerns were the acute shortage of teachers and education-funding reform, particularly for higher education. Equity at all levels remained an issue, particularly for secondary education onwards. Educational spending is below the OECD average and geared toward efficiency. Although Dutch education is labor market and skills oriented, in 2019, skilled technical workers were in high demand, particularly at the secondary vocational education level.

At the higher vocational training and university levels, issues of skewed financing (favoring research in technical and natural sciences over social sciences and education in general), combined with an increased number of international students, resulted in work pressure and quality issues.

One of the strengths of the Dutch education system – its practical orientation, with substantial workplace-learning components – turned into a liability during the COVID-19 crisis. It became increasingly difficult to arrange work-study places, as many businesses had to close and work-from-home became the norm for extended periods of time. This was true particularly for secondary vocational education programs, but also for higher professional education and some professionally oriented university studies. Due to the segregation of Dutch education, in which children from lower socioeconomic and migration backgrounds are overrepresented in vocational education, the disturbance of the learning-on-the-job model affected more vulnerable students to a greater extent. Combined with lower-quality housing and the loss of access to digital resources due to school closures, it can be expected that already vulnerable students will disproportionately experience a delay in their studies.

The quality of higher education is guaranteed by mass entrance exams at age 11 and mass centralized exams for graduates. Both had to be forfeited this year due to the pandemic. Discussions about the pros and cons of these

examinations are fueled by this unintended experiment. At the higher education level, graduation is an individual process and could be organized during the pandemic. Master and doctoral defenses were carried out online.

School autonomy turned out to be the greatest factor of resilience. Schools enjoy a large degree of freedom and flexibility in organizing their own learning processes. The educational system as a whole is increasingly geared toward independent study and taking responsibility for one's own educational development. Schools reacted swiftly and, in many cases, with minimal adaptations.

A further resilience factor has been the pedagogical environment in Dutch schools. Since they are not overly competitive, concerns about "missing material" were not as great as feared. Instead, quite quickly, attention shifted to "vulnerable children."

However, issues of equity deepened during the pandemic. Schools differed substantially in the quality of online education. Families differed in their ability to offer support, material or otherwise (e.g., electronic devices, adequate internet access, a quiet place to study or parental assistance with homework assignments) to children. Here again, parents with a higher education and greater work autonomy, and two-parent households were better able to homeschool children compared to single-parent households, lower educated parents and parents with less flexible working environments.

Innovations in curriculum and teaching have always been encouraged in Dutch schools, with only a few general requirements. This allowed schools to adapt quickly to the pandemic, without significant disruption. Most schools feature sufficient digital-learning platforms – with smart boards being standard from the elementary to the higher education level, and many interactive elements in teaching. However, variation between schools is considerable. Some schools needed to be trained to make video-recordings within a week, while others simply expanded their blended learning platforms to full-time use. Generally, the crisis accelerated the acquisition of ICT skills by teaching staff, including among older teachers who might have been more reluctant prior to the pandemic.

At the higher education level, issues with attendance by international students emerged, as many of them returned to their home countries during the pandemic. In addition, many students lost their part-time jobs – with up to 40% reporting loss of income – which resulted in having to move back home with their parents and significant stress due to the loss of social contact with fellow students. The extent to which this has led to study delays has yet to be estimated and effects seem to vary widely.

Citation:

Rapport Onderzoek Lerarentekort, PO Raad 2019

<https://www.rijksoverheid.nl/documenten/rapporten/2020/07/02/samen-sterk-voor-elk-kind-eindconclusies-merel-van-vroonhoven-juli-2020>

<https://didactiefonline.nl/artikel/behoud-het-centraal-examen>

<https://www.kennisnet.nl/artikel/6645/ict-in-het-onderwijs-de-kracht-van-ict-zit-in-verscheidenheid/>

<https://www.surf.nl/onderwijs-ict>

<https://digitaal.scp.nl/ssn2020/onderwijs/>

Social Welfare Preparedness

Social Welfare
Policy
Preparedness
Score: 7

Income inequality in the Netherlands produces a score of between 0.28 and 0.29 on the Gini Index, and has not changed significantly since 2007. However, the difference between the highest and lowest incomes has increased. This pattern is even more visible in the incomes of women. While the incomes of the highest-earning women increased significantly, particularly for younger women, only one-quarter of all women are in full-time employment. On average, personal incomes of men are much higher than those of women, though the gap is gradually closing for younger women. Women still form a slight majority of people living in poverty. Half of all people living at or under the poverty level have a migrant background.

The average age of first-time home buyers has increased due to precarious incomes, stricter loan regulations, increasing house prices and a shortage of new, affordable houses. During the COVID-19 crisis, house prices continued to rise due to decreased job mobility. Additional income from vacation home rentals (e.g., Airbnb) was also lost during the crisis.

Young people entered the pandemic in a precarious situation. A combination of student debt, flexible employment, irregular incomes and rising housing prices has meant that young people are living with their parents for longer now than in previous generations.

People working as independent contractors within low-wage sectors turned out to be a particularly vulnerable group, with little or no job protection. The Dutch labor market has become one of the most flexible in western Europe (WRR 2020). Before the Netherlands was confronted with COVID-19, there were 1.9 million people with flexible employment situations and more than 1.1 million self-employed workers. Many of these flex workers are employed in sectors that have been affected particularly hard by the coronavirus crisis, such as the hotel and catering industry, tourism, transport and culture. Overlapping with these precarious groups are labor migrants from south and east Europe, who work low-wage jobs on flexible contracts often while living in inadequate housing.

Loneliness and a lack of social connection were emerging as serious concerns before the pandemic, not only among the elderly, but among young people as well, particularly students – a bad starting point to go into lockdown for many people.

Compared to other EU member states, the number of Dutch households at risk of social exclusion or poverty is still low, around 6% of households are at risk of falling below the poverty line (CBS 2019). But since 2008, the beginning of the economic crisis, poverty in the Netherlands has increased by one-third. Single-parent families, ethnic-minority families, migrants, divorcees and those dependent on social benefits are overrepresented in this poverty-exposed income bracket. Municipal governments are largely responsible for poverty policy in the Netherlands. Given the budgetary side effects of other decentralization policies, there are clear signs that poverty policy, both in terms of quality and accessibility, is at risk of deteriorating. The COVID-19 crisis has exacerbated differences between municipalities, since relief measures were taken at the national level, and municipal governments had to alleviate extreme cases and provide support to all those who did not have access to the national compensation measures.

Since 2015, municipalities have been responsible for assisting people with disabilities in finding suitable work. The number of young people with disabilities who have a job has increased by 9%, but their incomes have on average worsened due to a combination of low earnings and benefit cuts. A study of 47 Dutch municipalities showed that few had plans for implementing the U.N. agreement on the rights of disabled people, let alone inclusive policies.

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WRR (2020). Het betere werk. De nieuwe maatschappelijke opdracht. Den Haag: WRR
CBS (2020) <https://www.cbs.nl/nl-nl/nieuws/2020/49/armoederisico-bevolking-in-2019-een-fractie-lager>

Healthcare System Preparedness

Health Policy
Preparedness
Score: 7

In 2020, the Dutch hybrid healthcare system was subjected to the stress-test of the COVID-19 pandemic. Both the vulnerabilities and the strengths became highly visible and gained importance. Never before has the healthcare system received so much attention and public scrutiny. Never before was the healthcare system the central driving force of all government policymaking for an entire year. On the positive side, the Netherlands measures well on key health indicators, such as life expectancy, self-reported health status and patient satisfaction. The system is generally inclusive: the number of citizens who forgo medical treatment due to affordability is the lowest in the OECD

(5.8%).

In addition, in spite of the many concerns in the sector, long-term elderly care is highly inclusive and affordable. The proportion of elderly people in long-term care centers is decreasing (115,000 people in 2019), however, due to the policy shift to extramural care, which means that people in care generally have increasingly severe health issues. The added burden of expenditure and efficiency issues, and the chronic shortage of staff made elderly care homes a particularly vulnerable part of the healthcare system during the coronavirus pandemic. Many homes for the elderly were hit hard, with high numbers of deaths early in the pandemic. In addition, intramural care for the elderly relied heavily on volunteers and family members, and the burden of keeping basic operations going increased after the lockdown.

Prevention in the Netherlands is organized through general practitioners, who act as gatekeepers to healthcare services. The general policy response to the system, however, effectively bypassed general practitioners, as the focus was on intensive-care units, hospital beds, ventilation devices and hospital staff. Ongoing non-COVID-19-related care – which remained in the hands of general practitioners, but with limitations imposed by hospitals – became problematic.

The focus on efficiency and cost containment in recent years has left the Netherlands with significant pressure on bed occupancy, a push to shorten the average hospital stay and a need to plan routine procedures tightly, with little room for contingencies. The challenges presented by the COVID-19 pandemic – long-term intensive care and hospital stays, varying and unpredictable care outcomes, and little control over the number of patients requiring hospitalization – exposed the vulnerability of the system. Furthermore, nursing and care staff are notoriously underpaid and in high demand, which proved to be an impediment to flexibility and the expansion of care during COVID-19, without jeopardizing other necessary care.

The various professional organizations (e.g., of specialists, intensive-care physicians, general practitioners, nurses and care workers) all have different, sometimes contrary stakes, both financial and organizational. Hygiene, prevention, testing and vaccination tasks are in the hands of the municipal healthcare services, which adds another dimension to the complex task of coordination. Vaccination programs are voluntary and quite high in the Netherlands. In recent years, a decline in the vaccination rate of children has prompted debate about mandatory vaccinations as an access requirement for childcare.

:

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<https://www.cbs.nl/nl-nl/achtergrond/2020/13/115-duizend-mensen-in-verzorgings-of-verpleeghuis>
<https://www.trimbos.nl/actueel/blogs/blog/dag-van-de-mantelzorg-familiebetrokkenheid-in-verpleeghuis-is-onmisbaar>
 Factsheet Publieksonderzoek Hoe wil Nederland oud worden?, 28 februari 2020 ActiZ, branchevereniging van zorgorganisaties

Families

Family Policy
 Preparedness
 Score: 5

Enabling work-family balance is less of a guiding policy principle. The gap between professional women working longer hours and less educated women not participating in the labor market is growing. Almost two-thirds of mid-career women have difficulties balancing childcare tasks and work. Full-time female labor-force participation is hindered mainly by a high marginal effective tax burden on second earners, reflecting the withdrawal of social benefits according to family income. Consequently, in the World Economic Forum's Global Gender Gap Index 2017, the Netherlands ranked 32 out of 144 countries, having ranked 16 in 2016 and nine out of 130 countries in 2008. The drop was largely due to the inclusion of top incomes in the calculations, which revealed a glaring absence of women in highly paid positions in the country. Other factors include unfavorable school times, a childcare system geared toward part-time work, and the volatility of financing for and poor access to care policies, particularly at the municipal level. Recently, the government announced plans to increase parental leave significantly, including paternal leave for fathers, in an effort to address these difficulties. A pilot project with flexible school times was extended and expanded to include more schools.

:

<https://www.nji.nl/Actueel/Nieuws-uit-het-jeugdveld/2020/Kamer-vraagt-om-hervorming-jeugdbescherming>
<https://www.nji.nl/Databank/Cijfers-over-Jeugd-en-Opvoeding/Cijfers-per-onderwerp/Cijfers-per-onderwerp-Gezinnen>
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<https://www.weforum.org/videos/children-in-the-netherlands-have-the-highest-well-being-in-the-world>
<https://www.nji.nl/Actueel/Nieuws-uit-het-jeugdveld/2020/Gemeenten-worstelen-met-grip-op-sociaal-domein>
 Beantwoording vragen over de gevolgen van de coronacrisis
www.rijksoverheid.nl/kamerstukken, 2020/06/26

III. Economic Crisis Response

Economic Response

Economic
Recovery
Package
Score: 7

After the government acknowledged that the coronavirus pandemic was in full swing in the Netherlands, all hotel and catering businesses were suddenly closed down as of 18:00 on 14 March. On 17 March, a first package of economic and labor market emergency measures was announced, which included massive subsidies for continued wage payments, and financial support for businesses and self-employed workers. Entrepreneurs and workers were given certainty about the financial support they could expect in the immediate future. Economic recovery was fostered and, where necessary, workers were encouraged to find employment in other sectors, such as in the delivery of groceries and other goods, and healthcare institutions.

The entire package was extended three times. Each time, adjustments were made to eligibility requirements and the budget for each tranche was reduced: the budget for the first tranche (March – May 2020) totaled €10 – 20 billion; the second tranche's budget (June – September 2020) totaled €13 billion; and the third (October 2020 – June 2021) €1 billion. Across some 180 different measures, the total expected government spending on coronavirus-related financial support for in 2020 and 2021 is approximately €46 billion. Although economic advisers recommended that financial support should be considerably scaled down after November, policy authorities decided that with an effective vaccination program in sight a third round of extensions into 2021 was justified.

Apart from a flurry of smaller measures (e.g., family support, easier conditions for loans and credits for SMEs and voucher credits for travel organizations), the more important elements of the package are:

The Temporary Emergency Scheme for Job Retention (Tijdelijke Noodmaatregel Overbrugging Werkgelegenheid – NOW) targeted employers with >20% and later >30% turnover losses, and subsidized 80% of wage costs. By August 2020, the scheme had provided €10 billion.

The Temporary Emergency Scheme Costs for Self-Employed Professionals (Tijdelijke Overbruggingsregeling Zelfstandige Ondernemers – Tozo), provided income transfers to independent contractors and freelancers in order to help with subsistence costs and loans for working capital. Between March

and May, municipalities provided benefits to more than 179,000 self-employed workers to cover living expenses. Overall, the scheme has paid out a total of €305 million.

