

Dutch policies and their implications for different actors in the disability tourism network

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Abstract

Recent political changes in the Netherlands have influenced the lives of people with disabilities. Also, disability tourism must deal with this changing political context and the implications of it. Disability tourism is a unique form of tourism which is specifically designed to meet the needs and wants of the participants involved. In the Netherlands, multiple disability-related tourism organisations are active. They are indispensable in making holidays possible, because they offer customised holidays with special care. In addition to these organisations, funders are important actors on which most organisations depend, also because there is usually no government support.

Qualitative methodology in the form of desk research and interviews has been used to examine the influence of current policies related to disabled people on disability-related tourism organisations and their funders in the Netherlands. This research provides a better understanding of the influence of politics on the day to day activities of the included actors. Also, it can be a learning tool for organisations as well as funders by providing a comparison of several experiences and ways to deal with them. The recommendations of organisations and funders can be relevant for the government to improve the process of policy changes.

Key words: disability tourism, policy changes, disability-related tourism organisations, funders, influence, people with disabilities

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1. Introduction

The desire to travel and discover the world is hidden inside almost everyone. Sometimes, it is frustrating that we are being constrained in our travelling, due to lack of time or money. However, a travel barrier in the form of a disability is a lot more complicated. In many countries around the world, it would be not only ethically unacceptable but also illegal to exclude or discriminate people based on their physical and intellectual abilities. The average kind of holiday might not always be suitable for people with disabilities, which is why disability tourism has been established. The organisation of disability tourism, however, is different in each country, partly due to its interconnectedness with politics. Disability tourism is a unique form of tourism which may require some adjustments for the participants involved. For example, information about the accessibility of a destination, the allowance of an assistance dog or additional explanation about an activity. Multiple actors are involved in disability tourism, such as disabled people, their relatives and caretakers, politicians on different levels, tour operators and volunteers.

1.1. Background

Due to their customised holidays with personal care, disability-related tourism organisations are indispensable in holiday provision. In the Netherlands, multiple disability-related tourism organisations are active. Most of the organisations depend on funding to avoid a negative budget and arrive at a positive one at the end. Funders are therefore very important, also because there is usually no government support. The Dutch branch organisation NBAV (Dutch Branch organisation for Adjusted Holidays) is home to many travel organisations and accommodation-providers who facilitate disability tourism. Members of the NBAV must meet certain requirements, such as the provision of good information and communication, suitable care and clear pricing policies in order to benefit from the NBAV quality label (NBAV, 2017). At this moment, NBAV-members consist of 24 travel organisations and 18 accommodation providers, such as hotels and estates. The travel organisations facilitate holidays to one or more destinations and offer a program with activities. The accommodation provider is taking care of the stay during a holiday and offers the necessary adjustments. However, there are also travel organisations with their own accommodation.

Recent policy changes in the Netherlands have influenced the lives of people with disabilities and, consequently, disability tourism. For a long time, most policies have been governed at a national level representing all twelve provinces and more than 400 municipalities (Van Gerven, 2016). Since 2015, municipalities are responsible for the implementation of policies related to work, income and healthcare (Rijksoverheid, 2017). One of the goals of this decentralisation is to increase independence and societal participation of citizens. To reach this independence, care takers can make use of

volunteers, informal care by relatives or day care (PGB Huishoudelijke Hulp, 2015). The shift in responsibility is also said to be bringing policy decision-making closer to the citizens, making it more customised and efficient (Ruano et al., 2016). At the same time, there is a cut in expenses incorporated in the decentralisation. Municipalities could take over policies from other municipalities, but this avoids adaptation to the local needs and circumstances (Delsen, 2016). Therefore, it is up to the municipalities to develop their own policies. This reform of the existing system marked the beginning of a new type of society, the so-called *participatory society* (Bronner et al., 2016).

1.2. Problem statement

Only two centuries ago, European tourism was mainly reserved for the wealthy and leisure class who could afford to go on holiday (Hamele, 2002). Money and time were the main requirements to become part of the tourism process, unavailable for most people of the working class. This was due to the fact that employers had the choice to offer leisure time to their workers, which often resulted in no holiday at all (Richards, 1999). Things started to improve in the Netherlands during the late 1920s, when around 87% of the labour agreements covered some holiday provision. According to Richards (1999), "The average holiday entitlement in the Netherlands in the past century rose from 13 days in 1946 to 25 days in 1972". Nowadays, people in the Netherlands are entitled to take off four times the number of hours they work per week, so at least four weeks per year (Rijksoverheid, 2017). The increasing availability of leisure time had its consequences for tourism participation. Tourism is nowadays viewed in more economically developed countries as an experience that should be available for everyone (Small et al., 2010). Tourism availability and its development in the Netherlands is in this case an example and does not need to be representative for other areas. There are still great differences between countries and regions worldwide when it comes to tourism participation and holiday leave entitlement. Dutch vacationers are among the most active travellers in European terms and worldwide, with traveling made possible for almost everyone. A group for which this is not straightforward, is the one of disabled people, despite the fact that the importance of people with disabilities who would like to travel is recognised in several countries. For example, in the United States, disabled tourists represent the largest and fastest growing market segment consisting of 50 million people (Burnett et al., 2001). It is also identified by Ozturk et al. (2008) that the disabled customers' market is a relevant segment, when he describes people with disabilities in Turkey as a developing market in the tourism industry which is becoming more influential in terms of market value as well as in number. Besides the United States and Turkey, the tourism industry and government of Australia also recognised that people with physical and intellectual disabilities would like to travel (Darcy et al., 2009). Australia is one of the few countries that made a distinction between tourism participation in general and tourism participation of people with disabilities (related to mobility, vision, hearing, learning, or sensitivity) in national tourism statistics. It was found that disabled people participate at the same rate for day trips, but at a much

lower rate for overnight domestic travel and international travel compared to the population in general due to a lack of suitable accommodation (Cole et al., 2010). Around 15% of the world population is represented by people with some form of disability (WHO, 2016). Regarding the Netherlands, it concerns around 1.7 million people (Leidner, 2008). It has been estimated that 30% of a nation's population will experience some form of 'limitation' at a certain point in their life. This can be permanent or temporary (e.g. due to an injury or accident), but can also be experienced by knowing people with limitations or traveling with such a person (Darcy et al., 2009). When thinking about access limitations, not only physical barriers are incorporated, but also lack of information or absence of travel companion can be included. Inclusion of disabled people may be achieved through better access to tourism, because it can create more travel experience and confidence (Lee et al., 2012). As Blichfeldt et al. (2011) argue: "It is less complicated to be a disabled tourist when you are an experienced traveller, but taking on the role as a tourist will never be as easy as it is for non-disabled people".

Whether they take place at a global, regional, national, or local level, politics are extremely significant in shaping tourism (Hall et al., 2004). Despite this significance, the field of politics is not well-developed when it is compared to other research areas related to tourism. Dinica (2009) also indicated that studies on the role of public authorities in tourism are still under-developed despite the fact that they can play an essential role in shaping tourism. Attempts to analyse policy-making experienced difficulties because there is no universally accepted theory of public policy processes (Hall et al., 2004). This is not very surprising, given the fact that there is not much agreement about what policy is and how to clarify it (Hall et al., 2004).

There is no single umbrella organisation responsible for the tourism sector, which often frustrates the coordination of policy implementation (Amoah et al., 1997). This is supported by the article of Dredge et al. (2011) when they talk about a blurred relationship between government and businesses when it comes to tourism. Policy is described by Amoah et al. (1997) as: "A process as well as a product that should serve the public interest; it is used to refer to a process of decision-making and to the product of that process". The public sector can play many roles in coordinating, planning, legislation, regulation and financing tourism (Amoah et al., 1997). The development of tourism for all is not only dependent on the needs and wants of people with disabilities, but needs the cooperation of both the demand and supply sides (Nicolaisen et al., 2012). Therefore, it is recommended by Nicolaisen et al. (2012) to include supply-side perspectives to understand tourism better. Since several articles focus on travel constraints of people with disabilities and how to stimulate disability tourism, such as Lee et al. (2012), Blichfeldt et al. (2011), Yau et al. (2004), and Hua et al. (2013), it is important to include the supply-side perspective on the organisation of disability tourism as well. Supply-side perceptions can have implications for the provision of leisure and tourism services for people with disabilities

(Nicolaisen et al., 2012). This underlines the importance of disability-related tourism organisations and their day-to-day activities. Buhalis et al. (2012) also state: “A more productive policy approach is needed, requiring balance and inclusion of the providers’ perspective”.

Diekmann et al. (2011) noticed that many organisations are dependent on individual funders or trusts. Because of this close connection, it is interesting to include funders’ experiences in this research as well. Additionally, not many articles have focused on the Netherlands as a case study and the policy changes are a relatively new development. This research can be a learning tool for organisations as well as funders by providing a comparison of several experiences and how to deal with them. The recommendations given by organisations and funders can be relevant for the government to improve the process of policy changes. Given the significance of cooperation and coordination in tourism development as well as planning, it is surprising that the potential of public policy contributing to these issues only received limited attention (Hall et al., 2004). Dinica (2009) indicates that studies on the role of public authorities in tourism are still under-developed even though they can play an essential role in shaping tourism. Due to the changing political context in the Netherlands and the importance of disability tourism organisations as well as funders, this research will focus on the policy experiences of both actors.

1.3. Thesis structure

This research is divided into eight different chapters, starting with this introductory section. A review of scientific literature relevant for this research is included in the next chapter, as well as an explanation of the theoretical framework used to structure the data outcomes. Also, actors related to this research and people with disabilities are being defined. In the third chapter, the research questions can be found, followed by a methodology chapter. Here, the research approach, methods used and limitations of this research are described. Chapter five includes the results derived from the desk research and interviews. The discussion is part of chapter six in which the results are being linked to theory and literature. Then, the conclusion of this research is written in the next chapter. The eighth and last chapter contains acknowledgements and forms the final part of this report.

2. Literature Review

2.1 Politics and tourism

Tourism has become an essential topic in many government programmes, in developed as well as less developed countries mainly because of its economic importance (Hall et al., 2004). During periods of recession or unemployment, the tourism industry is one of the few sectors that maintains its growth (Elliott, 1997). Tourism can easily be affected by changes in policy (Elliott, 1997). Because of its employment and income producing possibilities, tourism is subject to direct and indirect government

intervention (Hall et al., 2004). This was reflected in an increase in global political prominence during the 1970s and 1980s (Hall et al., 2004). Being one of the largest industries, tourism contains economic, environmental and socio-cultural elements, as well as a highly present political aspect (Hall et al., 2004). Various authors recognise the importance of tourism planning in order to create successful management (Altinay et al., 2006; Simmons, 1994; Martin et al., 1990). Policy issues might be considered as ‘national’ interests and seen as important by the population (Scott, 2011). With the use of politics, tourism has become a tool that allows governments to show their authority (Henderson, 2003). However, the national government has to keep in mind that the local government is involved as well to avoid problems in the transformation process from the national to the local level (Altinay et al., 2006).

