



Mental Health Cluster

ZonMw's story about a mentally healthy Netherlands

When you feel mentally well, you are more resilient, live a healthier life and perform better at work.



May 2026

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ZonMw's story about a mentally healthy Netherlands

ZonMw is committed in multiple ways to a mentally healthy Netherlands – because this is urgently needed. For example, different sectors are learning to work together around people with behaviours that are not well understood, where continuous monitoring is essential. At the same time, new knowledge on strengthening mental resilience among young women is generated. We are gaining increasing insight into what is needed to transform care from a predominantly medical perspective to a more social one. But there is more that ZonMw sets in motion. We will explore our work through the lens of current themes in the field of mental health care, as outlined in the AZWA, the Strengthening Agenda for Mental Health and Mental Health Care, and the coalition agreement.



'Through collaboration with both the mental health care field and the Ministry of Health, Welfare and Sport, we were able to build a bridge between practice and policy. This is still needed. Looking to the future, we see many opportunities for research to address existing challenges ahead.'

Cule Cucic, [IMPACT magazine](#), May 2025





Action Programme Addressing Misunderstanding (Grip op Onbegrip) (2021-2026)

Strong networks for people who have lost, or are at risk of losing, control over their lives

- Person-centred care and support for people with behaviours that are not well understood
- Preventing escalation
- From early detection through follow-up
- Strengthening collaboration between health care, safety, the social domain, education, research and lived experience
- Strengthening current and future (professional) practitioners
- Deployment of lived experience as a key pillar
- Regions building learning networks | (Further) development of collaborative models and interventions

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Accelerators in Mental Health Care (2022-2026)

Improving accessibility of mental health care and reducing waiting times

- Collaboration with the Steering Committee on Accessibility and Waiting Times in Mental Health Care
- 20 regions currently have an Accelerator
- Evaluation expected in the course of 2026

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Mental Health Research Programme (2016-2026)

The Netherlands as a pioneer in mental health innovations

- Over 130 projects launched
- Research mapping knowledge on pathology, treatment and patient populations
- People are central to research
- Target group-specific approach(es)
- More knowledge for (mental health care) professionals and researchers
- Related programmes include Quality Funds for Mental Health Care and the Academic Collaborative Centre for Long-Term Mental Health Care

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Women's Health (2024-2030)

Inspiration, implementation and research for good health for women

- Alignment with the National Strategy for Women's Health 2025–2030
- Lived experience plays an important role
- Attention to women's health across multiple programmes

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Prevention of Gambling Addiction (2025-2030)

Limiting harm caused by gambling

- From short-term breakthrough projects to long-term cohort research
- Attention to different target groups
- Also focusing on professionals
- Preventing gambling addiction as the guiding principle

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National Brain Health Plan (2023-2025)

Working together for better brain health

- 38 implementation projects for rapid impact
- 4 knowledge and innovation structures for the exchange of knowledge and data
- Lived experience is central
- Stimulating integrated, interdisciplinary and transdiagnostic collaboration
- Collaboration with the national initiative National Brain Health Plan

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Mental Health Care within the Appropriate Care Framework Programme (2025-2030)

The right care, in the right place

- Value-driven care centred around the patient
- Strong research infrastructure
- Benefits package management within the Health Insurance Act (Zvw)
- Close collaboration with field parties
- Focus on mental health rather than illness
- Preventing escalation

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Suicide Prevention (2021-2026)

Implementation of tools for timely action

- Network-based approach
- Attention to gender and sex differences
- Focus on young people, middle-aged men and young women
- Preventing escalation

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We do this together

Through its various programmes, ZonMw maintains close contact with a wide range of relevant stakeholders in the mental health care field. ZonMw carries out mental health-related assignments from several ministries, primarily the Ministry of Health, Welfare and Sport (VWS), but also the Ministry of Justice and Security (JenV) and the Ministry of the Interior and Kingdom Relations (BZK). In addition, ZonMw programmes are regularly informed, inspired and advised by professional associations and interest groups within mental health care, such as the mental health quintet (MIND, NVVP, NIP, NLggz and V&VN), partners from the social domain, and the VNG support platform. These are important collaborations that build bridges between practice and policy.