The Ministerial Decree Subsidizing Entrepreneurs Hit by Covid-19 Lockdown Measures (Tegemoetkoming Ondernemers Getroffen Sectoren – TOGS), later renamed Subsidy Fixed Costs (Tegemoetkoming Vaste Lasten – TVL), which supports SMEs, entrepreneurs and self-employed workers that have experienced a >30% reduction in turnover and are unable to pay their fixed costs. By August 2020, the measure had provided €1.1 billion to an estimated 23% of eligible entrepreneurs. Tax deferrals of various kinds for many different types of business, totaling €9.5 billion by August 2020.

CBS-data shows that some 26% of firms with between two and 250 employees have used NOW. Topping the list are businesses in the hotel and catering, transportation and storage, services, and trade sectors. Culture, sports and leisure were also heavy users. The largest recipients of NOW wage subsidies are iconic Dutch companies, representative of the existing economic model: Schiphol Airport, KLM, Transavia, Booking, National Railways, municipal transport companies and Qbuzz in the travel and transportation sector; Tata Steel, DAF trucks and Nedcar in the traditional industries; ATOS-NL and Adecco in digital services; Tempo Team in human resources; and even the state-owned Holland Casino. Only modest government support targets innovation, such as speeding up infrastructure works, strengthening the finances of the regional development agencies and co-financing EU-programs used by Dutch entrepreneurs.

Citation:
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 (<https://www.rijksoverheid.nl/onderwerpen/coronavirus-financiele-regelingen/overzicht-financiele-regelingen/>)
 Algemene Rekenkamer, Coronarekening (3de versie)
 (<https://www.rekenkamer.nl/onderwerpen/corona/coronarekening>)
 CBS, Covid-19 impact on central government, n.d.
 (<https://www.cbs.nl/en-gb/dossier/coronavirus-crisis-cbs-figures/covid-19-impact-on-central-government>)
 NRC-Handelsblad, (MARIKE Stellinga) 9 December 2020. Nieuw steunpakket moet bedrijven door het laatste stuk van de tunnel helpen.
 (Nieuw%20steunpakket%20moet%20bedrijven%20door%20het%20laatste%20stuk%20van%20de%20tunnel%20helpen%20-%20NRC.html)

Sustainability of Economic Response

From the list of companies that received most of the emergency support (see “Economic Response”), it is clear that recovery packages have not been used to leverage a transition to a more sustainable economy (De Groene Amsterdammer, 2020).

Greenpeace has again attempted to use legal means (e.g., in the Urgenda case) to force the government to impose more climate change conditions on support for Schiphol Airport and KLM. All directors of the independent bodies that provide knowledge and advice to the Dutch government have advocated for a strong debate on sustainable recovery, “invest ourselves out of the crisis,” in addition to (parliamentary) debates on whether or not single coronavirus measures are enough to fight the pandemic and stave off a severe economic slump.

So far, the government has focused its efforts on facilitating the transition to a more sustainable economy and increasing the earning capacity of the Dutch economy with its €20 billion Wopke-and-Wiebes National Growth Fund. The fund targets three types of projects: modernizing physical infrastructure, strengthening research and advancing educational development. The National Growth Fund will only consider project proposals that are not (yet) commercially viable and can only be supported by government money.

While production of wind-energy increased, overall demand for energy has declined due to the coronavirus crisis, as has the price of energy. Without subsidies, the production of renewable energy would be completely uneconomical under these circumstances. On the other hand, there has been a 70% drop in the price of solar and wind technology over the last five years, and similar price drops for storage technology and electric road transport (IEA 2020). With the majority of workers working from home, and commuter and air travel reducing, people’s awareness of alternative working and commuting patterns may increase, although studies suggest that there is a strong public desire to go “back to normal.”

Citation:

NRC-Handelsblad (Duursma), 18 November 2020. Greenpeace: staat moet meer eisen stellen aan KLM (<https://www.nrc.nl/nieuws/2020/11/18/greenpeace-staat-moet-meer-eisen-stellen-aan-klm-a4020620>)

De Groene Amsterdammer, 11 November 2020. Essay Tjeenk Willink: De overheid in tijden van crisis: tegen de uitholling (<https://www.groene.nl/artikel/tegen-de-uitholling>)

De Volkskrant, (Yvonne Hofs) 7 September 2020. ‘Wopke-Wiebes fonds’ flirt met de toekomst: op korte termijn al miljardenimpuls (<https://www.volkskrant.nl/nieuws-achtergrond/wopke-wiebes-fonds-flirt-met-de-toekomst-op-korte-termijn-al-miljardenimpuls-bf5c6784/>)

<https://www.iea.org/reports/world-energy-outlook-2020>

Labor Market Response

Labor Market
Policy Response
Score: 7

All emergency measures as discussed under P9 had one intention: cushioning the impact of the coronavirus crisis on unemployment and business activities. The Temporary Emergency Scheme for Job Retention (NOW) in one swoop replaced a complicated and fragmented regulatory system for shortening working hours with a very broad, simple-to-use regulation based on the

amount of lost turnover. In fact, NOW froze the employment situation for the duration of the measure, although its budget was projected to decline over time in line with fewer enterprises using it.

To mitigate the long-term deadweight impacts, during the fall months of 2020, special tools were designed. First, accepting a parliamentary motion by the Dutch Labor Party, an intensified support and coaching system for job counseling will be launched in spring 2021. Regional teams of municipal services, the National Institute for Employee Insurances (UWV), employers' associations and labor unions cooperated in its operation. From a total amount of €683 million, €200 million will target advice and free-of-cost in-service or retraining services (in addition to existing facilities for employers); €346 million will be dedicated to measures for alleviating and tackling youth unemployment, such as extended school facilities for students that left school without formal qualifications; and €150 million will be reserved for a poverty alleviation and debt restructuring fund. For the same purpose, the Temporary Emergency Scheme for Necessary Costs (Tijdelijke Overbrugging Noodzakelijke Kosten, TONK) was devised, which offers municipal administrators more financial and regulatory means for households struggling with a sudden loss of income.

All of these labor market policies are short-term stop-gap measures. Structural, long-term policy reforms, which tackle the increasing dualization of the Dutch labor market, have been proposed by the Borstlap Commission's report "In which country do we want to work?" (see "Labor Market Vulnerability"). However, these proposals are likely to become the stakes in political party platforms for the March 2021 elections.

It looks like these measures – whether in force since March 2020 and extended till June 2021, or just announced at the beginning of 2021 – are pretty effective. The macroeconomic scenario outlined by the National Center for Economic Policy Analysis sees a limited increase in unemployment from 3.4% in 2019 to 4.1% in 2020, in spite of the coronavirus-related economic slump. However, October and November showed unexpected job growth – with 40,000 and 26,000 people finding employment, keeping overall employment level at 4% (CBS 2020). Nevertheless, the slow out-roll of vaccinations and prolonged duration of the crisis has led to more negative projections with unemployment levels expected to rise to 6% in 2021. The coronavirus crisis has hit flex workers, self-employed workers and younger employees who have just started their careers particularly hard. The decrease in labor opportunities is concentrated in private services.

Citation:

AVRO/TROS, 24 September 2020. Meer begeleiding bij baanverlies door coronacrisis, (<https://radar.avrotros.nl/nieuws/item/meer-begeleiding-bij-baanverlies-door-coronacrisis/>) Tijdelijke Ondersteuning Noodzakelijke Kosten (TONK) (9-12-2020)(<https://www.coronaregelingen.nl/tijdelijke-ondersteuning-noodzakelijke-kosten-tonk-9-12-2020/>) CPB, Macro-Economische Verkenningen 2020. (<https://www.cpb.nl/sites/default/files/omnidownload/MEV2020.pdf>) <https://www.cbs.nl/nl-nl/nieuws/2020/51/werkloosheid-in-november-verder-gedaald>

Fiscal Response

Fiscal Policy
Response
Score: 7

Comparatively speaking, the Dutch fiscal situation at the outbreak of the pandemic was comfortable – and the political authorities were aware of it. On 28 March 2020, the minister of finance declared: “I admit these are tough times in huge uncertainty. But I want to assure people: we can deal with this. Not for nothing have we launched a massive (support) package. If necessary, we will persevere and if need be extend the package two or even three times. ... Let’s be honest: the capacity to help here is bigger than in other European countries ... our starting position is really much better than those of other countries” (Algemeen Dagblad, 28 March 2020) In an all-out effort to prevent serious damage to the Dutch economy, at that time, the support package could potentially run up to €61 billion, but the minister was prepared to spend a buffer of €87 billion allowed by the EU-spending limit of 60% of GDP; and even more was possible after these EU spending limits were suspended.

The fiscal measures that were introduced aimed to allow employers to continue paying wages, provide emergency support to independent workers and in general uphold the liquidity of entrepreneurs. Many other measures extended the period for paying taxes, and suspended value added taxes for crucial (medical) products and healthcare services. To allow people to work from home, special rules were designed for changing travel patterns and adjustment of home workplaces. With each extension of the package, the rules were updated, sometimes aimed at special categories of firms (e.g., hotel and catering businesses), sports schools or large events (e.g., music concerts or festivals). All fiscal measures are listed in the regular budget items of departmental budgets; no special funding arrangements have been deemed necessary.

Future investment, discussed under P10, is moderate (€20 billion over the next five years) and separate from coronavirus fiscal policy.

Obviously, Dutch state debt will increase due to the very expansionary spending policies introduced in response to the coronavirus crisis. A recent CPB long-term risk assessment (CPB, 2020) estimates an worsening of the

state debt ratio, equivalent to 8% of GDP. The effect of automatic stabilization in budgetary policymaking is evident in higher unemployment and social benefits expenditure, and the sharp decrease in tax revenue. State debts are expected to rise from 60% GDP in 2020 to 66% in 2025. The historically high budget deficit explains why the debt ratio will exceed 100% of GDP.

At the moment, there are no plans to reduce state debts. Such plans will be an important ingredient in the party platforms for the March 2021 elections, and the subsequent cabinet formation deliberations and coalition agreement. However, the general feeling is that, given the very exceptional nature of the coronavirus crisis and the political rejection of neoliberal austerity policies, debt reduction will not be a matter for the next five years (like after the 2008 financial crisis) but for a much longer period.

Much will become clear after the March 2021 elections, when the new government will have to deal with the post-coronavirus economic and debt situation. Despite many party platforms leaning more to the left in 2021, there seems to be a comfortable right-wing majority in the Netherlands (Trouw 2021).

Citation:

Algemeen Dagblad, (Jan Hoedemans, Laurens Kok), 28 March 2020. Wopke Hoekstra geeft in één klap 15 miljard uit en misschien nog meer: 'We kunnen dit aan' (<https://www.ad.nl/ad-werkt/wopke-hoekstra-geeft-in-een-klap-15-miljard-uit-en-misschien-nog-meer-we-kunnen-dit-aan~ab42e541/>)

ING, Markten in Beweging, 27 March 2020. Ongeëvenaarde maatregelen. (https://www.ing.nl/media/Markten%20in%20beweging%2027%20maart%202020_tcm162-190617.pdf)

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(<https://www.cpb.nl/sites/default/files/omnidownload/CPB-Achtergronddocument-Schokproef-overheidsfinancien-2020.pdf>)

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Research and Innovation Response

Research and
Innovation Policy
Response
Score: 7

The most important R&I contribution in the Netherlands is Janssen Pharmaceuticals' vaccine and prevention branch, which operates from Leiden. Janssen Pharmaceuticals was an early participant in the development of a candidate vaccine and co-leader in the Corona Accelerated R&D in Europe (CARE) consortium, Europe's largest, multi-partner scientific research initiative dedicated to discovering and developing treatments for COVID-19.

The Dutch government launched several public-private R&D initiatives, which were oriented to tackling the immediate impacts of the coronavirus crisis. On 1 April, the cabinet allocated a total of €42 million to research the most urgent coronavirus-related research questions. It is estimated that these additional funds will enable 80 to 100 research issues to be investigated. Priority is given to medical research: monitoring recovering patients, the transmission of the virus to and from children, hospital epidemiology, the development of medication that can be used in the (very) short term, antibodies, and virus evolution. Socio-scientific research proposals that examine the impact of social isolation and its consequences have also been prioritized. The RIVM's Behavioral Unit and the 25 municipal health services (GGD) started regular survey research in order to monitor the influence of government-announced behavior rules on citizens' daily life and the degree of citizens' rule compliance as an important input into the Corona Dashboard – a multi-indicator set intended to help the government track important developments and design policy.

Another government sponsored R&D project was the development of coronavirus apps, intended to boost the inadequate track-and-trace capacity of the GGDs. CoronaNotifier (CoronaMelder) helps to detect whether someone has been in close proximity of an infected person (e.g., in trains or while shopping). CoronaNotifier has been downloaded four million times and 37,000 people have been notified that they have been in close contact with someone infected by coronavirus. Next to this, there will be a second app, GGD Contact, which traces the known contacts of infected persons, provided the infected person grants GGD Contact automatic access to their contact addresses. In this way, the contact app will drastically reduce the time required for contact tracing.

Finally, it is worth mentioning that many universities, on their own initiative and with support from NWO programs, have started research into social innovations, such as the impacts of social distancing, and the introduction of the “one-and-a-half-meter-society” rules in restaurants, shopping malls and theaters.

Citation:

Johnson & Johnson. Media Statement

https://www.janssen.com/emea/sites/www_janssen_com_emea/files/johnson_johnson_statement_on_the_launch_of_new_care_consortium2.pdf

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<https://www.janssen.com/netherlands/nl/klinisch-onderzoek-kandidaat-covid-19-vaccin-van-start>

Rijksoverheid. Dashboard Coronavirus. (<https://coronadashboard.rijksoverheid.nl/landelijk/gedrag>)

De Volkskrant, (Laurens Verhagen), 18 November 2020. Ministerie in zijn nopjes met coronamelder, maar effectiviteit is nog altijd onduidelijk.