While the focus of research is often on government decisions, the phenomenon of politics is also about the broader aspect of power relations in general (Henderson, 2008). A policy is seen as a public policy in the sense of its source, not of its impact on the public (Hall et al., 2004). Public policy can be studied for scientific reasons to gain an understanding of the causes and consequences of policy decisions and must go further than just describing what governments are doing (Hall et al., 2004). Tourism researchers have long neglected the political dimension and the generation of policy, and only recently emphasized the link between politics and tourism (Altinay et al., 2006). Interest in the effectiveness, consequences and impacts of government policy has resulted in more attention for tourism policy analysis (Hall et al., 2004).

The state can be defined as: “A relatively permanent set of political institutions operating in relation to civil society” (Hall et al. 2004). Main institutions include: public service, the judiciary, enforcement agencies, intergovernmental networks and agencies, government-business enterprises, government departments and authorities, a range of para-state organisations such as trade unions, lower levels of government and the elected legislatures (Hall et al., 2004). Institutions are important factors in the tourism policy process and they have been visualised in the following figure.



Figure 1. General schematic structure of the state in relation to tourism (Hall et al., 2004).

Pall (1992) describes the state-civil society according to three different factors: the state tradition (macro level), policy sectors (meso level), and policy networks (micro level). The local state has increased its involvement in economic activity and can be described as: "Local authorities as well as local representatives of various national-level bodies" (Hall et al., 2004). As is often the case, the perception by local and regional governments is that tourism is an instant employment and income source. However, this attitude towards the tourism industry has resulted in a loss of the bigger picture of tourism as a social development (Hall et al., 2004).

2.2. The role of disabilities in politics

On different levels, politicians and policy makers are starting to recognise that 'disability' is an equal human rights issue (Barton, 2013). Through disability groups and organisations, political involvement is strengthened by sharing information and creating relationships (Putnam, 2005). In terms of objectives, membership and leadership, a difference can be made between 'disability organisations' and 'disabled people's organisations' (Barton, 2013). The first one includes organisations that have a more traditional approach towards disability (Barton, 2013). Often, they are controlled and run by non-disabled people. Recently, however, some of these organisations have started to engage in political activities (such as lobbying) together with organisations led by people with disabilities themselves (Barton, 2013). These kinds of organisations prefer a more proactive approach towards disability politics (Barton, 2013). Both types of organisations are concerned with improving issues related to people with disabilities, such as social justice, equality and citizenship (Barton, 2013).

Disability laws are shaped by public opinion, historical traditions, scope and social norms. For example, definitions of disability, independent living and accommodation are created by norms and values and differ per country (Putnam, 2005). The desire to modify public policies, in language, aims, coverage and funding levels, has driven much of the disability rights movement's activity (Putnam, 2005). It is indicated by Putnam (2005) that the key areas of the disability policy domain include: the belief that disability is not an individual's main characteristic, the belief that additional value to the disability experience can be addressed and identified, and the belief that the opportunities to improve disability experience are influenced by public policy. Barton (2013) emphasizes that appropriate funding is necessary to empower disabled people and broaden their opportunities. In an ideal situation, this funding is allocated to organisations controlled, led and managed by and for people with disabilities (Barton, 2013). Funding at the local level alone is often found to be insufficient in providing the necessary services to people. Especially the introduction of policies to facilitate disabled people's independence needs investment from the central government as well (Barton, 2013). To realise this empowerment, politics alone are not enough but can be used as a facilitating tool. People need to get the chance to empower themselves, for example by the availability of services (Barton, 2013).

2.3. Tourism behaviour of people with disabilities

Going on a short-term or long-term holiday while having a disability takes place to a lesser extent compared to people without disabilities (Brink-Muinen, 2007). This is supported by one of the key findings of the report of Schoonheim et al. (2007) that persons with disabilities participate in cultural and recreational activities to a much lesser extent than persons without any disabilities. Regardless of disabilities, short-term holidays (with a maximum of three overnight stays) most often take place within the Netherlands. Germany and Belgium filled up the second and third place. Outside of this top three, Turkey was most popular among terminally ill and disabled people (Brink-Muinen, 2007). The following graphical representation shows the destination choices of people with terminal diseases or disabilities (in red) in comparison to the average population of the Netherlands (in blue).

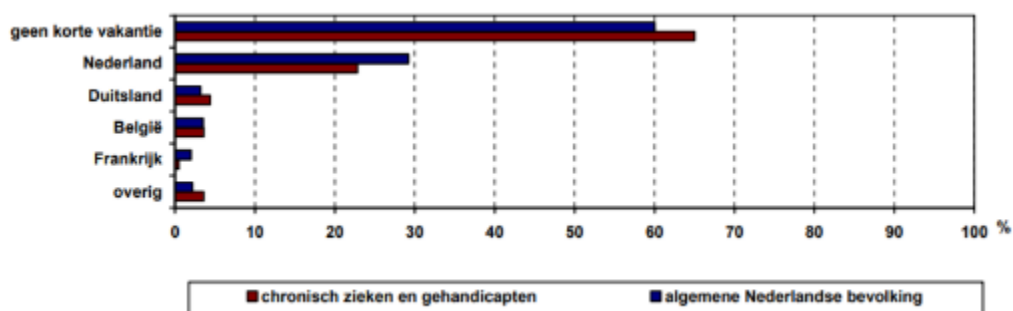


Figure 2. Short-term destination choices of people with terminal diseases or disabilities compared to the average Dutch population (Brink-Muinen, 2007).

Long-term holidays (including four or more overnight stays) were generally more focused on destinations abroad. Most popular among people with terminal diseases and people with disabilities were Spain, Germany, France and Austria (Brink-Muinen, 2007). The same goes for the average population. From all long-term holidays outside of Europe, people with disabilities or terminal diseases were somewhat more present in comparison to the average population. Long-term holiday behaviour was visualised by Brink-Muinen (2007) in the following graph.

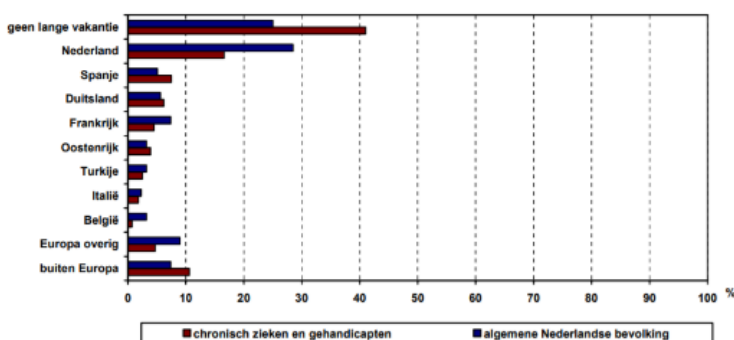


Figure 3. Long-term destination choices of people with terminal diseases or disabilities compared to the average Dutch population (Brink-Muinen, 2007).

Overall, there is satisfaction about their undertaken holidays among disabled people, but information and suitable accommodation have shown room for improvement (Brink-Muinen, 2007). An indication of reasons why people with disabilities would not go on holiday is included in the study of

Brink-Muinen (2007). Having a disability was the main reason, followed by financial reasons, not being into holidays, too much hassle, no travel companion, fear and insecurity as shown in Figure 4.

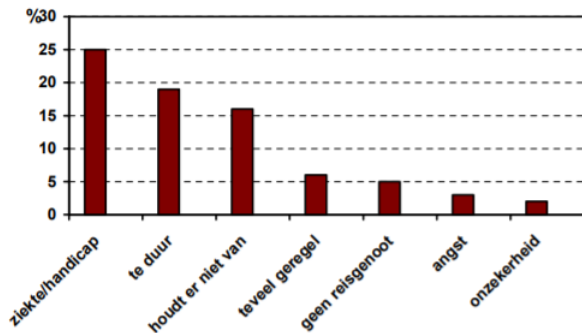


Figure 4. Reasons for people with terminal diseases or disabilities to not go on a holiday (Brink-Muinen, 2007).

2.4. Politics in relation to tourism stakeholders and interest groups

When it comes to politics and policy decision-making, it is important to ensure participation and interaction between multiple actors involved in the tourism industry (Altinay et al., 2006). This is related to the definition of collaboration in tourism planning by Reed (1997): “A process of joint decision-making among autonomous, key stakeholders to manage issues related to tourism planning and development”. By working together as tourism stakeholders, disability tourism and the conditions of people with disabilities might improve. This is supported by Bramwell et al. (2000) by describing that tourism destinations and organisations might benefit from bringing together knowledge, expertise, capital and other resources. These benefits may include: avoiding long-term costs of conflicts between different interests (Bramwell et al., 2000). The emergence of a more collaborative approach taking into account multiple parties can be seen in governance changes as well. There is a shift in the public sector from direct service provision to a more ‘enabling’ function in many Western countries (Bramwell et al., 2000).

Social movements are concerned with realising a change and their goal is the creation of a more inclusive and democratic society (Barton, 1998). In all kinds of social movements, self-awareness and identity are one of the most important changes in participants (Barton, 1998). This can have consequences for the way they are viewed by other people and the way they view themselves. The disability movement is both a national and international development and therefore not tied to country’s borders. Interest groups and non-governmental organisations are not part of the profit-making part, but do belong to the tourism industry (Elliott, 1997). Studies of policy networks should highlight the link between the state and societal actors (Hall et al., 2004). The disabled tourism market is heterogeneous; not every disability has the same impacts as the other. Still, most participants of Blichfeldt et al.’s (2011) study took part in leisure activities with other disabled people as well as within disability associations.

2.5. A theoretical framework of policy influences

In scientific literature, most articles do not focus on the supply-side perspective or funders' perspective, but on the demand-side and the view of people with disabilities on tourism (Burnett et al., 2001; Shaw et al., 2004; Bergier et al., 2013). Nicolaisen et al. (2012) highlighted the importance of the supply-side, but there were no political aspects involved in their study. After conducting the literature review, it also became clear that politics take place at different levels and can have an impact on several stakeholders. The importance of stakeholder collaboration is emphasized by Bramwell et al. (2000) and Altinay et al. (2006). This made it interesting to identify the connections between disability tourism stakeholders and the influence of policies on them. The different stakeholders used in this research are disability-related tourism organisations and their funders, but also volunteers turned out to be an important stakeholder in disability tourism. The analytical themes used as a framework are the following: 'Tourism stakeholders' connections in disability tourism' and 'The influence of policies on tourism stakeholders'.