Improving access to curative mental health care for adults

It is important that people with mental health problems receive support or care that matches their needs. However, curative mental health care in the Netherlands is under severe pressure, and especially people with complex care needs currently face long waiting times. Through its programmes, ZonMw works to generate more knowledge on improving inflow, throughflow and outflow within mental health care, with the aim of creating impact so that people receive quicker and more fitting treatment. Below, we explain how we do this along several key themes.

Appropriate care

Over the past decade, the **Mental Health Research Programme** has contributed to an intensification of (cost-)effectiveness research in mental health care, thereby improving insight into quality of care and appropriate treatments. Nationwide sharing of these insights is essential. The **Quality Funds for Mental Health Care programme** supports the translation of knowledge and professional insights from the mental health field into quality policy across three themes: implementation of quality standards in mental health care, digital and hybrid care, and cooperation between primary care, the social domain and mental health care.

In addition, [four Impact Leaders](#) have been appointed within the **Mental Health Research Programme** to stimulate the dissemination and connection of knowledge from projects funded over the past decade.



'People who come to us with a mental health problem often face difficulties in other domains as well. The 4D model helps to make these visible. Instead of immediately referring someone [...], we first talk with the patient and then jointly develop a plan to help them regain control.'

[Femkje Jonker](#) – affiliation – Project Leader, Mental Health Research Programme

Through the **Appropriate Care Framework Programme**, ZonMw broadly contributes to the transition towards appropriate care. The programme stimulates the development of knowledge and research infrastructure to support value-driven decisions on which care is insured under the Health Insurance Act (Zvw). This includes mental health care.

Our programmes invest in the mental health care assortment, strengthen the knowledge infrastructure (such as through the **Academic Collaborative Centre for Long-Term Mental Health Care**), and promote (cost-)effectiveness research. In this way, we work towards the right care in the right place, with a focus on factually effective treatments.

Low-threshold support

Low-threshold forms of support can contribute to preventing mental health problems and promoting one's recovery. Expanding the availability of such support requires not only knowledge, but also bringing together the right partners.

Investing in the social base can reduce the growing demand for specialised mental health care. ZonMw facilitates this through the [Social Trials programme](#), which investigates – across multiple disciplines including mental health care – the evidence for the effectiveness of social initiatives. These projects consider not only illness, but also impact on the personal lives of people in vulnerable situations and their relatives.

Expanding and improving digital support options also offers opportunities for accessible support. Together, the **National Brain Health Plan** and the **Mental Health Research Programme** have already funded numerous digital innovations, including hybrid treatment options and digital peer-support groups and e-communities. Digital care is also one of the themes addressed by the **Impact Leaders of the Mental Health Research Programme**.



'My goal is to increase the implementation and impact of digital innovations in mental health care.'

Edwin van Dellen – Psychiatrist, Associate Professor at UMCU and [Impact Leader for Digital Care](#).

Improving waiting times

Waiting times within Dutch mental health care are too long. Multiple interconnected problems play a role, including limited regional collaboration, a growing number of people seeking help, as well as shortages of appropriately trained staff. To understand what works, research is needed. ZonMw facilitates research to help shorten waiting times where possible.

In coordination with the Steering Committee on Accessibility and Waiting Times in Mental Health Care, ZonMw developed the programme **Accelerators in Mental Health Care**. This programme appoints independent accelerators who support regions in optimising accessibility and reducing waiting times. They align their work with Mental Health Networks that have been established in many regions.



'It is important to look beyond inflow into mental health care alone. There are also opportunities to improve organisation, structure and working methods within mental health care itself, and to better support outflow. Integrated and person-centred care is key. At the same time, preventing the development of mental health problems remains crucial. This requires a broad societal approach.'

Jenny Boumans, researcher at the Trimbos Institute, in a news article on the [interim report of the Accelerators programme](#).