(<https://www.volkskrant.nl/nieuws-achtergrond/ministerie-in-zijn-nopjes-met-coronamelder-maar-effectiviteit-is-nog-altijd-onduidelijk-bb38fda6/>)

Universiteit van Amsterdam. De impact van het coronavirus.
<https://www.uva.nl/over-de-uva/organisatie/faculteiten/faculteit-der-maatschappij-en-gedragswetenschappen/onderzoek/de-impact-van-het-coronavirus/de-impact-van-het-corona-virus.html>
<https://www.impactcorona.nl>

IV. Welfare State Response

Education System Response

Education
Response
Score: 7

The mix of autonomy and innovation in the Dutch educational system, combined with broad support for the social role of schools, resulted in a swift response to the coronavirus crisis. School closures were seen as a measure of last resort. In fact, during the first wave, schools and universities closed against the advice of the Outbreak Management Team, mostly under pressure from concerned parents. Elementary schools and daycare centers reopened as soon as possible. For children of essential workers, schools and daycare centers never closed. Furthermore, at-risk children – particularly from vulnerable families or at risk of domestic abuse – also returned to school quickly.

After the first wave, many schools experienced problems with accumulating delays for large groups of students. One in three elementary schools expressed concerns about (potential) delays and study backlogs. While schools could rely on centralized information through the respective councils, they had a large degree of freedom to interpret the rules and organize their processes as they saw fit. For example, some schools required face masks to be worn even when this was not government policy, while some schools decided to half class sizes. Overall, daily and weekly schemes varied widely. At the same time, centralized resource pages for sharing good practices as well as online teacher training for distance learning were organized pretty quickly.

No less than 85% of secondary education schools registered delays and study backlogs. In particular, the practice-based components of vocational training programs (MBO and HBO) suffered delays due to the limitations of work-study placements and internship arrangements. One in five elementary schools raised concerns about increased inequality due to the COVID-19 situation. Municipalities responded with in-kind help for vulnerable children, providing them with tablets and, where necessary, computers or internet access. In many places, summer and winter vacation schools were organized to mitigate the delays during the lockdown.

Compliance with the pandemic measures required investment in the quality of school buildings. When the adequacy of the climates within schools became an issue, the government reacted somewhat belatedly with a special financial package to improve the ventilation of school buildings. In decisions to open or close schools, as well as the prescribed measures, the well-being of children was taken into account, as were issues with coronavirus testing capacity (teachers received priority testing from 21 September). Undoubtedly, adaptation to the pandemic required a lot of effort. Teachers and administrators have raised concerns about high workloads and the increased risk of burnout. The existing shortage of teachers was made worse by higher rates of sick leave, and the need to change routines in order to design and implement new rules.

While elementary schools returned to in-person teaching after the first wave, secondary and post-secondary institutions struggled to provide at least first-year students with a minimum of face-to-face education, never exceeding 30% of all study hours.

Many higher education institutions were already used to fewer contact hours and a relatively high share of independent project work. Small project groups were generally allowed to work together until the second lockdown. While the changes were rather minor for many students, the loss of social contact with fellow students, and the inability to undertake lab or practical work for some study programs were significant impacts. Other programs, especially small-scale professional programs that relied on personal contact and supervision, had to make more drastic adjustments.

In particular, assessment methods at all levels shifted to more formative types, as summative assessments were increasingly difficult to organize. For the first time, the two important central examinations – CITO entry exam to secondary education and the central graduation examination at the end of secondary school – were canceled. This fueled discussions about the future of central examinations in the Netherlands.

During the second wave, special attention was given to vulnerable children. In addition, programs with practical components were exempted from the lockdown, where possible. At the higher education level, efforts were made to introduce first-year students to university life, though mostly online. All programs invested in more contact hours with first-year students, where possible. Student unions and organizations were disappointed that they were not sufficiently involved in decision-making, thereby reducing flexibility in the response.

Citation:

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<https://www.lesopafstand.nl/>

<https://www.lesopafstand.nl/app/uploads/Handreiking-optimaal-ventileren-op-scholen.pdf>

<https://www.vo-raad.nl/artikelen/onderwijs-tijdens-corona>

<https://www.vo-raad.nl/artikelen/hulp-bij-inhalen-achterstanden-na-coronacrisis>

<https://www.vo-raad.nl/artikelen/corona-en-voortgezet-onderwijs-belangrijke-bronnen-en-instanties>

<https://boombereopsonderwijs.nl/nieuws/afgestudeerde-bol-niveau-2-studenten-coronacrisis/>

<https://corona-teller.nl/geen-examen-in-2021-voor-vmboers-door-coronavirus/>

<https://www.poraad.nl/nieuws-en-achtergronden/het-schooldadvies-was-nog-nooit-zo-belangrijk>

<https://www.iso.nl/2020/06/54-000-studenten-studieachterstand-door-corona/>

Social Welfare Response

Social Welfare
Policy Response
Score: 5

As is the case with most crises, the COVID-19 pandemic hit the most vulnerable groups the hardest. First, school children were affected by the lockdowns. During the first lockdown, efforts were made to keep at-risk children at school as much as possible. Municipal governments worked together with schools to provide electronic equipment, additional mentoring and other assistance to families. Summer schools and winter vacation schools were organized as a means of remediation. During the second lockdown, schools had more freedom to determine which children were at risk and which should study from home.

Access to social services remained problematic for groups with limited digital skills, particularly the elderly, and people with mental and learning disabilities. As a first reaction, support packages were given to businesses and not to individuals or families. As a consequence, some groups were left out: freelance and flexible contract workers, seasonal workers (many with a migrant background), young people with no work experience, and students with temporary hourly jobs (often in the restaurant and tourist industry). These groups received some compensation, but generally not enough.

People with flexible jobs were hit by the coronavirus crisis harder than average, particularly unskilled workers for whom losing a job means falling into poverty. The number of welfare recipients increased in 2020, breaking the trend since 2017 of declining unemployment. Small business owners and people with flexible contracts were hit harder: 38% reported significant income losses, as opposed to 23% of the total working population.

Refugee centers were in a precarious situation, as facilities for the isolation of contagious people were largely missing.

By and large, due to the decentralized structure of social services, municipalities took the task to support the most vulnerable. The government responded, with some delay, with a package of more than €1 billion for local projects in the areas of social work, crisis help (including youth psychiatric help), domestic violence prevention, housing (including temporary houses and shelters), education (compensation and support programs), employment (re-schooling), debt issues, vulnerable youth and poverty. In addition, a large number of NGOs and local organizations joined the effort with various community solidarity initiatives. The adequacy and effectiveness of the measures varied per municipality, as measures were dependent municipalities' capacities to identify and reach out to vulnerable groups, as well as the local economic structure, which varied widely with some municipalities hit harder than others depending demographics and prevalence of certain business branches.

As the cultural sector was hit doubly hard – due to the lockdown and due to the large number of freelance workers – the government responded with a package for artists, musicians and cultural organizations, which totaled €1.6 billion.

These are largely short-term mitigation efforts. The long-term effects of the crisis and the measures remain to be seen.

Citation:

<https://www.scp.nl/onderwerpen/corona/nieuws/2020/07/09/kwetsbare-groepen-lopen-grootsterisico-op-werkverlies-en-armoede>

<https://www.uva.nl/content/nieuws/pressberichten/2020/05/onderzoek-toont-hoecoronamaatregelen-kwetsbare-groepen-hard-raken.html>

<https://www.gemeente.nu/sociaal/versnelling-aanpak-kwetsbare-groepen-in-coronatijd/>

<https://www.rijksoverheid.nl/onderwerpen/coronavirus-financiële-regelingen/overzicht-financiële-regelingen/overzicht-regelingen-culturele-en-creatieve-sector>

<https://www.scp.nl/onderwerpen/corona/documenten/publicaties/2020-verdiept-sociale-kloof-in-flexland-Nederland-NRC-next-15.09.2020>

Healthcare System Response

Health Policy
Response
Score: 6

Regardless of the structural weaknesses exposed during the COVID-19 crisis (see “Implementation”), the healthcare system in the Netherlands is still among the strongest in the world, ranking 11 overall. With nine out of 11 medical research universities ranked in the top 100 in the world, the Netherlands was able to engage quickly in knowledge exchange and clinical research on COVID-19.

The National Institute for Public Health and the Environment, as a trustworthy advisor to the government, assumed the task of coordinating and facilitating

research efforts, and accumulating and distributing the latest information to medical professionals and the general public. Infectious disease control is a core task of the institute. The center coordinates the control of infectious diseases from a national and international perspective. In the event of a major national outbreak, the center also coordinates communication about infectious disease control in conjunction with local and regional authorities.

Jansen Netherlands is one of the developers of a COVID-19 vaccine, which is still to be submitted for approval. Treatment protocols were developed and shared swiftly by a system geared to the use of evidence-based protocols. Early in the pandemic, a triage protocol was developed for access to intensive care. Later on, though unused so far, the protocol became the subject of political debate, as a natural continuation of the ongoing debate on euthanasia and end-of-life decisions in the Netherlands.

Given the general shortage of medical staff, particularly nursing staff, the response was adequate. Medical professionals were trained to work with ventilation equipment in intensive-care units. Medical students were recruited to help and, on a few occasions, the army was called to provide assistance at particularly badly affected nursing homes. Paradoxically, general practitioners who are the first line of healthcare in the Netherlands were largely left out of the pandemic response. After the first wave, they proposed taking care of lighter cases at home and alleviating hospital work. Only at the beginning of 2021 was the early discharge of patients, to continue recovery under care of general practitioners, attempted at an experimental basis.

At the beginning of the pandemic, supply chains were disturbed, personal protection equipment was not freely available. Later on, it became clear that some of the advice on the use of masks given to caregivers at nursing homes and home healthcare staff was dictated by availability rather than by medical arguments. The number of intensive-care beds was increased first to 1,700 beds, with the possibility to expand to 2,400 beds, although the increase would require inevitable concessions to quality of care. During the first wave and to a lesser extent during the second wave, this necessary increase in intensive-care beds was made possible due to the postponement of planned and non-acute healthcare. The number of cancer diagnoses, for example, dropped during the first wave by 20 – 25%, but was largely compensated in the following months. Patients were distributed throughout the country, with some even receiving care in Germany, in order to ensure even distribution and the efficient use of resources. During the first wave, regional differences were significant and good coordination was necessary, sometimes to the inconvenience of individual patients.

Citation:

<https://www.usnews.com/education/best-global-universities/netherlands/clinical-medicine>

Verdere opschaling COVID 19. Een theoretisch scenario voor opschaling tot 3.0 00 IC bedden

waarvan 2.400 in Nederland, Landelijk netwerk acute zorg, September 2020

COVID-19 en kanker, <https://iknl.nl/covid-19>

<https://www.zorgvisie.nl/directeuren-zkn-en-zn-we-gaan-samen-de-zorgcapaciteit-in-stand-houden/>

<https://nos.nl/artikel/2353586-ziekenhuispersoneel-wil-helder-beleid-voor-mondkapjes.html>

Family Policy Response

Family Support
Policies
Score: 6

Initial indications show that work-family balance during the COVID-19 pandemic was impacted far more negatively for women than for men, with mothers carrying a greater proportion of the extra burden of teaching at home on top of the already skewed distribution of household tasks and other unpaid care work (Kamervragen June 2020). Compensation measures were arranged exclusively through labor/business arrangements. Families are not directly supported for the cost and time of lockdown measures. Costs for childcare are paid for the time of lockdown, but this is to ensure that childcare services do not go bankrupt. Combining work and care at home is not financially compensated in any way. Furthermore, when children have to quarantine, there is no financial compensation for parents missing workdays. Employees are advised to negotiate with their employers.

In the second lockdown, more parents used the provisions for school attendance due to difficulties of combining care and work. The list of essential workers who had the right to use emergency care was expanded in the second wave.

Survey data suggests that women experience higher workloads (40%) than men (26%). This is particularly true for mothers with essential professions. Interestingly, fathers are taking care of children more often (22% in April and 32% in June 2020). Mothers continue to provide significantly more hours of care, however. Families report more tensions and stress during the lockdown and, in some cases, violence. Generally, indications are that the lockdown reinforced traditional family roles, as women took on the greater burden of running the household, and taking care of children and helping them with homework, while working from home at the same time.

Municipalities took specific measures to alleviate families using various instruments, such as postponed rent payments, easier access to food banks, and providing tablets and internet access to schoolchildren. Municipal youth care workers targeted children at risk and worked with schools to provide them with the necessary safety net. The number of (suspected) cases of child abuse

was significantly higher in 2020, compared to 2019, with 8.6% of cases directly linked to the lockdown.

The number of marriages decreased 15.4% in 2020. This was somewhat compensated by more registered partnerships. However, more marriages ended in divorce as well.

Citation:

<https://www.nji.nl/nl/coronavirus/Gemeenten/Heb-extra-aandacht-voor-gezinnen-met-een-lage-sociaaleconomische-positie>

<https://www.armoedecoalitie-utrecht.nl/nieuws/maatregelen-en-initiatieven-i-v-m-coronavirus-utrecht/>
COVID Gender (In)equality Survey Netherlands, Tweede policy briefover de periode juni 2020, KINDERMISHANDELINGTIJDENS DE EERSTE LOCKDOWN, Samantha Vermeulen / Sheila van Berkel / Lenneke Alink, Leiden University, 2020

<https://www.cbs.nl/nl-nl/achtergrond/2020/53/jaaroverzicht-2020>

<https://vng.nl/artikelen/noodopvang-kinderen-lockdown-decemberjanuari>

International Solidarity

International
Cooperation
Score: 4

The Dutch government, represented by Prime Minister Rutte and Minister of Finance Hoekstra, managed to draw the ire and indignation of southern EU member states when they boasted about the country's prudential budget policies and argued that access to the €750 billion coronavirus support fund for EU member states with high state debts should only be granted on condition of economic reforms. At the same time, they dared to beg for EU-wide coordination of face mask procurement and compensation for Dutch floriculturalist businesses cut off from foreign markets by the coronavirus crisis (NRC-Handelsblad, 27 March 2020). In the end, the Dutch agreed to participate in the EU coronavirus fund without the need for economic reform conditions. But in return they demanded and received guarantees on a legal arrangement that linked the right to use EU subsidies to respect for rule-of-law criteria.