2.6. Defining people with disabilities for this research

According to the World Health Organisation (2017), is disability "an overarching concept that entails impairments, activity limitations and participation restrictions". The Dutch dictionary describes a disability as: "A physical or intellectual impairment" (Van Dale, 2017). This definition is very broad and only makes a distinction between physical and intellectual. Yau et al. (2004) describe it a bit more detailed and link disabling conditions to hearing, vision, mobility, intellectual and psychiatric disorders. A fascinating description was given by Disabled World (2009): "The experience of a disability is unique to each person, but there are common impacting factors". What has become clear is that a disability can be congenital or acquired later; intellectual, physical or both, and change over time. Also, physical disabilities and access limitations are more often the object of research in scientific literature than intellectual disabilities. In recent years, there has been a shift from seeing disability as an individual or medical problem to understanding disability as the social restrictions experienced in a society (Barton, 1998). The Social and Cultural Planning Office of the Dutch government defines a disability in terms of limitations: "Every decrease or absence of the possibility to undertake common activities as a result of a disorder". Dutch authorities measure the degree of disability considering two factors: severity and permanence (De Jong, 2012). Changing the definition of disability by making it more specific in terms of assessment rules reduced the number of 'awarded' people with disabilities (De Jong, 2012). In the Dutch Act on Equal Treatment for disabled people as well as people with a terminal disease is no definition of disability to be found. However, there is a European guideline for defining a disability incorporated, stating: "A long-term limitation as a result of physical, intellectual or mental disorders that hinder people to participate in daily life at the same level as people without disabilities" (Van Liempd, 2016). A civil judge can issue a statement about who is part of this definition, which is binding.

2.7. Defining actors related to this research

Organisations were established to reach the goal of 'tourism for all' in many EU member states during the 1990s. In the Netherlands, an important organisation, called 'Landelijk Bureau Toegankelijkheid' (National Office for Accessibility), was concerned with checking facilities for accessibility (Leidner, 2008). Since this organisation has been abolished, the CG-council has taken over this task. The CG-council is there to serve the interests of people with a disability or a terminal disease (Programma VCP, 2007). According to Leidner (2008), disability-related tourism organisations are probably the best source of information for a disabled tourist. Associations for people with disabilities in many European countries often own special accommodation for their members or disabled guests. While looking at the Netherlands, disability-related tourism organisations are often dependent on funding and sometimes government support (Diekmann et al., 2011). Funding can be provided by the state, individual donations, the tourism industry itself or trusts (Diekmann et al., 2011). Funders are an essential part of most organisations, also because there is usually no government support.

More inclusive holidays for people with disabilities can be categorised under the heading 'social tourism'. Social tourism includes travel participation by disadvantaged people in a society (Minnaert et al., 2009). Equality is an important concept in this. Disability-related tourism organisations and their funders are trying to establish a more social way of tourism.

3. Research questions

The main research question that will be answered throughout this report is the following:
In what way have current policies related to people with disabilities and funding in the Netherlands influenced disability-related tourism organisations and their funders?

Sub questions are formulated to derive at the main research question:

1. How are disability politics executed at the global and European level and which current policies related to people with disabilities exist in the Netherlands?
2. What do disability-related tourism organisations do and how are they influenced by policies shaping the lives of people with disabilities?
3. What sorts of funders of disability-related tourism organisations are included and how are they influenced by policies related to funding?
4. Which connections between tourism stakeholders can be identified?

By answering these research questions, this research will contribute to the existing literature about tourism participation. The interest of disabled people to participate in tourism is recognised by Burnett et al. (2001), Ozturk et al. (2008) and Darcy et al. (2009) which makes it important to establish 'tourism for all' and make it more inclusive. Political support (e.g. laws or conventions) can be essential

in raising awareness and improving the conditions of people with physical and intellectual disabilities. Leading examples of countries that introduced laws to better serve disabled people with physical and information accessibility are the United States (Americans with Disabilities Act), Australia (Commonwealth Disability Discrimination Act) and the United Kingdom (British Disability Discrimination Act). The importance of disability organisations has been described in Article 30 of the Convention on the Rights of Persons with Disabilities in 2006 (United Nations, 2006). The political context central to this research is a trending topic with many changes that have recently taken place, making it a contemporary subject to research. It is a relevant addition to the existing debates about the consequences of policies and the relevance of stakeholder collaboration, in this case in the field of disability tourism.

4. Methodology

In this chapter, an overview and explanation is given of the methods used in this research, namely desk research and semi-structured interviews. Additional information about the way participants were recruited for the interviews and how the interviews took place is also included. The interviews allowed me to better understand the political context and policies identified during the desk research and provided interesting insights into the way organisations and funders are connected.

4.1. Research approach

Qualitative data was used to approach this research, which are often used to understand and explore several policy issues (Ritchie et al., 2002). It is supported by Silverman (2006), that the strength of qualitative research is the ability to dig into people's perceptions and experiences. Policy experiences are the main focus of this research, making qualitative data a suitable choice.

4.2. Methods

As briefly mentioned before, desk research and semi-structured interviews are the used methods in this research. Desk research was conducted first and was chosen to gain knowledge as a researcher about the context in which the research takes place. The current Dutch policies related to people with disabilities are included, together with a description of the political context on a global, European and national level. The interview questions were designed and discussed afterwards. Five telephonic interviews and three interviews via mail were conducted in around three weeks' time. The designed interview questions were sent out before the interviews took place, to give the participants the opportunity to prepare.

4.2.1. External desk research

The context of the current policies related to the lives of people with disabilities has been explored with the use of desk research. External desk research was used, because this takes place

outside of an organisation instead of collecting internal data (Allen, 2001). The external desk research consisted of online desk research and government published data online. The website of the NBAV has been used for information about the affiliated tourism organisations after which these organisations' websites were used to contact them and identify bodies funding them. The website of the Rijksoverheid and policy documents have been used in combination with several websites concerned with policies and its implications for people with disabilities in particular. Also, healthcare websites have been researched to gain knowledge about the recent changes.

4.2.2. Recruitment of participants

Disability-related tourism organisations and its funders who are part of the NBAV have been chosen as the target group for this research. As explained, the NBAV is a branch organisation for disability tourism. NBAV-members can benefit from the quality label after meeting certain requirements, such as providing good information and communication, suitable care and clear pricing policies. The NBAV-members are supporting the idea of facilitating and improving disability tourism by meeting these requirements. I became aware of the NBAV through SailWise, who is connected to Wageningen University through the WUR Science Shop. The WUR Science Shop coordinates research projects with a potential societal impact (Wageningen University, 2017). SailWise has been involved in research projects before and is one of the 42 members of the NBAV.

On the NBAV-website, there was a link to the websites of the travel organisations and all of them received an informative mail with a short explanation about this research. In this mail, they were asked about their willingness to participate in an interview. A copy of this informative mail is included in Appendix I. When there was a positive reply on this mail, the interview questions were sent beforehand in case someone wanted to prepare together with some information about anonymity. Also, an interview date and time was agreed upon. There was no consent form used, but everyone agreed upon personally anonymous interviews by mail, where only the name of the organisation would be used in the research. However, after discussing it with my supervisor, we decided to leave out the organisations' and funders' names and made it totally anonymous. This avoids any link between possible sensitive information and the name of an organisation or funder, and will not cause unintentional problems to anyone involved. When funders' names were mentioned on the website of an organisation, the informative mail was sent directly to them. Otherwise, NBAV-organisations were contacted to obtain contact information about their funders. This was sometimes not possible because of privacy reasons and then the organisation was asked to forward this informative mail to them. These methods prove unsuccessful in recruiting funders so, in the end, the CEO of SailWise has been contacted for funders' information. Eventually, two funders and six organisations were willing to participate. Most of them were contacted by phone, but three of them answered the interview questions via mail. Telephone interviews were preferred over real-life interviews because of a small budget and different locations of

the participants. Interviews via mail were not preferred by the researcher, but were sometimes necessary to include participants with little time and preference for answering the questions in between their daily activities. Sometimes, explanation about certain statements was required afterwards, but the answers were overall quite comprehensive and clear.

4.2.3. Semi-structured interviews

To identify the experiences of the funders and tourism organisations under study, semi-structured interviews were used to gather qualitative data. Before the interviews took place, it was made clear to the interviewees that their name would not be mentioned in this research. What they said, indicated, noticed or recommended was not represented by their own names. Because experiences were used, there might have been less people willing to participate, because the idea behind it was to share beliefs, ideas and personal information.

The order and phrasing of questions has been consistent from interview to interview. The participants in this research were asked the same questions which were created prior to the interview and with the use of desk research. However, there was room for adding sub questions or elaborate a bit more on a certain topic when necessary. Semi-structured questions are more flexible compared to structured questions and allows to talk more detailed about an idea or response (Gill et al., 2008). As a researcher, I was not very familiar with all policies identified during the desk research, so it was useful to gain additional information from the interviewees about certain topics. An overview of the interview questions that have been used for the tourism organisations and the funders is included in Appendix II and Appendix III.

4.2.4. Data analysis

Thematic analysis was used to analyse the external desk research. This is a form of analysis that takes emerging themes out of documents' data and makes them into categories (Bowen, 2009) During the analysing phase, themes were identified and used to structure the different kinds of policies. The researcher is expected to be as objective as possible in the selection of data from documents (Bowen, 2009). This was realised by comparing different kinds of websites with each other. To analyse the interview data, coding in content analysis is used. This process is divided by Strauss into three steps: open, axial and selective coding. Open coding involves assigning labels, which is realised with the different analytical themes under which the generated data has been subdivided. Axial coding is about the comparison of texts with the same label, which has been worked out and summarised in the results. Here, it is important to look at similarities and differences within a theme (Tubbing, 2015). Selective coding includes deriving at a certain theory which is performed in the conclusion (Tubbing, 2015). 'Grounded codes' are used instead of a priori ideas or theories (Gibbs et al., 2005). This means that themes have emerged from gathered data, in this case as a result of the literature review (Gibbs et al.,

2005). The interviews were recorded and transcribed afterwards to avoid loss of any relevant information. The audio-recorded data was only used by myself, the transcribed interviews were shared with my supervisor.

4.3. Limitations

Research limitations are important to highlight and include shortcomings of the research. Results might have been affected or restricted due to these limitations.