International collaboration

Caribbean islands

Health outcomes in the Caribbean part of the Kingdom of the Netherlands lag behind those in the European Netherlands. Through the pilot programme [Caribbean Health Research](#), ZonMw invests in projects addressing urgent health challenges on the islands. The aim is to strengthen health care and knowledge infrastructure in collaboration with local stakeholders, including in the field of mental health.



'It is essential to continue building sustainable health systems on the islands together with local partners.'

Steffen van Heijningen, [ZonMw local liaison in the Caribbean](#).

European collaboration

International cooperation is vital. Why not benefit from knowledge developed by leading institutes abroad?

The European Partnership for [Brain Health](#), of which ZonMw is a partner, takes a holistic approach to biomedical, economic and societal challenges related to brain health and strives for joint, innovative solutions

for improving brain health. This provides a valuable opportunity for the Netherlands to improve prevention, diagnosis and treatment of neurological and mental disorders. Gathering this knowledge is essential for promoting brain health and the well-being of people with these disorders worldwide. As a partner, ZonMw influences these projects and ensures rapid translation of knowledge into Dutch health care practice.



Improving mental health and bottlenecks between systems

The ambition of the Strengthening Agenda Mental Health (AZWA) is *‘to reverse the trend of declining mental health in the Netherlands and to relieve pressure on mental health care.’* With our programmes across different departments, ZonMw contributes to strengthening the mental resilience of the Dutch population and to mapping and improving bottlenecks between systems.

Strengthening mental resilience

A mother with years of financial stress, a child who is online a lot and does not play outside, a middle-aged man who suddenly loses his job. Whose mental resilience is strong enough? From factors that determine and predict this to the right approach per target group; ZonMw invests in more knowledge about strengthening mental resilience.

Many ZonMw programmes have been running for years in the complex field of which mental resilience is a part. Prevention plays an important role here, as well as early intervention and preventing problems from becoming too severe. For example, the **Suicide Prevention programme** investigates which factors in the living environment can help prevent young people from developing suicidal thoughts. The next step is generating more knowledge about protective factors, such as social resources and meaning in life. This also applies to **Prevention of Gambling Addiction**, where research is currently underway to identify [which factors in the living environment can be triggers](#) for which group to then lose themselves in games of chance.

The prevention cluster also works across various programmes on preventing mental health problems among young people who are known to be particularly vulnerable, with topics such as LGBTQIA+ youth, vaping and drug prevention, and social media use. In addition, the ongoing **Prevention Programme** works on a knowledge infrastructure for mental health in the Netherlands through a nationwide knowledge network, implementation research and practice-oriented implementation incentives.

The **National Brain Health Plan programme** focuses specifically on projects that yield results in the short term for people with brain and/or psychological disorders. Such as implementing the Self-Regulation and Recovery Plan (ZHP), which offers people with psychological complaints low-threshold support from lived experience experts in step-by-step strengthening their mental health. – Project '[Self-Regulation and Recovery Plan offers perspective](#)' National Brain Health Plan.



'Yet when people have problems, they often see no other bell to ring than that of the general practitioner. That immediately turns their question into a care question. But mental problems are very often societal problems in a medical jacket.'

Ruth Peetoom, chair of the Dutch Mental Health Association in news item 'Future perspective towards a mentally healthier 2035'

Working together with lived experience experts helps to place the lived world at the centre and thus to include all influential factors at once. The **Action Programme Addressing Misunderstanding** (Grip op Onbegrip) delivers increasing knowledge about what is needed to deploy lived experience effectively. In our other programmes as well, the people concerned play an important role, and this is increasingly also becoming a requirement for individual projects.

The mental resilience of care professionals also deserves attention. For example, through the **Action Programme Addressing Misunderstanding (Grip op Onbegrip)** we create tools for professionals who encounter people with behaviour that is not well understood in their work, without this originally being part of their job. Think of forest rangers and train staff. But clear perspectives for action for mental health professionals are also needed and are being created through the **Mental Health Research Programme and Prevention of Gambling Addiction**, such as revision of guidelines and new knowledge regarding treatments and specific target groups.