Citation:

NRC-Handelsblad, (S. Alonso et al.) 27 March 2020. 'Walgelijk' en 'wreed': hoe Nederland in de coronacrisis vijanden maakt in de EU.

<https://www.nrc.nl/nieuws/2020/03/27/walgelijk-en-wreed-hoe-nederland-in-de-coronacrisis-vijanden-maakt-in-de-eu-a3995149>

NRC-Handelsblad (S. Alonso), 9 December 2020 Europese ruzie komt Rutte niet slecht uit.

(<https://www.nrc.nl/nieuws/2020/12/08/eu-ruzie-komt-rutte-niet-slecht-uit-a4023040>)

Resilience of Democracy

Media Freedom

Media Freedom
Score: 8

Media freedom was fully guaranteed from and has in no way been infringed on since the beginning of the coronavirus crisis. However, what did change, especially in March and April, was the interaction between government authorities and the media. In the televised press conferences, much more was at stake than catching up with and updating the parliamentary press. The goal was to directly communicate new policy decisions via television to Dutch residents and thereby influence the behavior of millions of people. Consequently, the media sometimes felt they were instrumental in the government information campaign. But this role was in no way imposed, it was self-chosen by the media outlets and journalists. Nevertheless, the Dutch pragmatic approach to an ‘intelligent’ lockdown – which nudged citizens to voluntarily comply with rules, and at most threatened more punitive measures – could only have been successful because the media chose to avoid alarmist reporting and scaremongering, and instead played a reliable, nonpartisan and responsible role (Boven and Van Leeuwen, 2020). The media, under protest, had to accept that the government decided there was no time to respond to journalists’ requests to make government documents available (legally required by the *Wet Openbaar Bestuur*); the government made an informal deal with large news organizations to release the requested documents in the second half of 2020.

In later stages of the coronavirus crisis, the media faithfully reported oppositional voices – even those of anti-coronavirus protesters that were clearly inspired by conspiracy theories or hard-wired anti-elitist views. As a matter of fact, it was these protesters that frequently turned against reporters, smashing their cameras and broadcasting vehicles, and physically and/or verbally abused them (Het Parool; NRC-Handelsblad). The mainstream media systematically discredited fake news and conspiracy theories. In parliament, only the newly created Forum for Democracy was seriously influenced by conspiracy theories and the respective protests. In December 2020, this resulted in the breakdown of the party as many prominent members could no longer stomach their leader’s support of (among other things) conspiracy-theory inspired anti-coronavirus stances.

Citation:

Boven, L., and Van Leeuwen, S., Stille op het Binnenhof. Politiek in coronatijd, Amsterdam: Balans NRC-Handelsblad (Andreas Kouwenhoven and Wilmer Heck), 28 August, 2020. Wat bezielt de coronademonstranten die politici belagen? (<https://www.nrc.nl/nieuws/2020/08/28/wat-bezielt-de-coronademonstranten-die-politici-belagen-a4010122>)

Het Parool, (Hanneloes Pen), 19 October 2020. Aantal bedreigingen en fysiek geweld tegen journalisten neemt toe (<https://www.parool.nl/nederland/aantal-bedeigingen-en-fysiek-geweld-tegen-journalisten-neemt-toe~be35050f/>)

Het Rechtenstudentje (Rose-Marie Mühren), 20 April 2020. Wob-verzoeken over corona voorlopig opgeschort (<https://www.hetrechtenstudentje.nl/nieuw/wob-verzoeken-over-corona-voorlopig-opgeschort>)

NRC-Handelsblad, Dossier Forum voor Democratie (<https://www.nrc.nl/dossier/forum-voor-democratie>)

Civil Rights and Political Liberties

Civil Rights and
Political Liberties
Score: 7

The Netherlands has a long and solid tradition of protecting civil rights and liberties. One issue that became even more salient during the COVID-19 crisis is privacy. Dutch citizens are more at risk than ever of having their personal data abused or improperly used. (During the coronavirus pandemic, there was a substantial data-leak from the testing facilities, which resulted in personal information being offered for sale online).

In addition, current policies regarding rightful government infringement of civil rights are shifting from legally well-delineated areas (e.g., anti-crime and terrorism measures) toward less clearly defined areas involving the prevention of risky behavior (e.g., in personal health, education and childcare) and travel behavior. Increased monitoring and digital surveillance technologies disproportionately target those most dependent on state support, creating inequalities in policing and fraud control. Many of the monitoring and surveillance technologies – which often link various databases – are also poorly monitored legally. Most recently, U.N. Special Rapporteur for Human Rights Philip Alston criticized the Dutch government (and parliament) for its use of an algorithmic system (Systeem Risico Indicatie) to detect social benefits fraud. The system linked data from across all government databases to generate an individual fraud-risk profile. In the midst of the pandemic, a scandal resulting exactly from this practice of criminalizing thousands of families, particularly those of poor and migrant background, led to the eventual resignation of the cabinet on 15 January 2021.

Against this background, the government was cautious about introducing anti-pandemic measures that involved privacy. Although the minister of health was a keen proponent of the so-called Corona App, a tracking app that signals whether the device owner has come into contact with a potentially contagious

person, the first versions of the app were heavily criticized and were not broadly used by Dutch citizens.

All in all, the cabinet did not even consider declaring a state of emergency. They found the idea “un-Dutch.” Instead, the “intelligent” lockdown approach was consistently presented as proportionate, with clearly communicated deadlines and target values for lifting particular measures. The situation changed around Christmas though, as it became clear that the second lockdown did not yield the necessary results. During the Christmas holidays, police enforcement was visible and heavier than normal. Furthermore, a long debate about fireworks was abruptly ended with a total ban on fireworks introduced for New Year’s Eve.

Citation:

Boven, L., Van Leeuwen, S., *Stilte op het Binnenhof. Politiek in coronatijd*, Balans, Amsterdam, 2020, p. 93-94

<https://www.rijksoverheid.nl/onderwerpen/coronavirus-app>

<https://coronamelder.nl/en/>

<https://www.eur.nl/erasmusacademie/nieuws/zorgen-over-privacy-bij-introductie-coronamelder>

<https://www.gemeente.nu/veiligheid/handhaving/overzicht-2020-coronaboetes/>

<https://decorrespondent.nl/11959/de-tragedie-achter-de-toeslagenaffaire/719468974741-fc85ca00>

<https://www.rtlnieuws.nl/nieuws/nederland/artikel/5192250/nederland-feestdagen-corona-familiebezoek-enquete>

<https://www.trouw.nl/binnenland/coronacrisis-zwengelt-vuurwerkdebat-weer-aan-komt-er-een-verbod-om-zorgpersoneel-te-ontlasten~ba7a2979/>

Judicial Review

Judicial Review
Score: 8

Judicial review for civil and criminal law in the Netherlands involves a closed system of appeals with the Supreme Court as the final authority. Unlike the U.S. and German Supreme Court, the Dutch Supreme Court is barred from judging parliamentary laws in terms of their conformity with the constitution. The Dutch Court of Appeal attracted international attention by upholding a landmark climate-change ruling, instructing the Rutte government to raise its greenhouse-gas reduction goal of 17% to at least 25%. This was one of a series of executive action reviews. As a result, the judiciary itself came under increasing scrutiny, both with regard to its internal functioning and the degree to which it is truly independent of politics.

Whereas the Supreme Court is part of the judiciary and highly independent of politics, administrative appeals and review are allocated to three high councils of state (Hoge Colleges van Staat), which are subsumed under the executive, and thus not fully independent of politics. The three high councils are the Council of State, which serves as an advisor to the government on all legislative affairs and is the highest court of appeal in matters of administrative

law; the General Audit Chamber, which reviews the legality of government spending, and its policy effectiveness and efficiency; and the ombudsman for research into the conduct of administration regarding individual citizens in particular. Members are nominated by the Council of Ministers and appointed for life (excepting the ombudsman, who serves only six years) by the States General. Appointments are never politically contentious. In international comparison, the Council of State holds a rather unique position. It advises government in its legislative capacity and acts as an administrative judge of last appeal involving the same laws. This situation is only partly remedied by a division of labor between an advisory chamber and a judicial chamber. Some observers defend this structure, arguing that only an entity with detailed and intimate knowledge of the practical difficulties associated with policy implementation and legal enforcement can offer sound advice to the government in this area.

During the coronavirus crisis, courts continued to work as they were deemed vital for the functioning of the state. Next to strict pandemic measures, the opportunity was offered to citizens with health concerns to proceed online and, wherever possible, in writing. All in all, the work of the courts was not seriously disturbed. Recently, cases concerning pandemic measures went to court. The most recent example is from 13 January 2021, where the court ruled that an employer may withhold payment from an employee for not wearing the mandatory face mask. On 5 January, the court rejected the requirement for Dutch nationals to present a PCR test upon return to the Netherlands from countries designated as risk areas. However, the cabinet later reinstated the requirement. A demand to receive an abortion pill by mail during the first lockdown was rejected. The court ordered that a visit to an abortion clinic was mandatory.

On 24 July, Viruswaanzen, the Dutch anti-coronavirus action group, lost a lawsuit against the pandemic measures. The court ruled that the measures were adequate, proportionate and based on solid advice.

Citation:

[https://www.rechtspraak.nl/coronavirus-\(COVID-19\)/Paginas/COVID-19-Tijdelijke-algemene-regeling-zaaksbehandeling-Rechtspraak.aspx#urgentezaken](https://www.rechtspraak.nl/coronavirus-(COVID-19)/Paginas/COVID-19-Tijdelijke-algemene-regeling-zaaksbehandeling-Rechtspraak.aspx#urgentezaken)

Informal Democratic Rules

Informal
Democratic Rules
Score: 8

The democratic DNA of the Dutch and their political regime characterized the Dutch approach to crisis management. The cabinet spent less than an hour considering the possibility of declaring martial law before rejecting it (Bovens and Van Leeuwen, 2020: 93 – 94). In his communication with supposedly

responsible and well-informed citizens, Prime Minister Mark Rutte consistently spoke not of ‘obligations’ but of ‘urgent advice’ and requested that citizens stick to the rules: “I cannot prohibit people living on the third floor of an ordinary high-rise building to go tilling their little food garden” (Boven and Van Leeuwen, 2020: 88). Surprisingly for those who consider the Dutch a pretty anti-authoritarian people, most of them accepted the ‘urgent advice.’ “In this opinionated and self-willed country people listened extraordinarily well to the sermons by minister Rutte and minister De Jonge” (Minister of Public Health De Jonge, quoted in Bovens and Van Leeuwen, 2020: 93).

The same democratic pragmatism pervaded the way the cabinet and opposition treated each other during the first wave and “intelligent” lockdown. Political polarization was anathema, except for the right-wing Party for Freedom (Wilders) and Forum for Democracy (Baudet). But other opposition parties (e.g., Labor and Green Left) deliberately moderated their tone during debates, leaving policymaking to the cabinet, and limiting their role to instrumental adjustment and stressing policy aspects that were neglected or disparaged by government. The high point of this business-like attitude was when Van Rijn (a member of the opposition Labor Party, but a very respected former deputy minister of public health) succeeded Bruins (Conservative Liberal, VVD) as minister for medical care when Bruins resigned due to fatigue.

In general, parliament slowed down and let its business be dictated by the cabinet. As even commission meetings were canceled, the bread-and-butter of parliamentary deliberation for file-loving backbenchers, some spoke of parliament muzzling itself. Nevertheless, parliament pushed the cabinet to close schools against the advice of the OMT, and kept pressing for changes to policies on wearing face masks, the closure of care centers for the elderly, and the test-and-trace system as well as other shortcomings.

The return of parliament on 12 August 2020, following the summer recess, marks the turning point and the resumption of normal government-opposition polarization. The first wave and lockdown was more or less experienced as a shared responsibility. However, preventing a second wave and second lockdown was considered different, with opposition parties advocating either stronger and earlier interventions or no interventions at all, and cabinet-supporters and the cabinet itself gradually falling prey to internal disagreements over whether to prioritize public health or the long-term economic, social and cultural impacts of a second lockdown. In November and December, the sheer number of coronavirus cases forced a second lockdown – a ‘partial’ one at first, which became a ‘strict’ lockdown halfway through December. The lockdown was extended to 19 January and then to 9 February.

Meanwhile, opposition and government parties haggled over whether to prioritize a rapid vaccination program (compared to other European countries), or ensure a well-designed, orderly and reliable program that would be trusted even by those hesitating to be vaccinated at all.

There are signs of increasing social polarization on some aspects of the pandemic measures (e.g., curfews, mask wearing and the closure of schools), yet this is limited to a vocal but relatively small proportion of citizens (Impact Corona December 2020). Political polarization comes mainly from the extreme populist fringes of the political spectrum. Overall, a large majority of the population and all major political actors support the general thrust of pandemic measures and policies.

Citation:

Boven, L. and Van Leeuwen, S., 2020. Stilte op het Binnenhof. Politiek in coronatijd, Amsterdam, Balans NOS Nieuws, 14 October 2020. Oppositie zeer kritisch over corona-aanpak, 'Kabinet heft gefaald' (<https://nos.nl/artikel/2352253-oppositie-zeer-kritisch-over-corona-aanpak-kabinet-heeft-gefaald.html>)
Tweede Kamer, 17 December 2020, debat – Waarom begint Nederland pas in januari met de vaccinaties tegen het coronavirus? De Kamer debatteert met minister De Jonge (Volksgezondheid). (https://www.tweedekamer.nl/kamerstukken/plenaire_verslagen/kamer_in_het_kort/debat-over-het-starten-van-de-vaccinaties-tegen)
<https://www.volkskrant.nl/nieuws-achtergrond/nederland-loopt-door-hoog-vaccinatietempo-in-op-andere-europese-landen-b1766846/>

Resilience of Governance

I. Executive Preparedness

Crisis Management System

Crisis
Management
System
Score: 6

On paper the Dutch government was fairly well prepared. In 2016 and again in 2018, the government considered but rejected the idea of a new comprehensive health strategy (as suggested by the WHO following the United Nation's SDGs), with approaches coordinated by the ministries of health (welfare and sports), agriculture and foreign affairs (Trouw, 15 April 2020; see also "International Coordination").