4.3.1. Measurement validity

Content Validity assumes that you have detailed knowledge about the content domain (Center for Social Research Methods, 2006). However, the researcher was not very familiar with the subject domain before starting this research. Throughout the process, new insights came up during the desk research and the interviews. There are probably still a lot of political aspects that have not been covered in this research yet. The Healthcare Insurance Law has not been included in this research, but it might have had an influence on the tourism stakeholders as well. Therefore, content validity is one of the research limitations. Unbiased questions were formulated without pre-conceived beliefs about what someone was about to say. However, it could still be possible that the researchers' outlook was not as open as possible due to assumptions, the news or personal intuition. Therefore, predictive validity is also a limitation of this research. Translation validity is another important limitation, while translation between languages involves interpretation. The interviews were conducted in Dutch; this data had to be interpreted by the researcher and later, this had to be translated into English in a way that everyone could understand the meaning of it. Most of the websites used for the desk research were also translated from Dutch to English.

4.3.2. Internal validity

Two funders and six organisations participated in this research, which is a low number. As Nicolaisen et al. (2012) indicate: "It is possible that non-participants may have perceptions differing substantially from those who did participate". Therefore, it is hard to generalise the findings to all disability-related tourism organisations of the NBAV and their funders or even to Dutch disability tourism in general. Due to the limited time frame of this research, some organisations or funders who did not have time during the research period had to be excluded. When there would have been more time, also more participants could have been recruited. It was tried to be reduced by adding an additional week of interviewing, but the number of participants remained low.

4.3.3. External validity

Dutch policies and their specific influence on disability-related tourism organisations and funders in the Netherlands was the research focus. Rules, regulations, activities, laws and political structures differ a lot per country, which makes it impossible to draw out any conclusions of this research to a broader context. Not only disability-related policies are implemented differently everywhere, disability tourism is also organised in different ways. Therefore, this research serves as a case study that cannot easily be representative for other areas or countries.

5. Results

5.1. Desk research

Even though 160 countries signed the Convention, disability-related policies are implemented differently in each country. The Netherlands signed in 2007 and formally ratified the Convention on the Rights of Persons with Disabilities in 2016 (United Nations, 2017). So, while the signing took place early, the Netherlands was rather late with the ratification. This could be because of reticence and fear for additional rights and duties to live up to (Goldschmidt, 2016). The Dutch government mentioned in a statement that it took some time to figure out which law-changes were necessary and what the implementation costs would be (College voor de Rechten van de Mens, 2017). To create an understanding of the context in which this research takes place, it is important to start with an overview of the current policies related to the lives of people with disabilities in the Netherlands. Disability-related policies can be described as 'cross-domain policies', because they easily cross domains' borders and cover multiple aspects. This section describes the disability politics at the global, European and national level. Additionally, the way in which policies affect people is included. Finally, to understand the current policies related to disabled people in the Netherlands, the phenomenon of decentralisation, work-related policies, education-related policies and policies related to the healthcare system are being discussed. Altogether, this section will contribute to answer the first sub question: How are disability politics executed at the global and European level and which current policies related to people with disabilities exist in the Netherlands?

5.1.1. Global politics regarding disability tourism

In many countries, the development of more accessible tourism can be found in laws, codes and standards (Darcy et al., 2009). The promotion of equal opportunities, anti-discrimination policies and a higher participation rate are becoming more meaningful in many societies (Goodall et al., 2004). Even though the significance attached to cooperation and coordination in tourism development and planning is recognised, Hall et al. (2004) mention that understanding these concepts has received limited attention. Tourism policies still differ greatly between countries, because of the complexity of the industry and global differences. Interconnectedness between governments and tourism impacts

resulted in activities related to tourism policy analysis (Hall et al., 2004). Because academic research in tourism did not become widespread until the 1990s, there is still not much in-depth analysis of tourism policies executed in many countries (Hall et al., 2004). Some of them have introduced laws that oblige tourism businesses to offer physical and information accessibility to people with disabilities (Michopoulou et al., 2013). Leading examples of countries that introduced disability-specific laws include the United States (Americans with Disabilities Act in 1990), Australia (Commonwealth Disability Discrimination Act in 1992) and the United Kingdom (British Disability Discrimination Act in 1995). Important features of the Disability Discrimination Act are the protection of people regarding employment and access to goods, facilities and services (Bell et al., 2009). It is stated by Loi et al. (2017) that people with a visual impairment would feel more comfortable when they travel to places where a Disability Discrimination Act is accepted by the community. This indicates that a Disability Discrimination Act can have a great impact on destination decision-making. The Disability Discrimination Acts can be seen as the precursors of the United Nations 'Convention on the Rights of Persons with Disabilities' (CRPD) in 2006 (United Nations, 2006). International human rights conventions can cause substantial changes in accessible tourism, while offering a groundwork for participation (Buhalis et al., 2011). Article 30 of the CRPD is particularly relevant for the case of disability tourism: "Countries are to ensure their participation in disability-specific sports; people with disabilities must have access to services related to recreational, tourism, leisure and sporting activities" (United Nations, 2006). The United Nations talks about access in Article 30 in the sense of infrastructure, information, guidelines, training, assistance and communication technologies (United Nations, 2017).

5.1.2. European politics regarding disability tourism

With the use of three factors, member states of the European Union are triggered to make a greater effort to improve tourism accessibility (Buhalis et al., 2012). The first factor has to do with more and more global competition between European tourism destinations when it comes to quality and price (Buhalis et al., 2012). To attract more tourists, improvements are necessary to keep up with other competitors. Secondly, changes in the tourism sector are requested because of the demographic ageing of the population in many Western countries (Buhalis et al., 2012). This group might be less mobile and in need of accessibility to participate in the tourism process. The third factor specifically focuses on people with disabilities, and their globally strengthened rights to equality and participation in society (Buhalis et al., 2012). This awareness makes it more important to serve people with disabilities in a better way.

A complex policy environment exists at the European level, with relationships between institutions, interest groups and several other, diverse players (Reisinger et al., 2003). Until 2009, it was up to the member states of the European Union to design their own tourism policies (Buhalis et al.,

2012). Differences in the organisation of politics between countries were related to the history, sociology, economy and political and administrative culture of a country (Ruano et al., 2016). With the Lisbon Treaty that came into force in 2009, new possibilities were assigned to the EU institutions to undertake action on accessible tourism and design European tourism policies (Buhalis et al., 2012). The Lisbon Treaty stimulates an exchange of tourism practices between the member states (Estol et al., 2016). Two innovative directives were adopted by the EU member states in 2000, prohibiting discrimination based on religion, age, racial or ethnic origin, sexual orientation and disability (European Commission, 2016).

5.1.3. Politics regarding people with disabilities in the Netherlands

In the Netherlands, public authorities have competences over multiple policy domains influencing the development of tourism, such as spatial planning, fiscal policies, infrastructural development, water management, transport policies and labour policies (Dinica, 2009). However, policies of the past have not been very effective in ensuring that disabled people in the Netherlands are socially included (Schoonheim et al., 2007). In the 1980s, international competition led to a high unemployment rate and, as a result, government spending on social security was very high (OECD, 2007). Therefore, the Netherlands changed and upgraded its social security system, like other Western-European countries did. This was realised by changing the system to more flexibility and individuality (OECD, 2007). This supports the statement of Hall et al. (2004): “On the one hand, there is a demand for less government interference in the market and allowing industries to develop and trade without government subsidy or assistance, while, on the other, industry interest groups want to have government policy developed in their favour, including the maintenance of government funding for promotion and development”.

People with disabilities in the Netherlands generally have a lower net income, according to Schoonheim et al. (2007). They are entitled to financial help to pay rent or a health insurance. These financial provisions are related to someone’s income. The Personal budget (PGB) is a Dutch initiative that gives people with disabilities financial support and the freedom to choose how their care is organised. This includes support, personal care, medical care, medical supplies and services, and is not based on someone’s income but on the necessary care for a certain disability and the degree of self-sufficiency (Zorgwijzer, 2017). Until 2015, special holidays for people with disabilities could also be paid for with a part of the Personal Budget, but this may now differ between municipalities due to the decentralisation of healthcare. This decentralisation is further explained in the following section.

5.1.4. Decentralisation: From national governance to municipalities

For a long time, most policies have been governed at a national level representing all twelve provinces and more than 400 municipalities, but this had to be changed. An ageing population and a financial crisis from 2008 until 2015, have risen pressures on the pension, healthcare system and other social services, and made it necessary to reform the existing system (Van Gerven, 2016). This decentralisation means municipalities, instead of the national government, are now responsible for the implementation of policies related to healthcare, work and income. It has been driven by cost-efficiency rather than the statement that some decision-making is better off at the local level, closer to the citizens involved (Ruano et al., 2016). The reform of the existing system marked the beginning of a new type of society (Bronner et al., 2016). The so-called *participatory society* urges people to take responsibility in their own hands and create their own social and financial security, while the national government took a step back (Van Gerven, 2016). Expectation is that this phenomenon of decentralisation of administrative and financial responsibilities will result in less municipalities in total (Van Gerven, 2016). This will happen as a result of more tasks and regulations which makes it hard for small municipalities to keep up, encouraging mergers (Binnenlands Bestuur, 2010). Municipalities need to provide everyone with care in a better, smarter and faster way, while being cost-efficient (Egelmeer, 2016). Regional differences have emerged across the Netherlands and among people or organisations dealing with different municipalities.

5.1.5. Work-related policies

Participation Act

This act is active since 1 January 2015 and has incorporated three former work-related laws; the Young Disabled Persons Act (Wajong), the Work and Social Assistance Act (WWB) and the Sheltered Employment Act (WSW) (NZG, 2017). Goal is to support people with a physical or intellectual disability with finding a job, preferably in a regular workspace (NZG, 2017). Part of the target group are people who have working capacity, but are in need of support (Movisie, 2016). To make it more attractive for an employer to hire someone with employment restrictions, municipalities provide a subsidy (Movisie, 2016). The Quotum Law is part of the Participation Act. In an agreement between the government, employers and employees, it was agreed upon that employers need to create 125.000 additional jobs until 2026 for people with employment restrictions (Handicap Expertise Centrum, 2017). Active since 2014, this law obliges every company with at least 25 employees to offer jobs for this group of people (Handicap Expertise Centrum, 2017).