Waiting time support

Waiting times in Dutch mental health care are too long. That is why ZonMw facilitates research to shorten waiting times in mental health care where possible. In addition, through various programmes we focus on improved waiting-time support, to prevent psychological complaints from worsening.

With our programmes, we have in recent years focused on the possibilities of low-threshold support. On the one hand to prevent complaints from becoming more severe, such as the ENYOY platform: here young people with mental complaints can work on their mental health in a closed online environment. Or by [providing more insight](#) into gender and sex differences to mental health care practice support workers and clients with depression, anxiety and stress complaints. But there is also more preventive attention to ensure that a situation does not escalate, for example through the deployment of Community GGD officers.



‘When we come to the door, people quite often do want help. They just often do not know where to go. That is why we go to them.’

Veerle Luijkx, community GGD officer in [interview L1](#)

There is therefore a great deal of knowledge and expertise that contributes to waiting-time support, but putting applications into practice often proves challenging. Bringing together the right parties to achieve real impact is often a stumbling block. The **Action Programme Addressing Misunderstanding (Grip op Onbegrip)** and the **National Brain Health Plan programme** explicitly address this with programme lines and funding rounds in which implementation and the (setting up of) collaboration between parties are specifically funded.

To make initiatives for waiting-time support more accessible, they need to be made more visible. One of the Impact Leaders within the **Mental Health Research Programme** focuses specifically on the theme 'preventing escalation,' in order to stimulate the dissemination and connection of knowledge from funded projects.



'I am going to do a deep dive into what Dutch research has already been carried out within ZonMw's Mental Health Research Programme. The insights that this search yields, I want to make available in an accessible way.'

Tim van de Grift, psychiatrist-sexologist and [Impact Leader Preventing Escalation](#)

Transition from youth care to adult mental health care

Research can provide solid knowledge about targeted (preventive) care for children and adolescents to support them in their mental development. Ideally, you ensure that someone has tools in time so that a transition to adult mental health care is not necessary. But that is not always realistic. That is why we also pay attention to the transition phase, for both clients and professionals.

Youth mental health care is a broad field in which many factors play a role. From our Prevention, Youth and Mental Health clusters, much is being done to support children and their parents as well as possible. For example, we focus on prevention of mental health problems among young people who are known to be particularly vulnerable, such as young people who identify as LGBTQIA+. But there is also attention for prevention of substance use, with a focus on vaping and/or drug prevention and attention to the effects of social media use. This problem is not limited to youth and does not suddenly stop when someone turns 18. So there are opportunities here to also focus on the transition to support for adults.

By also paying attention to circumstances that are not directly linked to mental health care, you can prevent young people from having to make long-term use of mental health care. With multiple projects, we focus on a broader perspective to maintain a good overview of the wide scope of factors that influence the mental health of young people. Here too, we are in close contact with parties from the field, such as KJP, RIVM and NJi.



‘Children can also suffer severely when one of the parents has cancer, for example resulting in mood complaints or traumatic stress. You obviously want to prevent that. That is why we are now developing a screening instrument for parents with children aged 0 to 18 years.’

Researcher Marthe Egberts – [IMPACT magazine](#) May issue 2025

Only when you know a group well can you deploy targeted interventions and help them, for example, with the transition from youth to adulthood. A [large-scale cohort study](#) is therefore underway to identify early addiction problems.

People should no longer be able to get lost between different laws, rules and government services. [Strengthening cooperation](#) between adult mental health care and youth care yields a great deal, but is also complex. Insights and lessons from six promising pilots have been bundled in the recently published report Connecting, Changing, Anchoring by the Verwey-Jonker Institute.

Ongoing support ('waakvlamondersteuning')

Preventing escalation or relapse. Truly seeing someone, learning to think beyond frameworks. Making use of lived experience and low-threshold support. Working across domains. These are important elements of our programmes when it comes to keeping a finger on the pulse. In this way, we contribute to people being able to participate (and continue to participate) in society as well and as sustainably as possible after completion of a treatment or trajectory.