However, the safety regions (Veiligheidsregio), and the National Institute for Public Health and the Environment (RIVM) were convinced their preparation was adequate. In 2019, the Safety Region South-Holland organized a regional training for dealing with a pandemic. This training, with the benefit of hindsight, delivered too few lessons largely due to a lack of imagination, such as lessons concerning the effects of closing borders on the import of medical supplies (NRC-Handelsblad, 19 June 2020).

The Dutch RIVM experts were confident in their conviction that systems, processes and protocols for 'early warning,' and the identification and treatment of single 'index patients' entering the Netherlands from foreign countries were ready. After all, they worked well in staving off the Mexican flu in 2009 (Boven and Van Leeuwen, 2020: 26).

These scenarios were duly applied when, by mid-January information from China and later Italy arrived. On 24 January, the RIVM's Outbreak Management Team convened for the first time. On 27 January, the coronavirus was officially designated an A-disease, putting the regional and municipal health service agencies (GGDs) on alert. However, it was only on 26 February that the national crisis organization was activated in practice (Tijdschrift Coronavirus, February; Algemeen Dagblad, 2 May 2020). In the beginning,

the authorities downplayed the risks and did not do sufficient justice to early warning signals. Consequently, underestimating the severity of the crisis, the authorities failed to warn implementing agencies and potentially vulnerable citizens in time (Boin et al., 2020: 39 – 40).

The health minister’s collapse from fatigue after eight hours of parliamentary debate (on March 18) illustrates the surprise and frustration officials experienced, and the difficulties of having to change course while operating in uncharted territory, which robbed officials and managers of their routine action repertoire.

Executive preparation was sufficient for the anticipated conditions based on past experiences. However, the moment it dawned on the authorities that the current conditions did not reflect past experiences, the intellectual response was swift and cabinet decision-making frantically shifted into higher gear, although getting implementation ‘on the rails’ took approximately two to three months (from the end of February until the end of April), and implementation barriers would turn out to be persistent (see “Implementation”). All in all, the Dutch government proved to be insufficiently prepared for a rapidly developing worldwide pandemic.

Citation:

Boin, A. et al., 2020. Covid-19. Een analyse van de nationale crisisresponse, Leiden: Crisis University Press
Boven, L., and Van Leeuwen, S., 2020. De stilte op het Binnenhof, Politiek in coronatijd, Amsterdam: Uitgeverij balans

Tijdlijn Coronavirus (<https://tijdlijn-coronavirus.nl>)

Trouw (Hans Marijnissen), 15 April 2020. Drie keer werd Nederland gewaarschuwd voor een pandemie, maar de regering koos voor het isolement. (<https://www.trouw.nl/nieuws/drie-keer-werd-nederland-gewaarschuwd-voor-een-pandemie-maar-de-regering-koos-voor-het-isolement~bc99452d/>)

NRC-Handelsblad (Derk Stokmans aand Mark Lievisse Adriaanse), 19 June 2020. Hoe Nederland de controle verloor. De Corona-uitbraak van dag tot dag. (<https://www.nrc.nl/nieuws/2020/06/19/hoenederland-reageerde-op-het-nieuwe-virus-uit-china-van-niks-aan-de-hand-tot-blinde-paniek-a4003075>)

Algemeen Dagblad (Jan Hoedeman and Nielks Klaassen), 2 May 2020. Achter de schermen bij de coronacrisis: ‘Het is al te snel verspreid’ (<https://www.ad.nl/binnenland/achter-de-schermen-bij-de-coronacrisis-het-is-al-te-snel-verspreid~acc59aa9/>)

II. Executive Response

Effective Policy Formulation

Effective Policy
Formulation
Score: 7

Since the outset of the pandemic, the government response has been firmly grounded in expert opinion. As the country’s leader and crisis manager, Prime Minister Rutte referred early on to expert advice as “sacrosanct” and as the government’s “compass” in determining coronavirus policies (Rutte, quoted in

AD, 16 April 2020). Preparations for a health crisis assigned the minister for public health (and welfare and sports) the lead role in formulating policy, with support provided by a special advisory council, the Outbreak Management Team (OMT). Leaning on the National Institute for Public Health and Environment (Rijksinstituut voor Volksgezondheid en Milieu – RIVM), and its Center for Infectious Disease Management, the OMT convened for the first time on 21 January 2020. The OMT is comprised of seven individuals, who are primarily virologists, epidemiologists and microbiologists. Additional members are called upon on a rotating basis and include medical specialists, general practitioners, high-level managers from university hospitals (particularly those responsible for ICUs) as well as representatives of the regional (Geneeskundige Hulpverleningsorganisaties in de Regio – GHOR) and municipal health service organizations (Gemeentelijke Gezondheids Dienst – GGD). In some cases, OMT members represent professional medical associations. Thus, OMT expertise covers mostly scientific knowledge, but also considerable practical knowledge about implementation practices and capacity.

Until well into February 2020, these experts recommended a containment strategy, which had been ‘proven’ effective during the Q-fever (2007 – 2010) and the Mexican flu crisis (2009). It was implemented by routine monitoring scenarios for early test-and-trace, isolation, and treatment for single ‘index’ patients. As late as 1 March 2020, the then-minister of health wrote in a letter to parliament: “Foremost, we have a very good organization for managing infectious diseases and crisis management. You only need to have yourself tested if you have been in one of the countries or regions with widespread (virus) emissions and if you suffer from health complaints” (Bovens and Van Leeuwen, 2019). With the benefit of hindsight, overconfidence in the lessons drawn from past experiences turned February into a lost month for timely policymaking.

Yet, during the first two weeks of March, the containment strategy was swiftly replaced. For a brief moment, it looked like the government had announced a ‘two-track’ strategy to achieve herd immunity: to mitigate the transmission of coronavirus, while simultaneously achieving herd immunity in a controlled way through the managed spread of the virus among least at-risk groups, which would protect the most at-risk groups. After heated political debate on the status of herd immunity – as either an intended goal or desired side effect – within days the government officially shifted to a flattening the curve strategy, implemented by what Prime Minister Rutte dubbed an “intelligent” lockdown. The “intelligent” lockdown would involve nudging and strongly advising citizens to voluntarily comply with measures, which would severely restrict their freedom of movement and social contacts, in order to mitigate the overall

number of infections, and prevent hospitals and other healthcare services from being overwhelmed.

Contrary to the “full” lockdowns practiced in Wuhan, parts of Italy and Spain, the Dutch lockdown approach was intended to be principled and pragmatic (but cf. Boin et al.: 56 – 58). The approach was considered pragmatic because, as the crisis developed, knowledge of the disease would increase and strategies could be adapted based on the greater understanding of the disease. It entails that crisis measures could change from ‘relaxed’ to ‘more stringent’ (as occurred from mid-March till well into April) and that the oscillation between these two poles runs in both directions – from stringent back to relaxed (June till August) and vice versa (from September till 16 December 2020). Superficially, this may give the strategy an unstable, drifting or ‘seesawing’ character. Indeed, it has been difficult for policy observers and citizens to follow each and every move in the strategy.

This intended expert-based strategy relied on a number of conditions (the degree of their realization is discussed elsewhere in this country report). These conditions included nudging informed citizens to comply (“citizens’ participatory competence”), transparent and persuasive political communication (“political communication”), reliable and timely implementation of new practices (“implementation”), and rapid policy feedback (“political feedback and adaptation,” and “learning and adaptation”).

The flattening-the-curve-by-intelligent-lockdown strategy followed by the Dutch government on the basis of (mostly) medical expertise has been criticized by many other experts – from historians and philosophers to behavioral and social scientists – eager to demonstrate the political and societal relevance of their scientific discipline. Among these experts, two more-or-less self-styled expert ‘teams’ stand out (FTM, 2020).

Since April 2020, an informal group of economics and political science inspired experts, naming themselves Restore-NL (Herstel-NL), advocated a differentiated coronavirus policy. They believe that the Dutch government erroneously rejected the original two-track strategy in favor of the lockdown strategy. Using the SIR model for infectious diseases, they differentiate the population into three risk categories: the young and less at risk (< 44 years old), the middle aged (45 – 65 year olds), and an older and more at-risk group (> 65 years old). Running several lockdown scenarios for these groups, the model shows that targeted policies outperform uniform policies (e.g., the Dutch strategy) in terms of number of deaths and economic harm. Assuming that the Dutch uniform strategy will lead to a 10% decrease in GDP – an estimate by ING Bank – this group argues for a new policy of “group

distancing” instead of uniform “social distancing.” Implementation would require very strict test-and-trace practices, and differentiated opening hours for shopping and hospitality venues, among other policies (Fransman et al., 2020). Feasibility problems and the political desirability of a sort of generational ‘apartheid’ plague the Restore-NL policy ideas.

The other group, calling themselves the Red Team (self-consciously contrasting themselves with the OMT, described as the “Blue Team”), started as a diverse interdisciplinary group of experts (field epidemiologists, a health economist, a retired health inspector, an anthropologist and a self-appointed mathematician/complexity scientist). The group published a letter to parliament. In this letter, they argue that the government in its “intelligent” lockdown strategy had abandoned the containment part of its strategy. Both for public health and economic reasons, more active containment strategies are desirable, such as more intense test-and-trace practices, and more resolute interventions in local outbreaks. Their arguments caught the attention of the media, which framed the Red Team as an interesting counter-voice to the “medical technocracy” of the OMT. Furthermore, mayors (as chairs of the safety regions) and the opposition parties in parliament showed interest, even Prime Minister Rutte felt pressed to request the OMT’s advice on the Red Team’s unsolicited recommendations (Groene Amsterdammer, 2020).

By that time, the OMT itself advocated a broadening of the expert base for coronavirus policy and even organized a joint meeting with the Red Team. A merger of OMT and Red Team expertise, under the nickname the ‘Impact Management Team,’ did not come about, however, as both the cabinet and the OMT preferred one source of advice based on a clearly delineated set of medical expertise. They feared that a completely inter- or transdisciplinary advisory council would engage in political trade-offs better conducted in formal political arenas.

It may, therefore, be argued that the circle of experts that directly informed the government was sufficiently diverse in terms of expertise (medical, economic, social science, psychological and communication experts), but closed in terms of “members” (i.e., experts had to be serving on institutionalized advisory boards or channels in order to have access to government). The efforts of self-organized multidisciplinary expert groups to get a hearing were partially successful if endorsed by other official coronavirus policy players (e.g., members of opposition parties or mayors heading safety regions) or the media.

With Restore-NL advocating more freedom for less-vulnerable groups, and the Red Team pleading for more and heavier containment of the coronavirus, it is obvious that the government’s pragmatic approach to “intelligent” lockdown

and the political dynamics to which it was exposed in addition to expert advice balanced the two opposing trends in expert advice beyond the OMT. Part of this balancing act, however, originated in political pressure instead of expert advice. Examples are decisions on school closures, the obligatory wearing of mouth guards in public spaces beyond public transport, and prioritizing the vaccinations of healthcare professionals in hospitals and care institutions, and GPs over the most vulnerable population groups. It may be argued that the expert advice and ‘honest broker’ role (Pielke, 2007) of the OMT gradually became contested by other, more informal expert groups acting as “issue advocates,” departmental clients and lobbies. More generally, the longer the pandemic lasted, political influence on strategy formulation increased in importance relative to expert advice.

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Boin, A. et al., 2020. Covid-19. Een analyse van de nationale crisisrespons, Leiden: The Crisis University Press

Bovens L. and Van Leeuwen, S., 2020. Stilte op het Binnenhof. Politiek in coronatijd, Amsterdam: Balans

Pielke, R., 2007. The Honest Broker. Making sense of science in politics, Cambridge: Cambridge University Press

Algemeen Dagblad (Tobias den Hartog), 16 April 2020. “Heilig’ team bepaalt ons dagelijks leven.”

(<https://www.ad.nl/politiek/heilig-team-bepaalt-ons-dagelijks-leven~a3bdcac8/>)

Fransman, R. et al., Blog – in Economisch Statistische Berichten, 27 May 2020. De 60-mineconomie leidt tot betere resultaten dan de anderhalvemeterconomie.

(<https://esb.nu/blog/20059630/de-60min-economie-is-beter-dan-de-1-5meter-economie>)

De Groene Amsterdammer (Jou de Vriese), 7 October 2020. Corona: Het OMT of Het RedTeam? We moeten de koers terugpakken. (<https://www.groene.nl/artikel/we-moeten-de-koers-weerterugpakken>)

Follow the Money (Thomas Bollen), 29 December 2020. Nederlandse coronabeleid doorgelicht: van tweesporenbeleid naar het spoor bijster. (<https://www.ftm.nl/artikelen/coronastrategie-doorgelicht-herstelnl-redteam?share=oGorPmJNTuk4b2BW7oONQXCccDUyxhMqpqk898Q49crD4okNxOxF%2FPmpeZKacw%3D%3D>)

Policy Feedback and Adaptation

Policy Feedback
and Adaptation
Score: 9

Policy feedback is collected through an intricate web of information infrastructure, and bureaucratic and scientific advisory channels. By installing the OMT as an advisory board for cabinet decision-making, and relying on the RIVM’s expertise in managing infectious diseases and health crisis management, policymakers availed themselves of the crucial ability to capture basic evidence and assess the short-term impact of measures to determine whether policies should be adapted. In addition, during crisis situations, information for the administrative Interdepartmental Commission Crisis Management (ICCb), which advises the political Ministerial Commission Crisis Management (MCCb), is collected and presented by the Department of Justice and Safety’s National Coordinator for Fighting Terrorism and Safety.