Work and Security Act (WWZ)

After approval in 2014, the Work and Security Act (WWZ) changed the existing Dutch dismissal and unemployment law (De Graaf et al., 2015). Some aims of the WWZ include: Enhance the protection

of employees with a “flexible” contract, such as agency workers, zero hours’ workers and workers on a fixed-term contract; reduce the differences between permanent and fixed-term employees; and stimulate unemployed people to seek re-employment (De Graaf et al., 2015). The rules about temporary contracts have been changed drastically. Most important is that temporary contracts must be reduced in numbers and length (Wet Werk en Zekerheid Kennisbank, 2014). For example, after three temporary contracts, automatically a contract of indefinite duration is being offered (Wet Werk en Zekerheid Kennisbank, 2014).

Changes in work-related policies

The Participation Act applies to everyone who is able to work, but needs support by realising this. As a consequence of the Participation Act, work-seekers need to search for ‘customised work’ (Sociaal-Economische Raad, 2016). There is a lot of uncertainty about the consequences of this law. Since the responsibility for the implementation is at the municipalities, they are responsible for paying this reintegration with a limited budget as a result of the decentralisation (Sociaal-Economische Raad, 2016). As a consequence, it is hard to implement the Participation Act and guide employees as well as employers in an adequate way (VNG, 2017).

5.1.6. Education-related policies

Educational support

It is sometimes difficult to combine your studies with a part time job, especially while having some sort of disability (Handicap Expertise Centrum, 2017). Therefore, a special arrangement is incorporated in the Participation Act. Municipalities can provide financial support to someone who is: at least 18 years old, receiving some form of study finance and not capable to earn the minimum wage (Handicap Expertise Centrum, 2017). Due to the fact that municipalities are now responsible for this instead of the central government, there are regional differences in the regulations about the frequency and the amount of financial support people are receiving (Handicap Expertise Centrum, 2017).

Changes in education-related policies

According to a petition written by Wolbert et al. (2016), there was a decrease in the number of people with disabilities that started studying in 2016 due to changes in study finance and a higher contribution in healthcare. Former minister of Education Jet Bussemaker (2016) wrote in a letter to the House of Representatives that she had recognised the wish of student unions to assign student finance for people with disabilities to one institution, DUO. This would limit the differences between municipalities. However, the minister chose to arrange study finance at the local level to make it more suitable for individual needs.

5.1.7. Policies related to the healthcare system

Generally speaking, the Dutch design of healthcare and welfare consists of the Long-Term Care Act, the Social Support Act and the Healthcare Insurance Law. The latter is more focused on healthcare insurance and insurance companies in relation to disabled people, which was not considered in this research. The following part elaborates on the Long-Term Care Act, Social Support Act and the Personal Budget. The Personal Budget is not an Act in itself, but is intertwined with the healthcare-related policies in the sense that it can be used within some of these acts.

Long-Term Care Act (WLZ)

Regarding long-term care in the Netherlands, services are designed for various kinds of people. Persons with cognitive, sensory or physical handicaps, long-term mental or intellectual problems and older people are, among others, part of the target group (Maarse et al., 2016). Until 2015, long-term care was financed by the Exceptional Medical Expenses Act (AWBZ) which was covering 95% of public financing and the Social Support Act (WMO) covering the remaining 5% (Maarse et al., 2016). The Long-Term Care Act has replaced the Exceptional Medical Expenses Act (AWBZ) in 2015 and is for everyone who needs intensive or long-term care (Zorgwijzer, 2017). This can take place in a care facility or at home, possibly with the use of a Personal Budget (NZG, 2017). To be eligible for support, a recommendation from the Centre for Indication of Healthcare (CIZ) is necessary (NZG, 2017).

Social Support Act (WMO)

For everyone who lives independently, but needs support due to a physical or intellectual disability, the WMO has been designed by the national government and implemented by municipalities (NZG, 2017). The implementation involves examining the situation and possibilities of people in the immediate vicinity of the person in need (NZG, 2017). The kind of support that people can get through the WMO includes individual care, day care, support of a caregiver or adjustments at home to make daily life a bit easier or offer a Personal Budget (NZG, 2017). An important goal is to make people more independent and facilitate living at home for a longer time (Zorgwijzer, 2017). It is also possible for people with disabilities to make use of a subsidy to facilitate playing sports (Gehandicaptensport, 2017). A subsidy can, for example, be used for special sport equipment.

Personal Budget (PGB)

The concept of Personal Budget has often been discussed and written about in the past years. According to Kremer (2006), this budget has turned care patients into consumers. It is up to them to manage their Personal Budget, decide where they want to spend it on and when. It can be used to employ caregivers, buy aid devices or make use of services (Egelmeer, 2016). The number of people who used a Personal Budget increased in 2005-2008 with around 28% per year (Maarse et al., 2016). Usually, the budget holder is the person who needs care, but in more severe cases, this can also be a

family member (Da Roit et al., 2016). Core values like equality and fairness are dominant in the Dutch welfare system, so the Personal Budget is only granted under certain conditions, especially focused on accountability (Kremer, 2006). The Personal Budget can be used to pay the care part of a holiday and a part of the accommodation used for short stays (Flow Reizen, 2017). When your own financial funds and Personal Budget are not sufficient for a holiday, there are special funds (such as the Princess Beatrix Fund, De Lichthoeve Foundation, Zonnewende Foundation, Bisshop Bluysen Foundation, Radboud Kleisterlee Foundation, Stinafo and more) willing to compensate the costs (Atlas van Zorg & Vakantie, 2016).

Changes in healthcare-related policies

The Netherlands is dealing with some critical issues; an ageing population is one of them. The number of people older than 65 years is expected to increase from 15% in 2008 to 25% in 2040 (Hartholt et al., 2012). This phenomenon and a financial crisis from 2008 until 2015, have risen pressures on the pension, healthcare system and other social services, and made it necessary to reform the existing system (Van Gerven, 2016). Several authors have described the Dutch system as a 'hybrid' model which is often seen as more flexible than the 'pure' welfare systems (Van Gerven, 2016).

The 2015 reform is the largest overhaul of long-term care since the AWBZ came into force in 1968 (Maarse et al., 2016). Implications of the reform in the Dutch system of healthcare can be described with the use of three different aims. The first aim is to provide care at home replacing care in nursing and caring homes, to stimulate older people and people with disabilities to stay longer at home (Jongen et al., 2016). This is incorporated in the Long-Term Care Act (WLZ). The second aim is a shift from formal care to informal care provision. In this participatory society, people are urged to take care of themselves and their relatives as much as possible (Jongen et al., 2016). Finally, governance is shifting from a national to a local level which is mentioned before, known as decentralisation. Only the responsibility for the most severe cases will stay at the national level (Jongen et al., 2016). The transition has cost money, but is a downsize at the same time. Municipalities are getting more money, but the budget of the national government was much higher (VNG, 2017). The proportion shift of the WMO and WLZ from 2005-2015 has been visualised in Figure 5.

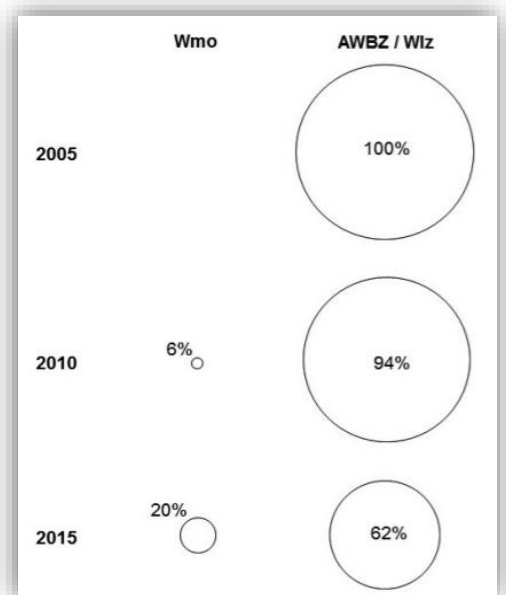


Figure 5. Transition of the Dutch long-term care system over a period of ten years (Jongen et al., 2016).

The Personal Budget is trying to create a market of care and, at the same time, change power from professionals to the care taker (Kremer, 2006). A possible consequence of this might be that the professional care workers can be undermined. In the long-term, this can negatively impact the quality of care (Kremer, 2006). According to Maarse et al. (2016), some lessons can be learned from the reform in the Dutch long-term care policies. To start, implementation in a short time frame brings along many uncertainties and risks for everyone who is involved, especially clients (Maarse et al., 2016). According to Maarse et al. (2016), "Implementation remains the 'Achilles heel' of the operation". Also, administrative and ICT-problems occurred during the implementation and therefore new infrastructure was needed (Maarse et al., 2016). Thirdly, the new system of financing includes several agencies, regulations, budgets and clients causing the risk of coordination problems (Maarse et al., 2016).

5.1.8. Policy effects on stakeholders

The creation and maintenance of policy involves many different aspects, parties and stakeholders. The change that is being experienced in the lives of different stakeholders often determines success or failure of a certain policy (Somollo, 2014). A stakeholder can be defined as: "Someone who has something to gain or lose through the outcomes of a planning process or project" (Somollo, 2014). This can include different types of people, like individuals, groups of people, organisations, or interest groups. Interest groups include businesses, professional organisations, trade associations, environmental organisations, labour unions, non-governmental organisations, citizen groups and lobbies (Gittell et al., 2017). The importance of branch organisations was emphasized by Terry (2012). They are aware of the need to maintain central structures for the coordination of policies, besides their own relative autonomy (Terry, 2012).

Policies are influenced by multiple factors, such as public opinion, economic conditions, new scientific discoveries, and technological change (Gittell et al. 2017). Stakeholders can also undertake different activities to influence policy. There are several options while looking at public policy, like lobbying, advocating positions publicly, attempting to educate, and mobilising allies on a certain issue (Gittell et al., 2017). The outcomes of policy often involve compromises among different parties. In an ideal situation, there is a two-way relationship between the policy makers and the stakeholders but, in reality, there is often a weaker relation from the stakeholder to the policy maker (Somollo, 2014).

Insufficient awareness or enforcement of existing rules, regulations and laws can create policy barriers, such as access denial of individuals to participate in federally funded programs, services or benefits or denying reasonable accommodation to disabled people, without giving them the opportunity to perform their daily activities (Center for Disease Control and Prevention, 2016). Stakeholders can be split up in target and non-target groups. Part of the target group are the ones for who a program a policy

is designed in the first place. Disability-related policies, for example, are first of all directed towards people with disabilities. Non-target groups are the ones who may receive impact from a certain policy, but this policy is not directly designed for them (Somollo, 2014). The disability-related tourism organisations and their funders can in this case be seen as part of the non-target group of disability-related policies.