'Unexplained behaviour is an expression of what is happening in society. We keep looking at the people who show the behaviour, but often forget the system in which this behaviour has arisen.'

[Violet Petit – researcher at the Erasmus School of Health Policy & Management](#)

To prevent escalation and relapse, it is important to align with people's personal living worlds and needs. Care and support therefore often come from multiple domains. This requires a domain-crossing way of thinking and working. Although this is complex in practice, through the **Action Programme Addressing Misunderstanding (Grip op Onbegrip)** we are gaining more and more knowledge about how to do this in a good and efficient way. Police, mental health care, municipalities and lived experience experts work together to provide person-centred care and support. The deployment of lived experience is extremely valuable in this. They can bridge the system world and the lived world.



'Each region has its own structures, history, needs and dynamics, so everything has to be tailored. This takes time, but it can work.'

Rianne Rietveld, Senior Programme Manager Action Programme Grip op Onbegrip

For effective ongoing support, knowledge is needed, such as about specific target groups – young women function differently than middle-aged men. And the variety of reasons why a situation can worsen – psychological suffering, existential (in)security, mental resilience, etc. Insights from our **Mental Health Research Programme** and the programmes **Suicide Prevention** and **Prevention of Gambling Addiction** can help with this. An example is the development of prediction tools using AI or big data, but also knowledge about the deployment of lived experience – something ZonMw has been committed to for many years through almost all mental health programmes.

From the **Appropriate Care Framework Programme**, there is also attention for organising care around the patient and the right care in the right place. In a consortium yet to be funded, cooperation between mental health professionals and primary care is being stimulated. The idea is that care, where possible, is provided lower in the care chain, in more regionally organised structures around the patient.

Women's health

Women live longer, but spend fewer years in good health than men. That is why ZonMw is committed to improving the health of women: physically, mentally and socially. We do this, among other things, by stimulating research on women's mental health. By implementing existing knowledge in policy and practice. By bringing parties together.

Autism is often recognised late or not at all in women and girls. It manifests differently than in boys and men, who often show characteristics described in guidelines. Knowledge from our research programmes can help mental health professionals in making the correct diagnosis.

Mental problems can have a different appearance per gender and life phase, but we still know very little about this. There is still a long way to go to adequately map care cases. And to find adequate responses. With our programmes, we map care cases and find the answers. Think of our **Mental Health Research Programme**, within which we can research which factors have a strengthening effect on the mental resilience of young women.

Physical, mental and social aspects influence women's health in conjunction with each other. They cannot be seen separately. But they are sometimes studied separately. That is why our programmes work closely together to bundle outputs and establish and stimulate connections. Unaddressed topics, such as the risk of gambling addiction among women and the number of suicide attempts among young women, thus come to light and offer opportunities for further research.



Women often live with unexplained complaints for a long time. It takes years before the correct diagnosis is made. Many women with unexplained complaints end up with a psychologist, while there is actually a physical cause of these complaints. With the [knowledge programme Women-Specific Health](#), we therefore work on improving the diagnostics and treatment of women-specific conditions. We stimulate network formation so that experts in women's mental health increasingly collaborate with experts in women's physical health. In this way, we can better provide women with appropriate care.

In addition, ZonMw works together with the Ministry of Health, Welfare and Sport on the elaboration of the **National Strategy Women's Health 2025–2030**. We consider it important that more attention is paid to women's mental health. Together with the field, we are building a work agenda to improve women's health through concrete actions. We view women as a whole, across all stages of life. [During the Women's Health working conference, we set the transformation of care for women in motion together with the ministry.](#)

To truly align with what different women need, [Bussemaker hopes](#) to connect to the movement of appropriate care. *'Because actually, that is also what it is about: appropriate care must also be appropriate for women. And ZonMw of course has a very large [Appropriate Care framework programme](#), so that is low-hanging fruit.'*



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