Boin et al. (2020) distinguish between four kinds of information:

(1) about the number of infections – data collected by the municipal health services responsible for test-and-trace

(2) about ICU capacity – responsibility of hospitals, no centralized data collection until the launch of the National Coordination Center for Patient Allocation (Landelijk Coördinatiecentrum Patiënten Spreiding – LCPS) on 21 March 2020

(3) about citizen responses – data collected by the National Core Team Crisis Communication, the 25 safety regions, the national police, Google mobility, the Netherlands Institute for Social Research (Sociaal-Cultureel Planbureau), and the specially launched (April 2020) Temporary Working Group on Social Impact (which comprises high-level administrators and research institutes)

(4) about impact on the economy – data collected routinely by the Center for Economic Policy Analysis (Centraal Planbureau – CPB), the National Institute for Statistical Data (Centraal Bureau voor de Statistiek – CBS) and the central bank

These different information streams are synthesized into a ‘dashboard,’ which categorizes information in six themes: maximum control (e.g., number of infections and COVID-19-related deaths as well as available intensive care beds), continuity of vital societal processes (e.g., sick leave in professions crucial to key administrative and economic sectors), care for vulnerable groups (e.g., the elderly and the disabled), financial and economic stability (e.g., developments in employment and bankruptcies), the spread of COVID-19 among Dutch Caribbean communities, and social impacts (especially public support for lockdown measures and approval ratings of government policy). For ICCb and MCCb meetings, all dashboard-synthesized information is condensed into one PowerPoint slide that contains approximately six recommendations (Boin et al. 2020: 52 – 53).

Clearly, media-hype around a medical ‘technocracy’ is incorrect (see “Effective Policy Formulation”). However, the datasets used are not public; the way key information is used to arrive at political decisions is hardly transparent, even though the minister of health attempted to keep parliament informed in lengthy official letters; and in frequent press conferences, the prime minister and the minister of health stress medical information in communicating and justifying their decisions. Reflecting the policy priority of preventing hospitals from being overwhelmed, the number of people in ICUs – reported daily in national television news broadcasts and other media – appeared to be the single most important output indicator. Due to the inevitably long delays (and inaccuracies) in the reporting of key indicator data – especially in the rise of infections, and resulting hospitalizations and ICU capacity problems – the RIVM, as is usual in other domains such as

environmental policymaking, had to rely on policy models to predict outputs and impacts of policy measures. Partly due to persistent uncertainties about the properties and behavior of the new coronavirus, the RIVM's models did not reflect evidence-based policymaking, but rather policymaking based on best assumptions (Trouw, 2020). Efforts to collect more timely and accurate information on the number of COVID-19-related deaths, an app for contact tracing, and capacity problems in hospitals, institutions for elderly care and laboratories all proved to be persistent and hard to overcome (see "Implementation"). The remaining uncertainties particularly affected efforts to design a transparent exit strategy out of the lockdown situation. Even with the availability of (probably) effective vaccines in December 2020/January 2021, there are lingering uncertainties regarding how fast and in what order to scale down lockdown measures. Even though the government, and its scientific informers and advisers have done their utmost to collect evidence, provide feedback and recommend prudential policy adjustments, uncertainties around the novel coronavirus remain. In his first press conference on 12 March 2020, Prime Minister Rutte stated that "in crises like this one with 50% of knowledge you have to make 100% of the decisions, and you have to accept their consequences." Nine months later, the 50% knowledge has increased to perhaps 60%, but not more.

Citation:

Boin et al. 2020. Covid-19. Een analyse van de nationale crisisrespons, Leiden: Crisis University Press (esp. pp. 42ff)

Trouw (Joep Engels), 18 December 2020. Marion Koopmans – "We moeten voorbereid zijn op Disease X, de ziekteverwekker die we nog niet kennen

(<https://www.trouw.nl/es-bcb51dd0> <https://www.trouw.nl/es-bcb51dd0>)

NOS-Nieuws, 12 March 2020. Rutte: we hebben iedereen nodig, 17 miljoen mensen.

<https://nos.nl/video/2326873-rutte-we-hebben-iedereen-nodig-17-miljoen-mensen.html>

Public Consultation

Public
Consultation
Score: 6

The day after announcing the first lockdown, 14 March, the chairpersons of the largest employees' federation (the Federation of Dutch Trade Unions, FNV) and employers' organization (the Association of Dutch Enterprises – Dutch Christian Employers' Association, VNO-NCW) met with the ministers of economic affairs (Wiebes), social affairs (Koolmees) and finances (Hoekstra). Meanwhile, civil servants in the Ministry for Social Affairs were already busy preparing measures to save jobs and prevent mass firings, and the Socioeconomic Council's thinktank was preparing recommendations at record speed. The Dutch polder went into overdrive.

Together, FNV and VNO-NCW constituted a countervailing power, the socioeconomic column, to the 'white-coat' column of medical advisers, who

were supposedly inundating government with lockdown advice that harmed economic interests. But one month later – following consultations with the lobby groups of the hotel and catering industry, KLM and Schiphol Airport (a kind of infrastructural facilitator for all of the Netherlands), heavy industry, HR organizations, and many others – VNO-NCW chair Hans de Bruin observed that the government and the prime minister had become more sensitive to socioeconomic interests. In particular, the government had become more sensitive to the impact of COVID-19 on the so-called ‘vital professions’ and food shops, and (less so) other societal sectors that faced heavy opportunity costs (e.g., cultural organizations, museums, concert halls, choirs, mass music and dance events, amateur and professional sports, and schools and universities).

It was under the heavy pressure of socioeconomic lobby groups and their policy consultants (e.g., McKinsey) that the government and business organizations, ‘in harmony and decisiveness’ (Bovens and Van Leeuwen, 2020: 64ff), started to consider social distancing protocols for public transport, shops, restaurants, factory floors, hospitals and other care institutions as well as work-from-home arrangements for all jobs that could continue without workers being physically present. This resulted in occasionally imaginative designs for a “one-and-a-half-meter-society” and, in order to offer business some certainty, a step-by-step exit strategy from the lockdown (Boin et al, 2020: 110 – 111). Too enthusiastically embraced during summer 2020 by both employers and employees, rules were relaxed and compliance decreased, and (young) people holidayed in France and Spain – all of which were contributing factors to the gradual emergence of an increasingly serious second wave during the fall of 2020.

The importance of lobbying and consultation by the non-medical “column” is particularly clear in a number of government decisions that disregarded or overturned strong medical advice. These decisions included:

- closing all schools down during the first wave, against medical recommendations to the contrary, due to strong pressure from teacher associations and parent groups; paradoxically, in the run-up to the second lockdown, most parents and teacher associations advocated keeping schools open, albeit for different reasons;
- allowing people to once again visit elderly relatives in care institutions, following the cruel decision to prohibit visits during the first lockdown, due to political pressure from opposition parties and the professional lobby for care homes;
- obliging everyone to wear face masks in shops in contradiction to the advice of the OMT, which was a gain for the retail lobby, as businesses could re-open for walk-in customers;

- allowing professional soccer matches to be played, with a limited number of spectators at first, and without any spectators later;
- the non-decision regarding better coronavirus care for immigrant workers in the meat-packing industry and agricultural sector (FTM, 5 January 2021);
- allowing religious organizations and churches to organize events with larger audiences than other cultural events.

Competition between the ‘white coat’ and the socioeconomic columns in policymaking became visible for all to see during tense cabinet meetings at the end of October, when the second wave loomed larger and larger. Prime Minister Rutte and Minister of Health De Jonge staked their reputations on a strong second lockdown. Meanwhile, the ministers for the economy, social affairs and finance opposed a strong second lockdown, and were occasionally supported by colleagues from other line ministries representing constituencies that faced significant opportunity costs due to the lockdown. In the end, evidence of the severity of the second wave and medical recommendations prevailed, and the country went into a second lockdown with economic recovery measures extended for a third time.

Citation:

Bovens, L. and Van Leeuwen, S. 2020, *Stilte op het Binnenhof. Politiek in coronatijd*, Amsterdam, Balans
 Boin, A. et al., 2020. *Covid-19. Een analyse van de nationale crisisresponse*, Leiden: The Crisis University Press

NRC-Handelsblad (Tom-Jan Meeus), 10 October 2020. *Corona in het kabinet: groepsvorming, harde kritiek en een nerveuze premier* (<https://www.nrc.nl/nieuws/2020/10/10/corona-in-het-kabinet-groepsvorming-harde-kritiek-en-eeen-nerveuze-premier-a4015437>)

Lise Witteman, ‘Essentiële’ arbeidsmigranten zijn niet belangrijk genoeg voor bescherming tegen corona (Follow the Money)

Crisis Communication

Crisis
 Communication
 Score: 7

In March 2020, political communication immediately shifted to crisis mode. The government understood that – given its strategy of principled pragmatism, which aimed to avoid the use of state force and emergency rule, and nudge citizens toward voluntary compliance – it needed special means for crisis communication: a clear message composed by polling, communication and behavioral scientists, and delivered directly by the prime minister and the minister of health (acting as crisis managers) to citizens via television broadcasts. Between 12 March 2020 and 12 January 2021, more than 20 televised press conferences were broadcast, each of them watched by six to 8.5 million viewers (SKO, 2021).

During the first wave and ‘intelligent’ lockdown, TV and written media complained that they were just tools of government communication instead of a countervailing power responsible for holding the government to account

(Bovens and Van Leeuwen, 2020). The initial success of this communication strategy is confirmed by SCP research. At the end of May – with the first wave subsiding and an exit strategy announced – people believed in “togetherness, respect and solidarity,” and, contrary to previous trends, had higher levels of trust in government, their fellow citizens, parliament, trade unions and the mainstream media. After the summer holidays, once contaminations rose again, and the lockdown was reinstated and even extended, the public mood changed (Het Parool, n.d.). In October, with the government calling for continued self-discipline, SCP research showed 57% of citizens blamed the government for the rising infection rate and extended lockdown. Young and popular ‘influencers’ joined the ranks of coronavirus deniers (Stichting Viruswaanzen – Virus Insanity, later rebaptized to Viruswaarheid – Virus Truth) and antivaxxers. Parliamentary debates became more partisan and polarized, with some right-wing populists calling the lockdown “dictatorial.” The OMT and RIVM, initially considered to be sacrosanct sources of evidence and expert advice, were later seen as being guilty of “withholding information” and publishing erroneous “predictions.”

University research in December signaled higher levels of fear and stress, and decreasing trust in government among the population, especially among younger people with vulnerable jobs and weaker social support networks (NOS, 18 December). Approximately 40% complained about a lack of future perspectives, up from 26% during and after the first lockdown. Other target groups that were not reached effectively by government communications included immigrant workers and citizens of non-Dutch origin. All in all, as predicted in many crisis management handbooks, the initial ‘rally around the flag’ effect gradually drifted into political blame-games, as if the outbreak of a new, completely unknown virus could be politically controlled in a matter of months. The mood swing was no doubt further fueled when, as the year 2020 progressed, the COVID-19 government strategy began to overlap with political campaigning for the March 2021 elections. In spite of all this, the prime minister continues to benefit from excellent polling results: 77% of people polled support the stronger lockdown, while only 19% reject it.

This is all the more remarkable given the increasing difficulties in informing and communicating with the public. The Dutch government tried to publicly justify the rationale for its major strategy and its frequent policy adaptations, arguing that they provided new tools and new expiration dates, and would scale lockdown measures up or down as appropriate. How successful this has been is debatable given the duration of the crisis, which has led to a gradual layering of newer and older measures, and created a constantly changing, hard to follow package of measures. For example, the introduction of a curfew to the set of policy instruments had to be explained thoroughly because it

compromised constitutional rights (e.g., freedom of movement) and the evidence-base for the tool's efficacy (estimated to be a 10% reduction in the number of infections) appeared to be contestable.

In each case, part of the government's rationale involved a "promise," "prediction" or "expectation" of how long the new "lockdown regime" would last. This was discussed under the heading, "difficulties in designing a credible exit strategy." From September 2020 onward, numerous 'exit announcements' were made, so many that by December/January parts of the population no longer believed the announcements and started to rebel or protest. The limited availability of vaccines and problems in the roll-out of the vaccination program have not solved this problem, and a fixed deadline for declaring the coronavirus crisis "over" remains unclear.

Citation:

Bovens, L. and Van Leeuwen, S., 2020. *De Stilte op het Binnenhof. Politiek in coronatijd*, Amsterdam: Balans

Boin, A. et al., 2020. *Covid-19. Een analyse van de nationale crisis response*, Leiden: The Crisis University Press

Stichting Kijkersonderzoek, 7 January 2021. Factsheet. Kijken in tijden can corona – Kerncijfers TV 2020

SCP, *Burgerperspectieven 2020*|2, 2020|3, 2020|4 (<https://www.scp.nl/publicaties/monitors/2020/06/29/burgerperspectieven-2020>)

NRC, (Lineke Nieber) 22 December 2020. Van expert tot 'schuldige': tien maanden crisiscommunicatie bij het RIVM (<https://www.nrc.nl/nieuws/2020/12/22/van-expert-tot-schuldige-het-rivm-corona-e-n-de-media-a4024968>)

NOS, 18 december 2020, 'Meer angst en stress, minder vertrouwen in overheid' (<https://nos.nl/1/2360993#UPDATE-container-49769271>)

Ipsos, 4 January 2021. Politieke Barometer week 52. (<https://www.ipsos.com/en-nl/politiekebarometer-week-52-0>)

Het Parool, n.d, 2020. Het gezag van kabinet en OMT is tanende bij het coronabeleid (<https://www.parool.nl/nederland/het-gezag-van-kabinet-en-omt-is-tanende-bij-het-coronabeleid~b6a36c1f/>)

Implementation of Response Measures

Implementation
of Response
Measures
Score: 5

Rather than strategy, implementation capacity and operational crisis management were the Achilles heel of the Dutch pragmatic approach. After decades of introducing neoliberal market mechanisms and austerity policies in public healthcare, Minister of Health De Jonge admitted: "Rules and budgets, that's our domain. Implementing care ... is the institutions' own responsibility" (Bovens and Van Leeuwen, 2020: 28).