5.2. Semi-structured interviews

In this section, I will present the results derived from the interviews, intertwined with the discussion. Interviews were conducted with six disability-related tourism organisations and two funders of a disability-related tourism organisation. The data is divided into different sections, all starting with an explanation about the content. The first section is an introductory one, followed by sections about 'Tourism stakeholders' connections in disability tourism' and 'The influence of policies on tourism stakeholders'. At the end, recommendations from the organisations and funders to the government can be found under the heading 'Recommendations to improve stakeholders' relationship with the state'. The interview data is used to answer the following three sub questions:

- What do disability-related tourism organisations do and how are they influenced by policies shaping the lives of people with disabilities?
- What sorts of funders of disability-related tourism organisations are included and how are they influenced by policies related to funding?
- Which connections between tourism stakeholders can be identified?

5.2.1. Introduction of the participating organisations and funders

This section will provide some background information about the participating organisations and funders. Information is included about how long the organisations are active, the type of holidays that are offered, and the number of participants per year. Also, how long the funders are active and how they ended up with an NBAV-organisation is included. It is meant to create an understanding of the participating organisations and funders.

Organisation A offers accompanied holidays for people with a light intellectual disability. Very different kinds of holidays are included, such as survival tours in the Ardennes, holidays in the United States and all-inclusive holidays to Turkey. It is important for this organisation to offer every holiday that you and I can book as well. Each year, they serve around 2000 participants.

Organisation B describes their organisations as holidays with 'attention' that take place in the Netherlands. It is meant for people with a disability, but also for people who lack social contact. Two types of accommodation are from their own and three other types of accommodation are rented by this organisation to serve around 5000 guests per year.

Organisation C, already active for 60 years now, focuses on holiday weeks for elderly people with a disability. Accommodation is rented from a third party and is located in the Netherlands. Five weeks of holiday are organised in total, for around 100 people.

Organisation D under study offers holidays to people with physical as well as intellectual disabilities in the Netherlands. Different kinds of accommodation are used to facilitate active water sports holidays. It is possible for individuals as well as groups to book a holiday. The annual number of participants is around 1400 people, divided over individual and group bookings.

Organisation E is especially focused on being away and giving personal attention to the participants. Their target group consists of around 500 people annually. Holidays mostly take place in the Netherlands, but it is also possible to visit other European countries by bus or destinations outside of Europe by means of a plane. A wide variety of holidays is offered, such as city trips or beach holidays.

Organisation F characterises their holidays as small-scale, with accompaniment for people with intellectual disabilities, multiple disabilities or acquired brain injuries. Around 500 people per year make use of this organisation. In and outside Europe is possible and the trips revolve around personal attention, while creating holidays together.

The location of holidays differs per organisation. While some create opportunities to go on holiday everywhere in the world, others are more focused on holidays in the Netherlands. There are organisations having their own accommodation, while other rent accommodation from third parties. With the 'youngest' organisation already active for 19 years, they all have experience with disability tourism for quite a long time.

Funder I does not provide financial means, but software to a disability-related tourism organisation, while funder II provides financial support. Both of them are active for a couple of years now, ten and seven years respectively. Different projects have been funded in this period. There was no specific reason for choosing an NBAV-organisation, because they were both directly approached by an organisation and did not search for one in particular.

5.2.2. Tourism stakeholders' connections in disability tourism

Only one of the organisations does not make use of funders, except for a few advertisers. This does not mean that all other organisations are dependent on funding to arrive at a positive budget. It came forward that it was also possible to use funders for additional activities only. Some of the organisations were dependent on their funders in a way that they would have a negative budget without their support, which makes them an essential part of their organisation. Funding at the local level is often found to be insufficient in providing the necessary services to people (Barton, 2013). This was acknowledged by the participating funders by indicating that there are cases in which support from the government may not be possible or sufficient. This is where the importance of funders is again

emphasized. Different kinds of funders are involved in disability tourism and identified in this research, such as the church, sovereign wealth funds, donors and advertisers. Funding ranges from financial support to advertisements and software. The dependence of the disability-related organisations on funders has been explained, but there is also a link from these organisations to funders. As mentioned before, both funders identified that they did not search for an NBAV-organisation in particular, but were directly approached by one of its members. These organisations can change the direction of funding by drawing attention to the organisation they represent.

Another interesting stakeholder in the process of disability tourism is the volunteer. The high number of volunteers made it interesting to see if there are ways in which the government encourages or discourages volunteer work. With the use of media, volunteer work is given attention. The church also played an important role as a funder in bringing people in contact with organisations to start doing volunteer work. This creates a new link between funders and volunteers. Unemployed people who depend on social benefits are not allowed to do volunteer work abroad which excludes them from holiday destinations outside of the Netherlands. There are some suggestions on how the government can stimulate volunteer work, such as a compensation for volunteers or paid leave for doing some kind of volunteer work. At least 90% of each organisation in this research consists of volunteers, which shows the dependency of the organisations on the volunteers. However, it is not a one-way relationship, because the advantages of being a volunteer are emphasized as well, including work experience, socialising, helping others and enhancing your self-esteem. This can be realised, for example, by working for a disability-related tourism organisation.

5.2.3. The influence of policies on tourism stakeholders

This section starts with information provision about the policies and changes discussed before.

Good information is believed to improve decision-making and enhance efficiency (Kaye, 1995). It is easier to describe a policy experience when relevant information is comprehensive and accessible. After describing the way in which information was provided to the organisations and funders, the influence of different kinds of policies on these tourism stakeholders is being discussed.

None of the interviewed organisations was directly informed by the government about the policy changes. So, information provision and sharing was not arranged through the government, but other channels did provide information. The news was mentioned as the main source of information with regard to policy changes, followed by other media, such as social media. Concerning the sharing of information, main parties were colleagues, competitors and participants. Overall, information provision and sharing was quite satisfactory via these channels, also because many organisations did not expect direct information from the government. A number of disability-related tourism organisations

mentioned the role that the NBAV can play in coordinating information. The interviewees found it especially useful for an organisation, such as a branch organisation, to be informed by the government and then inform their members. The now dispersed information is then something that must be dealt with first, by offering a standardised way of information. A suggestion on how to improve information provision about policy changes even more is also described in the following quote. “It would be very nice if there was a standardised way of information provided by the government to us as organisations, for example a website”, said by Organisation A, being a big organisation and providing all kinds of holidays. This suggestion was made in order to change the fact that there is now no place with a clear overview of all relevant policies like there is for tax policies for example. The European Commission has introduced a “Taxes in Europe” database in which people can search for a particular EU member state and find all kinds of policies related to taxes. Organisation E, a quite small organisation that is mainly focused on holiday within the Netherlands, also experienced difficulties with the dispersed way of information they now receive via multiple channels. There was in general also no information from the government directly to the funders, but the network of experts, online and hardcopy sources were used to obtain information. To improve information about policy making, information via their accountant was suggested. The tourism organisations and the funders are part of the non-target group when it comes to disability politics (Somollo, 2014). The tourism organisations were viewed, however, as being part of the target group by one of the funders, seeing them in more direct contact with disabled people. Together with the fact that policies are not influencing them, information provision was viewed as less valuable by the funders.

Almost all organisations were familiar with work-related policies for people with disabilities, except for one who had limited familiarity. To the question in which way their organisation had anything to do with work-related policies, two organisations had to deal with the Work and Security Act and temporary contracts in particular. The temporary contracts which were used, e.g. for volunteers who work in the summer months, had to become fixed-term contracts as a result of this Act. Some of the organisations had one or more employees with a disability, making the Participation Act something they work with. The organisations dealing with these work-related policies were also asked if it was experienced positively or negatively. One of them was negative about the policies, because it was difficult to interfere as a non-healthcare institution in the Participation Act. One was quite neutral about it, because they could meet the requirements as a small organisation. The last organisation viewed the Participation Act as something positive by stimulating people to work. It was also indicated that all organisations have less than 25 employees, which explains the fact that they do not have so much to do with the Quotum Law. This Law is obliging companies with more than 25 employees to hire someone with a disability (Handicap Expertise Centrum, 2017). Some organisations were giving people with

disabilities the opportunity to work for them anyway, which is only stimulating inclusivity more. The Work and Security Act together with the Participation Law were influencing several organisations.

Municipalities can financially contribute to the study of people with a disability. Since the interviews questions were built around the types of policies identified during the desk research, it was possible that the interviewees were not familiar with all of them. This applies to the case of education-related policies, when none of the organisations was familiar with the arrangement mentioned before (or only very limited). This can be explained by the fact that also none of the organisations had anything specifically to do with it or were influenced by it in any way even though participants who book a holiday are sometimes part of an educational institution. This institution might be influenced by other educational policies, not identified in this research.

Unlike the education-related policies, all organisations were familiar with the policies related to the healthcare system, such as the Long-Term Care Act, the Social Support Act and the Personal Budget. Participants of organisation A and organisation E have not experienced changes in the way a part of the Personal Budget is being used for a holiday. Organisation D, however, experienced an increase in administrative tasks and more complicatedness while using the Budget for their holidays in the Netherlands. As a consequence, they stopped working together with individual bookers to use a part of their Personal Budget, unless it is from their free-to-spend part. When participants of Organisation C want to use a part of their Personal Budget for a holiday, they do not have to arrange it via the organisation but only via their care provider to ensure they receive the necessary care. This organisation is a small-sized organisation that only organises holiday five weeks a year. Organisation B is taking on the role as a subcontractor and is often in touch with the current care provider of the participant. For this organisation, it is not possible to use a part of the Personal Budget to pay for a holiday. Regardless of needing care, participants pay the same price even though it is actually higher for people with intensive care requirements. Using a part of the Personal Budget would not make it cheaper, because the additional costs are not shown in the holiday price. Organisation F is also providing care during holidays and deals with healthcare-related policies in that sense. As described, organisations are influenced by healthcare-related policies in different ways and the degree of influence also differs.

Support from the government was not very common among the interviewed organisations, although the government supported one project which was not holiday-related and provided an internship allowance. Financial support from the Long-Term Care Act and the Social Support Act was also mentioned as a way of support initiated by the government. Regarding recent changes in financial support, it was recognised that there are now more strict rules about the ANBI-status than before and that the number of ANBI's is being reduced. When an organisation has an ANBI-status (Algemeen Nut

Beogende Instelling), it is regarded as an institution that is of general importance for society. This status brings along certain tax advantages, e.g. making your donations tax-deductible (Belastingdienst, 2017). Ways of how the government is already encouraging funding generally include financial advantages and brand awareness.

5.2.4. Recommendations to improve stakeholders' relationship with the state

Recommendations from the organisations and funders to the government were given for further improvement of their political process. They are related to information provision, volunteer work and the organisation of care.

Improving information and more clarity

As mentioned before, information was not directly provided by the government to the tourism stakeholders in this research. Funder II emphasized the importance of creating policies together with the target group, in this case people with disabilities. This funder now feels as if the policies do not match the needs and wants of the people involved. To improve clarity about the policy changes, organisation A suggested to set up a database, like the one for tax policies talked about before or the one from the Ministry of Foreign Affairs. This one is designed for up-to-date travel advice and when there is a change, you get a notification. It would not only be useful for their organisation, but also for people with a disability, their environment and caregivers. There are several information sources that must be consulted now and in combination with more complicated rules and regulations, the use of one system was recommended by organisation E. Holidays to several destinations are offered by this organisation that are especially focused on personal attention.

Volunteer work

Volunteer work is brought to the attention of the public, but an important recommendation was given by organisation B. Contracts used to have some kind of arrangement through which people could take one or two days off to do volunteer work. This has been removed and, as a consequence, the average age of volunteers is getting higher and people are less encouraged to become a volunteer. That is why this organisation suggested that volunteers could receive some kind of compensation for the work they are doing. Several organisations agreed with this incentive of stimulating volunteer work. This is not very surprising, considering the high dependency on volunteers to keep most of the organisations running. Paid leave for doing some kind of volunteer work was recommended by organisation D which is providing active water sport holidays in the Netherlands.

Better organisation of care

Several recommendations were directed towards the improvement of healthcare. Independence is being stimulated, but organisation C mentions that it is not possible for everyone to rely on family or neighbours for the provision of care. The target group of this organisation consists of elderly people with a disability. “Make more money available for healthcare and pay more attention to the positive effects of these kinds of holidays for disabled people” is an urgent call from organisation D, who noticed the struggle of people to arrange suitable care outside of the holidays. Related to this issue is the fact that the payment of the Personal Budget now happens after the care has been provided. Therefore, someone needs to have enough money to pay their care in advance, as indicated by organisation E, who is also dealing with the Personal Budget in relation to their holidays.

6. Discussion

This chapter includes a discussion section in which the results are being linked to theory and literature. This will indicate the academic relevance of this research. Also, suggestions for future research are included.

6.1. Discussion of the results

During the desk research, there was a shortcoming in theory identified about policies related to funding. The participating funders in this research have not experienced important policy changes affecting them either. Barton (2013) emphasized that appropriate funding is necessary to empower disabled people and broaden their opportunities. The findings support this, by identifying funders as an essential part of almost all organisations involved in this research. Barton (2013) described that the introduction of policies to facilitate disabled people’s independence needs investment from the central government, because funding at the local level alone is often not sufficient. In the Dutch case, the decentralisation included a cut in expenses which might have changed the implementation possibilities of the policies. Municipalities had to provide the same services and facilities with a lower budget and because of relative freedom in implementation, regional differences were created. This supports the beforementioned statement of Barton (2013). Tourism stakeholders such as disability-related tourism organisations recognised these regional inequalities as well. Their location determines how policies are implemented.

During the literature review, it became clear that information provision and sharing is an important aspect to strengthen policy-making and implementation (Putnam, 2005; Brink-Muinen, 2007). Overall, information provision and sharing was rated as quite satisfactory via other organisations or participants. These stakeholders were seen as valuable sources of policy information and ways to deal with it. The statement of Putnam (2005) that through organisations, information sharing and the

creation of relationships are being strengthened is therefore supported, together with the statement of Bramwell et al. (2000) that organisations might benefit from bringing knowledge and other resources together. Many organisations did not expect direct information from the government, contradicting the statement made by Hall et al. (2004) that information is often still expected to be provided by the state, as a national government. This might be because of governmental differences between countries, because Hall et al. use an international approach, while this research is about the Netherlands (the focus of these organisations). Also, in many Western countries a shift can be seen from direct service provision by the government to a more enabling function (Bramwell et al., 2000). So, further research should be done on differences in policy implementation between countries.

Terry (2012) described the importance of a branch organisation. This could also be found in this research. A number of disability-related tourism organisations mentioned that the NBAV as a branch organisation could play an important role in coordinating and sharing information. The interviewees found it especially useful that the government informs the branch organisation, so they can transfer it to their members. Furthermore, as McLaughlin (1987) also mentions; these organisations require different kinds of information about policy consequences for their organisational setting. At the moment, these organisations indicated that there is a lack of relevant information for them that can be found in one place. For future policy information provision, it could thus be recommended, that the NBAV will be better informed by the government and plays a bigger role in coordinating and sharing information with the individual disability-related tourism organisations. In this way, the organisations will have more information that will enable them to better predict the future political environment and adapt their performance accordingly (Henisz et al., 2004).

None of the participating funders has indicated recent changes in policy that affected them in a certain way, unlike the tourism organisations did. This is interesting, because the funders and the organisations are closely linked to each other. However, there were only two funders participating in this research, making the sample size very small. Future research is needed to see if there have been no relevant policy changes related to funding for any other funders.

The tourism organisations and the funders are part of the non-target group when it comes to the disability policies discussed before (Somollo, 2014). The policies were designed for people with disabilities, making them part of the target group. The tourism organisations were viewed, however, as being part of the target group by one of the funders. They see the organisations as being in more direct contact with people with disabilities. The funders feel more distance between themselves and the disability-related policies, because they are not in direct contact with disabled people. Even though the tourism stakeholders are dealing in different ways with disability-related policies, the connections between different stakeholders in the disability tourism network make it important to emphasize that

disability politics not only occur on different levels (global, European, national, local), but also between different institutions (Hall et al., 2004).

6.2. Suggestions for future research

This study is focused on the Netherlands, but because politics are arranged in so many kinds of ways, it might be less valuable for other countries. It will be of interest to do a similar research in another country, to compare differences. An important remark was made by Buhalis et al. (2012) by mentioning: "In order to implement social inclusion policies in tourism, a wide range of stakeholders, such as people with disabilities and their families has to be included". To expand this research, actors from the demand-side and the supply-side should be included to make future research more thorough. Also, governmental actors can be included to identify their reasons for shaping policies.

It was indicated that all participating organisations are heavily dependent on the help of volunteers. This drew attention to the reasons of why they are joining a disability-related tourism organisation. Such a research can be of great importance in designing more specific and tailored marketing materials to attract more volunteers.

7. Conclusion

The results as part of this research provide an understanding of how organisations and funders are influenced by disability and funding policies. Not all policies identified with the use of desk research have proven significant for the tourism stakeholders. However, the ones the organisations had to deal with had a great impact on their day-to-day activities. Aim of this research was to answer the main research question: *In what way have current policies related to people with disabilities and funding in the Netherlands influenced disability-related tourism organisations and their funders?*

As a result of the dispersed way of information provision, organisations and funders might have different information about the policy changes. Information provision and sharing has proven to be an important aspect to strengthen policy-making and implementation. Clear and comprehensive information can be a key to success. So, it is recommended to improve this by assigning a bigger role to branch organisations as a link between government and tourism stakeholders.

This research found that the educational arrangement policy included does not have a significant influence on disability-related tourism organisations participating in this research. Also, no policy changes have been identified that influenced the funders in any way. The Long-Term Care Act, Social Support Act, Work and Security Act, the way in which the Personal Budget can be used and more administrative tasks were mentioned by several organisations as being most influential. The degree of influence of the Participation Act was mostly determined by the size of an organisation. The bigger the

organisation, the higher the impact was as well. The organisational structure determined the influence of the Work and Security Act whereby temporary contracts for volunteers had to be turned into fixed-term contracts.

The disability-tourism organisations are indispensable in the field of disability tourism. In turn, they are dependent on volunteers and funders to arrange these holidays. The strong link between these disability tourism stakeholders has become clear throughout this research. In addition, it is important to conclude that disability-related policies have not only influenced people with disabilities, but also tourism organisations designed for this specific, but diverse group of people. Although the link between funders and policies did not become clear, links between policies, people with disabilities and disability-related tourism organisations have become apparent through the findings in this research.

This study contributed to the statement of Nicolaisen et al. (2012) that it is important to include supply-side perspectives to understand tourism better. The field of politics is not well-developed compared to other research areas related to tourism, even though its significance has been recognised at different government levels. This research focused on the supply-side of disability tourism, which was not covered yet in this specific way before and therefore contributes to this relatively under-developed area of research.

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This topic is close to my heart, because equal opportunities for everyone are very important to me and my field of study is tourism. When one of my acquaintances made use of a holiday for people with a disability, I got familiar with the concept of disability-related tourism organisations in the Netherlands. I acknowledge the fact that the Netherlands is a privileged country, but am also aware of some of the recent changes in policies related to people with disabilities and its implications. Tourism and disability policies could easily be linked to each other in this research, by focusing on the experiences of disability-related tourism organisations and their funders with Dutch policies. The dependency on volunteers was also interesting to notice, since I am doing volunteer work myself at a travel organisation. I would like to thank my two supervisors Meghann Ormond and Pieterneel Cremers for supporting me during this research with feedback and suggestions. Also, a big thanks to the organisations and funders who were willing to participate in this research even though I did not know them. SailWise even welcomed me on their Introduction Day for volunteers, which was very inspiring, something I hope this research will be for them. Additionally, I thank my family members for guidance and motivational words, they are the best.

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Appendices

Appendix I – First informative mail

English version

Dear <name organisation/funder>,

My name is Judith van Nimwegen and I am currently studying Tourism at Wageningen University. At this moment, I am working on my Bachelor Thesis. This is about the current policies in the Netherlands and their effect on disability-related tourism. This research is especially focused on the experiences of tourism organisations of the NBAV and their funders who make it possible for people with disabilities to go on holiday. With the use of interviews, I would like to compare several experiences to each other.

I hope to answer the following questions with the use of interviews:

1. What do disability-related tourism organisations do and what are their experiences with policy issues shaping the lives of people with disabilities?
2. What sorts of funders of disability-related tourism organisations are included and how do they experience policy issues related to funding?

This research can also be a relevant addition for your organisation/you as a funder by identifying the effect of the Dutch policies. It is important to see how others are dealing with this and to identify where improvement can take place. In July, I hope to share the results with you if you are interested.

First, I hope to hear from you if it is possible to interview someone from your organisation, because you are a member of the NBAV/you as a funder of an NBAV-organisation. If yes, we can look at a suitable date and time. Your name will not be mentioned, only the name of the organisation/funder you will be representing. Thanks in advance!