In a November 28 interview in NRC-Handelsblad, De Jonge stated: "Everyone has a bit of responsibility, and therefore nobody is responsible. ... Our care system is a very decentralized one. In the past (the department) never had anything to do with test capacity. If there is one lesson to learn, with the benefit of hindsight, it is that our system cannot handle a pandemic of this size.

On all fronts there is no scope for central steering. It means that during the entire crisis we have been improvising.”

OMT chair Van Dissel, in a 28 December 2020 interview in *Algemeen Dagblad*, stated:

“In this country testing, traditionally, has been organized around relatively small-scale microbiological labs connected to hospitals. In peace time this works very well, but when testing on a mass scale becomes necessary, things start breaking down. This is also true for the municipal health service units that work in a decentralized manner but had to upscale their activities time and time again. Gradually you meet the next weak link: limited testing capacity, constraints on intensive-care capacity, insufficient supplies of protective gear.” What Van Dissel omitted saying was that some of his OMT colleagues were acting not just as impartial medial advisers, but as ‘stealth advocates’ for their own type of healthcare institutions. The lack of a timely response to COVID-19 outbreaks in homes for the elderly and the unnecessary delays in outsourcing test capacity to large commercial labs are cases in point.

As Boin et al. (2020: 68, 131ff) put it, the pragmatic approach to crisis management was continuously plagued by a set of implementation problems that systematically, time and again, frustrated surge capacity. These problems included:

- a lack of intensive-care beds, artificial respiration units and trained nurses, which necessitated assistance from German hospitals to alleviate peak loads on Dutch hospitals;
- a lack of protective equipment, which was an especially acute problem for elderly care homes because in the beginning elderly care institutions were overlooked or got lower priority compared to hospitals;
- insufficient screening or test-and-trace capacity among municipal health service organizations, which were structurally unable to scale up their capacities sufficiently;
- difficulties in organizing and coordinating between hospitals (and assigning a ‘fair’ allocation of COVID-19 patients);
- difficulties in organizing and coordinating between public healthcare institutions and private businesses (e.g., in getting sufficient protective equipment and face masks);
- coordination problems between national government and the 25 safety regions, which resisted local/regional policy differentiation because they feared problem displacement effects (waterbed impacts) between regions;
- difficulties and delays in setting up a large-scale vaccination program.

For some of the persistent bottlenecks, the department hastily created special purpose coordination units (e.g., the National Coordination Center Patient

Allocation on 20 March, the public-private National Consortium Resources on 24 March and the National Coordination Structure Test Capacity on 30 March). In fact, the department relied on informal networks of administrative and medical professionals. It was their reputations with colleagues and talents for improvisation that narrowly avoided ‘code black’ emergencies, which would have forced doctors in hospitals and other healthcare centers to practice triage.

The pragmatic, science-driven approach was frustrated because scientific uncertainties lingered far longer than expected. One effect was that nudging supposedly well-informed citizens to voluntarily comply with rules on the basis of changing and uncertain scientific knowledge became much harder over time. In addition, the police force and other security personnel would never been sufficient to enforce the (changing) rules, and themselves showed considerable confusion about how to apply the rules. The other major effect was that political pressure influenced, if not decided, scientific controversies, such as the efficacy of face masks and the obligation to wear them in public spaces, the potential infectiousness of school children and impact of school closures, and the impact of asymptomatic infectiousness on people’s willingness to have themselves tested. Using the opportunities offered by scientific uncertainties, political polarization increased during the second wave and members of parliament tried to micro-manage implementation issues on the basis of anecdotal evidence, often without the necessary practical knowledge. It is highly likely that parliament’s efforts to micro-manage implementation was influenced by political parties campaigning for the elections scheduled for 21 March 2021.

Citation:

Boin, A., et al., 2020. Covid-19. Een analyse van de nationale crisisresponse, Leiden: The Crisis University Press

Boven, L. and Van Leeuwen, S. 2020. Stilte op het Binnenhof. Politiek in coronatijd. Amsterdam: Balans NRC.next (Stokmans and Lievisse Adriaanse). Aantal tests kon in april fors omhoog, 30 november 2020 (<https://www.nrc.nl/nieuws/2020/11/30/aantal-tests-kon-in-april-fors-omhoog-a4022067>)

NRC-Handelsblad (Aharouay and Van den Dool). “We hebben de hele crisis moeten improviseren.” (<https://www.nrc.nl/nieuws/2020/11/27/we-hebben-de-hele-crisis-moeten-improviseren-2-a4021765>)

Algemeen Dagblad, (Niels Klaassen). 31 December 2020. Van Dissel over de marathon van dit coronajaar: ‘Het is vermoeiend, zo nu en dan heb je er gewoon genoeg van’ (<https://www.ad.nl/binnenland/van-dissel-over-de-marathon-van-dit-coronajaar-het-is-vermoeiend-zo-nu-en-dan-heb-je-er-gewoon-genoege-genoeg-van-abc40c9c/>)

NRC-Handelsblad (Frederiek Weeda, 17 December 2020. Diederik Gommers: “Als ik jongeren kan bereiken via via Famke Louise dan doe ik dat.” <https://www.nrc.nl/nieuws/2020/12/17/diederik-gommers-als-ik-jongeren-kan-bereiken-via-famke-louise-dan-doe-ik-dat-a4024252>

Het Parool, n.d. Het gezag van kabinet en OMT is tanende bij het coronabeleid (<https://www.parool.nl/nederland/het-gezag-van-kabinet-en-omt-is-tanende-bij-het-coronabeleid-b6a36c1f/>)

National
Coordination
Score: 6

National Coordination

According to the existing provisions, the national coordination structure works in the following way:

There are 25 safety regions in the Netherlands. These authorities are responsible for the safety of people in their territory at all times, and take the lead during emergencies or crises.

In the preliminary phase of a health crisis, the National Institute for Public Health and the Environment has an important role. The institute's experts develop guidelines and scripts for the safety regions.

The safety regions immediately contact the municipal health services, which are directly coordinated by the National Institute for Public Health and the Environment. At least once in four years, the safety regions are obliged to produce a plan of action for an epidemic. In this plan, measures to contain a new influenza virus are supposed to be described.

In the preparations, the Medical Health Workers Organization is responsible for coordinating between different healthcare organizations and safety partners. Both the municipal health services and the Medical Health Workers Organization are under the responsibility of a director of public health, who is a member of the safety region team.

During COVID-19, these structures were activated as expected.

However, in practice, the action plan quickly turned out to be inadequate, as the speed and the scope of the crisis was obviously not anticipated. For instance, the patient zero phase, the point at which the action plan should have been initiated, had long since past before the crisis response was initiated. The scripts did not work as intended. Most organizations were trained and prepared to respond to 'blue lamp' emergencies, with the mass response focused on a clearly demarcated site. This was not the case with COVID-19, so the rules had to be re-invented and re-negotiated on the go.

In addition, the pandemic response structure created a medical bias, with a focus on emergency care and intensive-care units still operating on the assumption that the virus could be contained. The other aspects (e.g., other types of short-term and long-term medical care, and the broader social impacts of the crisis) only gradually gained priority and belatedly received adequate attention. Typically, intramural care units were not a substantial part of crisis

plans for virus outbreaks. They were largely deprioritized in the initial stages of crisis management.

In addition, testing coordination was in the hands of the municipal health services, which proved to be a bottleneck. On the one hand, the services experienced substantial capacity problems, while, on the other, the small-scale testing labs that served the Dutch healthcare system so well in normal times struggled to mobilize and coordinate extensive COVID-19 testing. The typical Dutch method of seeking consensus and consultation rounds started to work eventually, but the initial response seemed to be based on the wrong script.

Given this structure and the scope of the crisis, local variation in measures was muted in spite of the authority given to the safety regions. Local variation remained limited to permits for specific events and locations. Experiments in making face masks mandatory in shopping areas in Amsterdam and Rotterdam were quickly abandoned. Municipalities had a say in implementation only. Given the small size and population density of the country, stricter local or regional lockdown measures in one area would only encourage people to go to other areas with more favorable conditions. This is not what local and regional authorities wanted to have happen.

Citation:

<https://vng.nl/artikelen/vragen-en-antwoorden-tijdelijke-wet-maatregelen-covid-19#raad>

International Coordination

International
Coordination
Score: 5

Apart from worldwide scientific collaboration in vaccine development, there are few signs of well-orchestrated international cooperation. The Dutch government rejected a WHO proposal to improve global coordination in orchestrating national efforts to fight pandemics (see “Executive Preparedness”). In the Netherlands, the international procurement of protective equipment, face masks and testing materials was made the responsibility of a former CEO of a multinational with business connections who knew “how to get first in line” – even the king was called upon to pull some strings. Parliamentarians showed their ignorance when they urged the government to seize much-needed products produced by Chinese companies (Boven and Van Leeuwen, 2020: 106 – 112). International coordination between the border regions connecting Belgium, Germany and the Netherlands was left to individual mayors. People working from home and taxed in Germany or Belgium but entitled to coronavirus-related social benefits in the Netherlands got into trouble. International travel restrictions were poorly coordinated.

The Dutch government, represented by Prime Minister Rutte and Minister of Finance Hoekstra, managed to draw the ire and indignation of southern EU

member states when they boasted about the Netherlands' prudential budget policies and argued that – as a condition for accessing the €750 million coronavirus support – other EU member states must follow their example. At the same time, they dared to beg for EU-wide coordination of face mask procurement and compensation for Dutch floriculturalist businesses cut off from foreign markets by the coronavirus crisis (NRC-Handelsblad, 27 March 2020). In the end, the Dutch agreed to participate in the EU coronavirus fund without the economic reform conditions. In return two concessions were given. First, the Dutch demanded and received guarantees on a legal arrangement that linked the right to use EU subsidies to respect for rule-of-law criteria. Second, the Dutch kept their rebate on the annual contribution to the EU general budget.

In EU policymaking, the perception of the Dutch government is that it “boxes above its weight” – owing to its reputation of being well-informed, competent, coherent and persistent in its policy stances – but has very little sympathy for positions and views of other countries (Clingendael Report, 2019). The response by Dutch parliamentarians may be summarized as: “OK – so what?”

Citation:

Boven, L., and Van Leeuwen, S., 2020. *Stilte op het Binnenhof. Politiek in coronatijd*, Amsterdam: Balans
Boin, A. et al., 2020. *Covid-19. Een analyse van de nationale crisisresponse*, Leiden: The Crisis University Press

NRC-Handelsblad, (S. Alonso et al.) 27 March 2020. ‘Walgelijk’ en ‘wreed’: hoe Nederland in de coronacrisis vijanden maakt in de EU.

<https://www.nrc.nl/nieuws/2020/03/27/walgelijk-en-wreed-hoe-nederland-in-de-coronacrisis-vijanden-maakt-in-de-eu-a3995149>

NRC-Handelsblad (S. Alonso), 9 December 2020 Europese ruzie komt Rutte niet slecht uit.

(<https://www.nrc.nl/nieuws/2020/12/08/eu-ruzie-komt-rutte-niet-slecht-uit-a4023040>)

Clingendael Report, April 2019. ‘Weinig empathisch, well effectief’. Percepties van Nederlandse belangenbehartiging in de Europese Unie

(https://www.tweedekamer.nl/sites/default/files/atoms/files/20190417_clingendael_rapport_-_percepties_van_nederlandse_belangenbehartiging_in_de_eu.pdf)

Learning and Adaptation

Learning and
Adaptation
Score: 6

Learning and adaptation during the coronavirus crisis have been limited to formative evaluations of current tools for crisis management. For example, the CPB evaluated the use of the NOW tool during the first wave and lockdown, and recommended that its substantial success would lead to deadweight jobs unless the tool was gradually scaled down and the money redirected toward improving learning and coaching for more productive work (CPB, 2020). Other instrumental evaluations have focused on reducing dependence on external supplies of protective equipment and medical technologies for weathering a future pandemic, investing in vaccine development or improving the test-and-trace capacity to better determine who is really at risk and who is

not (Koopmans, in Zorgenstelsel, 2020; Tufekci). The Dutch government rejected an opposition proposal for a comprehensive evaluation at the end of summer 2020 of its coronavirus strategy, arguing that you do not evaluate the fire brigade while the fire is still raging (Trouw, 2020).

Nevertheless, the directors of the three major knowledge and advisory agencies (SCP, CPB, PBL) consensually advocated for a serious planning effort to promote resilience, reform and innovation in the Dutch economy, society and healthcare system after the coronavirus crisis (NOS Nieuws, 2020). However, as the end of the crisis (which will come about thanks to vaccinations, hopefully) will overlap with political campaigning for the March 2021 elections, the knowledge institutes' expert designs will only be made public after the elections. Meanwhile, political party platforms reveal glimpses of the post-coronavirus future: a stronger and more caring government that formulates social, economic, ecologically sustainable missions for public and private organizations under the mantra of 'invest yourself out of the crisis.' Less conservative parties have proposed a restructuring of the economic order with a shift from a shareholder to a stakeholder model of corporate governance. Health-related future designs focus on a restructured and better coordinated healthcare system that promotes preventive and less curative healthcare.