Kind regards,
Judith van Nimwegen

Dutch version

Beste <naam organisatie/sponsor>,

Mijn naam is Judith van Nimwegen en ik studeer Tourism op de Universiteit van Wageningen. Op dit moment ben ik bezig met mijn afstudeerscriptie. Het onderwerp daarvan is de huidige Nederlandse wetgeving en het effect hiervan op toerisme voor mensen met een beperking. Dit is speciaal gericht op de ervaringen van reisorganisaties van de NBAV en sponsors die vakanties voor mensen met een beperking mogelijk maken. Aan de hand van interviews zou ik deze ervaringen met elkaar willen vergelijken.

De volgende vragen hoop ik te beantwoorden met behulp van interviews:

1. What do disability-related tourism organisations do and what are their experiences with policy issues shaping the lives of people with disabilities?
2. What sorts of funders of disability-related tourism organisations are included and how do they experience policy issues related to funding?

Dit onderzoek kan ook relevant zijn voor uw organisatie/u als sponsor om te ontdekken wat het effect van de Nederlandse wetgeving is. Het is belangrijk om te zien hoe anderen hiermee omgaan en erachter te komen waar verbetering kan plaatsvinden. Het eindresultaat kan ik in juli met u delen als u interesse heeft.

Graag hoor ik eerst van u of ik iemand van uw organisatie kan interviewen, omdat u lid bent van de NBAV/u als sponsor. Is het antwoord ja, dan kunnen we kijken wanneer het uitkomt bij u. Uw naam zal niet genoemd worden, alleen uw organisatiename of sponsornaam zal gebruikt worden. Alvast bedankt!

Met vriendelijke groeten,
Judith van Nimwegen

Appendix II - Interview questions disability-related tourism organisations

Used to answer the following question:

What do disability-related tourism organisations do and how are they influenced by policies shaping the lives of people with disabilities?

English version

Background about the organisation

1. For how many years is your organisation already active?
2. What kind of holidays do you offer to people with a disability?
3. How many participants on an annual basis make use of a holiday via your organisation?

Information about policy changes

Since 2015, there have been a lot of changes in rules and regulations, also when it comes to people with a disability and special organisations that exist for this group. For example, think of the (partial) shift in responsibility from the national government to municipalities.

4. How did you obtain information about policy changes?
5. In what way have you been informed by the government?
6. Based on satisfaction, how would you grade information provision from the government (0-10)?
7. How can information about policy changes be improved?

Work-related policies

The Participation Act, Quotum Law and the WWZ are some examples of rules and regulation that have to do with people with disabilities and work.

8. Are you familiar with these work-related policies?
9. In what way has your organisation anything to do with it?
10. How was this a positive or a negative experience?

Education-related policies

It might be difficult for young people with a disability to combine their studies with a job and therefore, municipalities can financially contribute to their study.

11. Are you familiar with this arrangement?
12. In what way has your organisation anything to do with it?
13. How was this a positive or a negative experience?

Policies related to the healthcare system

The WLZ is for everyone who needs some kind of care, at home or at a healthcare institution. The WMO is for people with a physical or intellectual disability. Important goal is to stimulate independency and make people stay longer at home.

14. Are you familiar with these policies related to the healthcare system?
15. In what way has your organisation anything to do with it?
16. How was this a positive or a negative experience?

The Personal Budget is an important financial aspect that can be linked to healthcare. Municipalities are now responsible for who is getting a Personal Budget and the amount of Personal Budget that is being allocated. The Personal Budget can be (partly) used for special holidays as well.

17. Are you familiar with the Personal Budget?
18. In what way has your organisation anything to do with it?
19. How was this a positive or a negative experience?

Funders

20. Does your organisation make use of funders? What kind of funders?
21. In what way is your organisation financially supported by the government?
22. What are some recent changes in the requirements of receiving financial support?
23. How dependent on funders is your organisation?

Volunteers

24. In percentages, how many volunteers work at your organisation?
25. How is volunteer work being encouraged by the government? (financial advantages, rules and regulation)
26. What should be the role of the government, according to you?

Consequences

27. What has changed for your organisation regarding rules and regulations?
28. Was this a positive or negative experience?
29. What has been changed in the number of participants over the past years?
30. Do you know why this change took place?

Recommendation

31. What is your recommendation to the government regarding rules and regulations for people with disabilities?

Dutch version

Achtergrond van de organisatie

1. Hoeveel jaar is uw organisatie al actief?
2. Wat voor soort vakanties biedt u mensen met een beperking/handicap aan?
3. Hoeveel deelnemers maken jaarlijks gebruik van een vakantie via uw organisatie?

Informatie over veranderingen in de wet- en regelgeving

Sinds 2015 hebben er veel veranderingen in de wet- en regelgeving plaatsgevonden, ook als het gaat over mensen met een beperking en speciale organisaties voor deze groep. Denk bijvoorbeeld aan de verantwoordelijkheid die (deels) is overgegaan van nationale overheid naar gemeentes.

4. Hoe heeft u informatie verkregen over de veranderingen in wet- en regelgeving?
5. Bent u geïnformeerd door de overheid?
6. Op basis van uw tevredenheid, welk cijfer tussen de 0 en 10 zou u de informatievoorziening vanuit de overheid geven?
7. Hoe kan de informatievoorziening over veranderingen in de wet- en regelgeving verbeterd worden?

Werk-gerelateerde wetgeving

De participatiewet, Quotumwet en de WWZ (Wet Werk en Zekerheid) zijn enkele voorbeelden van wetgeving die te maken hebben met mensen met een beperking en werk.

8. Bent u bekend met deze werk-gerelateerde wetten?
9. Op wat voor manier heeft uw organisatie hier mee te maken?
10. Hoe was dit een positieve of negatieve ervaring?

Regeling voor het onderwijs

Omdat het voor jongeren met een beperking lastig kan zijn om een studie ook nog te combineren met een bijbaan, kunnen gemeentes financieel bijdragen aan hun studie.

11. Bent u bekend met deze regeling?
12. Op wat voor manier heeft uw organisatie hier mee te maken?
13. Hoe was dit een positieve of negatieve ervaring?

Wetgeving met betrekking tot de zorg

De WLZ (Wet Langdurige Zorg) is voor iedereen die een bepaalde vorm van zorg nodig heeft, thuis of in een zorginstelling. De WMO (Wet Maatschappelijke Ondersteuning) is voor mensen met een fysieke of geestelijke handicap. Belangrijk doel van de veranderingen in de zorg is het stimuleren van onafhankelijkheid en langer thuis wonen.

14. Bent u bekend met deze wetten?
15. Op wat voor manier heeft uw organisatie hier mee te maken?
16. Hoe was dit een positieve of negatieve ervaring?

De Personal Budget is een belangrijk financieel aspect, dat gelinkt kan worden aan de zorg. Gemeentes zijn nu verantwoordelijk voor het bepalen van de hoogte van de Personal Budget en wie hiervoor in aanmerking komt. De Personal Budget kan ook gebruikt worden voor (aangepaste) vakanties.

17. Bent u bekend met de Personal Budget?

18. Op wat voor manier heeft uw organisatie hier mee te maken?
19. Hoe was dit een positieve of negatieve ervaring?

Sponsors

20. Maakt uw organisatie gebruik van sponsors? Wat voor soort sponsors?
21. Op wat voor manier wordt uw organisatie financieel ondersteund door de overheid?
22. Wat is er recent veranderd aan de eisen om financiële steun te ontvangen?
23. Hoe afhankelijk is uw organisatie van sponsors?

Vrijwilligers

24. Hoeveel procent van uw medewerkers zijn vrijwilligers?
25. Hoe wordt vrijwilligerswerk aangemoedigd door de overheid? (Financiële voordelen, wet- en regelgeving)
26. Wat zou de rol van de overheid hierin moeten zijn volgens u?

Gevolgen

27. Wat is er qua wet- en regelgeving veranderd voor uw organisatie?
28. Was dit een positieve of negatieve ervaring?
29. Wat is er veranderd in het aantal deelnemers over de afgelopen jaren?
30. Hoe denkt u dat dit komt?

Aanbeveling

31. Welke aanbeveling zou u doen aan de overheid als het gaat over de huidige wet- en regelgeving voor mensen met een handicap?

Appendix III - Interview questions funders

Used to answer the following question:

What sorts of funders of disability-related tourism organisations are included and how are they influenced by policies related to funding?

English version

Background about the funder

1. For how many years are you active as a funder?
2. How did you end up funding this NBAV-organisation?

Information about policy changes

Since 2015, there have been a lot of changes in rules and regulations, also when it comes to people with a disability and special organisations that exist for this group. For example, think of the (partial) shift in responsibility from the national government to municipalities.

3. How did you obtain information about policy changes?
4. Have you been informed by the government?
5. Based on satisfaction, how would you grade information provision from the government (0-10)?
6. How can information about policy changes be improved?

Policies related to funding

7. How is funding being encouraged by the government? (financial advantages, rules and regulation?)
8. Which recent changes in policies related to funding have been taken place?
9. What should be the role of the government, according to you?

Consequences

10. What has changed for you as a funder regarding rules and regulations?
11. Is this a positive or negative experience?

Recommendation

12. What is your recommendation to the government regarding rules and regulations for people with disabilities?

Dutch version

Achtergrond van de sponsor

1. Hoeveel jaar bent u actief als sponsor?
2. Hoe bent u bij deze NBAV-organisatie terechtgekomen?

Informatie over veranderingen in de wet- en regelgeving

Sinds 2015 hebben er veel veranderingen in de wet- en regelgeving plaatsgevonden, ook als het gaat over mensen met een beperking en speciale organisaties voor deze groep. Denk bijvoorbeeld aan de verantwoordelijkheid die (deels) is overgegaan van nationale overheid naar gemeentes.

3. Hoe heeft u informatie verkregen over de veranderingen in wet- en regelgeving?
4. Bent u geïnformeerd door de overheid?
5. Op basis van uw tevredenheid, welk cijfer tussen de 0 en 10 zou u de informatievoorziening vanuit de overheid geven?
6. Hoe kan de informatievoorziening over veranderingen in de wet- en regelgeving verbeterd worden?

Wetgeving met betrekking tot sponsoring

7. Op wat voor manier wordt sponsoring aangemoedigd door de overheid? (Financiële voordelen, wetgeving)
8. Wat is er recent veranderd aan wet- en regelgeving voor sponsors in het algemeen?
9. Wat zou de rol van de overheid hierin moeten zijn volgens u?

Gevolgen

10. Wat is er qua wet- en regelgeving veranderd voor u als sponsor?
11. Is dit een positieve of negatieve verandering?

Aanbeveling

12. Welke aanbeveling zou u doen aan de overheid als het gaat over de huidige wet- en regelgeving voor mensen met een handicap?