Overall, although the coronavirus pandemic is hailed as a once-in-a-lifetime opportunity for non-incremental innovations, public authorities still appear too preoccupied with short-term crisis control. Incidentally, before the coronavirus outbreak, an evaluation study of the effectiveness and impacts of the Law on the Safety Regions was underway. The study's conclusion was that as a crisis becomes more complex and concerns more than one region (as has happened during the coronavirus crisis) the law's crisis governance structure becomes increasingly ineffective.

Citation:

CPB, 14 August, 2020. Lessen voor de NOW. Stimuleer zoeken naar nieuw werk vanuit de NOW. (<https://www.cpb.nl/lessen-voor-de-now>)

Trouw (Boudewijn Zuidervaart), 15 June 2020. De roep om evaluatie van het coronabeleid wordt luider, maar coalitie en cabinet voelen er niets voor ([De%20roep%20om%20evaluatie%20van%20het%20coronabeleid%20wordt%20luider,%20maar%20kabinet%20en%20coalitie%20voelen%20er%20niets%20voor](https://www.trouw.nl/De%20roep%20om%20evaluatie%20van%20het%20coronabeleid%20wordt%20luider,%20maar%20kabinet%20en%20coalitie%20voelen%20er%20niets%20voor))

The Atlantic (Zeynep Tufekci), September 30, 2020. This Overlooked Variable Is the Key to the Pandemic, It's not R. (<https://www.theatlantic.com/health/archive/2020/09/k-overlooked-variable-driving-pandemic/616548/>)

Zorgenstelsel.nl (Anton Maes), 22 June 2020. Regelen onafhankelijke evaluatie eigen coronabeleid is (ook) taak overheid (<https://zorgenstelsel.nl/author/antonmaes/>)

NOS Nieuws, 9 October 2020. Planbureaus: pak in coronacrisis ook klimaatverandering en sociale kloof aan. (<https://nos.nl/artikel/2351612-planbureaus-pak-in-coronacrisis-ook-klimaatverandering-en-sociale-kloof-aan.html>)

Evaluatiecommissie Wet Veiligheidsregio's. Publicatie Eindrapport. (<https://www.evaluatiewvr.nl/publicatie-eindrapport/>)

III. Resilience of Executive Accountability

Open Government

Open
Government
Score: 8

The pragmatic Dutch approach to an ‘intelligent’ lockdown requires optimal communication between the government and its citizens. In practice, ‘nudging’ citizens to comply with rules entails balancing citizen autonomy and governmental paternalism. Prime Minister Rutte, numerous times, stressed the autonomy of ‘mature citizens’ in an ‘mature democracy,’ stating: “I believe that a large majority of people say: we are happy to be approached as adults and not as children. In an adult approach you need to provide people with the facts, saying ‘guys, this is what we know, this is what we do not know yet, and based on what we do know this is the course we have to choose, together,’ and then you see that people follow (this course). Yes, this is the way it works in a mature country. It just is not fitting to post a police officer at every front door” (quote translated from Boin et al., 2020: 117). Simultaneously, the government built a ‘choice architecture’ that guided and pressured citizens to make the right choices.

In the beginning, the government relied on almost weekly televised press conferences to fulfill the information component of the lockdown strategy. Meanwhile, the governance component of the strategy consisted of emergency decrees issued by the safety regions, which allowed the government to issue measures that severely limited people’s freedoms, with hefty fines imposed for violations that entailed a negative note on your record of good conduct. In spite of a visible lack of enforcement capacity, this acted as an effective deterrent. As soon as decreasing infection numbers and hospitalizations allowed, businesses and citizens started pressing for a clear exit strategy and the gradual relaxation of lockdown measures. The government realized they had to adapt the strategy’s information component to keep citizens informed on a daily basis, and on the “straight and narrow.” At the beginning of June, therefore, the Ministry of Health and the RIVM developed a “coronavirus dashboard,” which presented key information about the development of the coronavirus.

Once fully developed, the dashboard contained information on the number of positive test results (in nursing homes and care centers for physically disabled persons, and among people aged over 70 living at home), number of infected persons, reproduction (R) rate, number of reported deaths (excess mortality

reported in the news), number of hospitalizations (wards and intensive care patients), early warning indicators (e.g., wastewater measurements and number of complaints at GPs), and number of people supporting the rules and actually complying with the rules. This information was made available at national, regional and municipal levels, and the dashboard was further complemented by a search function.

The general idea was to fight new outbreaks of the virus in a focused and fast way. Signal or threshold values were designed to distinguish between different risk levels per area. Both businesses and citizens hoped that it would be possible to specify, per risk level, which lockdown measures could be added or repealed based on its development. However, this automation of risk governance was resisted by government at all levels. It was argued that broad professional and political judgment and interpretation of the evidence was needed for scaling measures up or down. Consequently, it was just the mayors, experts and officials of the municipal health services that made policy decisions. Citizen groups, businesses, religion-based groups, sports clubs and neighborhood organizations developed a flurry of initiatives in support of all kinds of vulnerable citizens, but had no opportunity to actually influence coronavirus policy.

During the fall, the split between stressing citizen autonomy and government paternalism contributed to the blame-game nature of public debate on coronavirus policy. Business and citizen groups accused the government of poor policymaking, which they blamed for the rising number of infections. Meanwhile, the government blamed insufficient rule compliance by citizens. Nevertheless, between 55% and 75% of the population consistently supported the government's lockdown measures. Only 16% of the population believes a more relaxed lockdown is preferable, while 4% believe no measures are necessary. Support for government measures was very high – even showing a rally around the flag effect – and only decreased slightly, and within very specific (cynical and distrusting) segments of the population.

Citation:

Boin, A. et al., 2020. COVID-19. Een analyse van de nationale crisisrepons, Leiden: The Crisis University Press

Rijksoverheid, Coronadashboard.

(<https://coronadashboard.rijksoverheid.nl/gemeente/GM0153/positief-geteste-mensen>)

I&O Research, 10 September, 2020. Steun maatregelen hoog, maar grote verdeeldheid (<https://www.ioresearch.nl/actueel/corona-draagvlak-september-2020/>)

NOS Nieuws, 14 December 2020. Bijna zeven op de tien Nederlanders voor strengere coronabeleid (<https://nos.nl/artikel/2360635-bijna-zeven-op-de-tien-nederlanders-voor-strenger-coronabeleid.html>)

Legislative
Oversight
Score: 7

Legislative Oversight

During the first wave and lockdown, the Netherlands was governed by emergency decrees (Law on Public Health, Wet Publieke Gezonheid, Wpg). Such decrees are the competence of the “super-mayors” of the 25 safety regions. The super-mayors are no longer held accountable by local councils but consult with and follow directives from the cabinet – formally, the minister of health. Parliament formally retained its oversight function, but this was effectively reduced to a “pilot flame” in practice (Boven and Van Leeuwen, 2020: 45).

To set an example, parliament temporarily stopped convening and members of parliament worked from home, proposals were settled in writing, and visitors (including journalists) were no longer allowed in the parliament building. However, urged by its chairwoman, parliament stuck to the constitution, rejecting digital voting and maintaining (physical) quorum rules. “Discussing” and deciding on proposals in writing and without special commission meetings resulted in rather superficial treatment of coronavirus policy proposals. For example, debates concerning support for families with children in mental healthcare, the cancellation of final school exams, not to mention the financial support measures costing billions of euros received superficial treatment. As of May 2020, when the first wave appeared to be subsiding, things slowly started to return to normal.

The crucial change was the replacement of governing by decrees by the Temporary Law on COVID-19 Measures (Tijdelijke wet maatregelen COVID-19). This was to be the political response to the situation, with the chairs of the safety regions legally obliged to protect the life and health of citizens (e.g., by maintaining social distancing even inside households, or restricting people’s freedom of movement and the number of people meeting outside), despite such measures infringing on citizens’ constitutional rights. Governing by decrees was intentionally restricted to short periods of time, whereas the duration of coronavirus crisis appeared to become much longer.

In June, the government proposed the COVID-19 bill, which allowed the minister of health to effectively govern by decree but restricted this authority to one year. The bill was immediately criticized by both legal experts, the State Council, the Association of Local Governments (VNG), the ombudsman and thousands of citizens. In its adopted version (October 2020), the Coronavirus Law essentially restores democratic oversight: parliament has one week to vote on newly announced measures as well as emergency decrees issued by the cabinet. The law’s duration is three months and substantial infringements on rights (e.g., the disproportionately high penalties for rule

violations or prohibition to visit one's elderly relatives at home or in care institutions) are explicitly forbidden.

Consequently, by fall 2020, normal democratic procedure was as good as restored. Parliament functioned normally and coronavirus strategy debates tuned into the blame-games typical of pre-election political campaigning. However, at the municipal government level, the role of councils was put on ice. The strategic role of the safety regions in the implementation of coronavirus policy has strengthened the existing tendency of creating technocratic-professional intermediate levels of governance in between the local and national levels.

Citation:

Boven, L., and Van Leeuwen, S., 2020. Stilte op het Binnenhof. Politiek in coronatijd, Amsterdam: Balans Nu.nl., 4 September 2020. Kritische experts praten met Kamer over coronawet (<https://www.nu.nl/politiek/6082519/meerderheid-en-kritiek-voor-coronawet-zonder-beleid-is-dit-een-lege-huls.html>)

NU.nl, 7 October 2020. Meerderheid en kritiek voor coronawet: 'Zonder beleid is di teen lege huls' (<https://www.nu.nl/politiek/6082519/meerderheid-en-kritiek-voor-coronawet-zonder-beleid-is-dit-een-lege-huls.html>)

NRC-Next, (Titia Ketelaar), 12 January 2021. De veiligheidsregio bepaalt steeds meer, 'die ontwikkeling gaat een keer schuren' (<https://www.nrc.nl/nieuws/2021/01/12/hoe-de-regio-een-blijvertje-werd-a4027254>)

Independent Supervisory Bodies

Auditing
Score: 9

The National Audit Office (Algemene Rekenkamer) responded quickly to the coronavirus crisis.

First, as behooves an audit office, and under the so-called Corona Account and a dashboard, the National Audit Office has made publicly accessible detailed overviews of the financial outlays of all the government's economic and financial support measures (whether the measures have been announced or implemented, or are under implementation).

Second, acting as the parliament's institutional memory of previous government support programs for large enterprises, the Audit Office published case studies and lessons from previous industry policy experiences and identified risks for government budgetary policy. Similar to senior officials in other knowledge institutes and advisory bodies, in the Audit Office report, the chair of the Audit Office urged the government to pay serious attention to the coronavirus strategy's long-term implications for an economic transition to a greener, circular economy, as outlined in the Climate Agreement and Sustainable Development Goals, and underwritten by the government.

Third, the Audit Office published an ex durante process evaluation of the government's efforts to scale up test-and-trace capacity as an important element in tracking the spread of the coronavirus (see "Implementation"). The office also conducted a risk assessment of the government's efforts to prevent and curtail potential abuse of one of the most financially important support measures for enterprises, enabling them to keep paying their workers in spite of turnover losses incurred due to the coronavirus lockdown, the Temporary Emergency Measure for Bridging Unemployment (Tijdelijke Noodmaatregel Overbrugging Werkgelegenheid, NOW). The support measure was used by 140,000 firms and cost €8 billion during the first wave alone.

In spring 2021, the Audit Office will report on the impacts and costs of important elements of the government's coronavirus strategy.

Citation:

Algemene Rekenkamer, June/October 2020. Coronarekening

(<https://www.rekenkamer.nl/onderwerpen/corona/coronarekening/coronarekening-oktober-2020>)

Algemene Rekenkamer, 26 June 2020. Kamerbrief Steun aan grote ondernemingen – lessen uit het verleden (<https://www.rekenkamer.nl/onderwerpen/subsidies/documenten/kamerstukken/2020/06/26/steun-aan-grote-ondernemingen—leren-van-het-verleden>)

Algemene Rekenkamer, 23 September 2020, Testen op corona

(<https://www.rekenkamer.nl/onderwerpen/gezondheidszorg/documenten/rapporten/2020/09/23/testen-op-corona>)

Data Protection
Score: 6

Until recently, the Personal Data Protection Agency (Autoriteit Persoonsgegevens, AP) struggled to establish its authority and prove its effectiveness. But during the coronavirus crisis, the agency proved its mettle as a privacy watchdog for a broad spectrum of coronavirus-related privacy issues, including the design and use of the Corona Notification app; new telecommunications legislation; the rights of employers and employees associated with coronavirus-related temperature measurements, health checks and contact data; the privacy of teachers and students during distance learning; safety issues while working from home; privacy issues around mobile camera surveillance; rights to access electronic patient files; and a center for reporting complaints, and processing requests for information from citizens and business organizations.

In August, the AP advised the minister of health to delay the launch of the Notification App until all privacy issues – mainly to do with Google and Apple enabling software – were resolved. The government, nevertheless, launched the app in October after trialing the app in the provinces of Drenthe and Overijssel. There were serious problems with privacy in the registration of vaccinations to the point that data was offered for sale online. The authorities clearly were not on top of pre-implementation supervision and ill-prepared for a pandemic-like event.

Citation:

Autoriteit Persoonsgegevens, Corona

(<https://autoriteitpersoonsgegevens.nl/nl/onderwerpen/corona/privacy-corona>)

De Volkskrant, (Laurens Verhagen), 16 July 2020. Hoe effectief is de corona app? En hoe zit het met de privacy?

(<https://www.volkskrant.nl/nieuws-achtergrond/hoe-effectief-is-de-corona-app-en-hoe-zit-het-met-de-privacy~b28d692e/>)

AP, 6 August 2020. Advies op voorafgaande raadpleging COVID19 notificatie-app (https://autoriteitpersoonsgegevens.nl/sites/default/files/atoms/files/advies_voorafgaande_raadpleging_coro_namelder-app.pdf)

Nu.nl., 6 October 2020. Vijf vragen over de Nederlandse corona app.

<https://www.nu.nl/tech/6082201/vijf-vragen-over-de-nederlandse-corona-app.html>

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