Report on the Follow-up to the Regional Implementation Strategy (RIS) of the Madrid International Plan of Action on Ageing (MIPAA) in Norway

General Information

Country Name: Norway

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Methodology

Quantitative information in this paper is mainly based on available national statistics & surveys from Statistics Norway, and also from other public documentation and research reports.

Qualitative information in this paper is mainly based on available public documentation in Governmental Documents from Ministries and National Agencies within the fields of labour market, social, health and family & gender policies.
Executive Summary

National ageing situation

The situation in Norway 2010/2011 can be summarized very briefly as follows:

- Longevity: 83 years for women and 79 years for men.
- High labour force participation and low unemployment, but high prevalence of disability pensioners
- Egalitarian income distribution and low prevalence of poverty
- Good health and care situation for most of the elderly persons
- Most seniors and elderly people have an active life and good contact with family and friends
- Elderly persons’ participation in political elections are high, and they have quite high representativeness in municipal politics.

Major achievements since 2007

- Slightly increasing labour force participation and real retirement age among seniors
- Increased pensions for most pensioners, including the public minimum pensions
- A reformed Old Age Pension system is gradually being implemented from 2011.
- A national Long term Health Care Plan 2010-2015 as been approved by the Parliament, and are under implementation
- A national Health Services Coordination reform has been discussed by the Parliament, and implementation of the plan is under preparation
- A continual process of improvements in order to ease the combination of work and family life and care is going on, and several reforms implemented

Future challenges

- Continue the gradual implementation of the reformed Old Age Pension System, and make it work as intended.
- To prevent and reduce the high incidence and prevalence of disability pensioners. Implement the planned reforming of the public Disability Pension/ Benefit System
- Successful fulfilment of the implementation of the Long term Health Care Plan
- Successful implementation of the national Health Services Coordination reform
- Follow up the proposals of the Public Committee on gender equality policies

National ageing situation

Demography

Norway, like many other European has an ageing population. The reasons are increasing longevity and the “baby boom” cohorts after the Second World War. However, due to a relatively high fertility rate and an increasing net immigration rate, the ratio of elderly (67+)
to the working age population has not and is not expected to increase that much in Norway as compared to many other European countries.

Some main demographic indicators (2010/2011)^1:

- Population: app. 5 million inhabitants. Forecasts: app 7 million inhabitants in 2060
- Fertility rate: 1.95 children per woman
- Longevity: 83 years for women and 79 years for men
- Net immigration: app. 40,000 persons in 2010 (0.8 per cent of the population)
  The numbers are supposed to decline gradually to about 10,000 a year in 2030.

The “elderly/working age ratio” (67+/20-66) has been quite stable: App. 20 per cent during the period of 1970-2015, but is estimated to increase to app. 30 per cent in 2030 and 40 per cent in 2060.

The “elderly + children and youth / working age ratio” (0-20 and 67+/20-66) has decreased from 78 per cent in 1970 to 62 per cent in 2010, and is estimated to increase to app. 70 per cent in 2030 and app. 80 per cent in 2060.

Labour force participation and unemployment

The labour force participation is high in Norway, both in the population as a whole, among both men and women, and also among senior citizens. The unemployment rates are low.

Some main labour market indicators (2010/2011):

- Labour force participation rate 15-74 years old: 72 per cent
- “ “ “ “ 25-66 years old: 81 ½ per cent
- “ “ “ “ 55-66 years old: 65 per cent
- “ “ “ “ “ “ men: 69 per cent
- “ “ “ “ “ “ women: 60 per cent
- Unemployment rate (15-74): 3 ½ per cent (of the labour force, men and women)

The employment rate of women aged 55-66 has increased steadily from app. 50 per cent in the early 1990-ies to 60 per cent in 2010.
The employment rate of men aged 55-66 has increased from 66 per cent in the early 1990-ies to 69 per cent in 2010. See also section 3, under commitment no 5.

About 50 per cent of women 55-66 years old have part-time (paid) work. More and more women work full-time however, especially among younger woman. Senior and elderly women still often have part-time work.

On the other hand: A lot of persons in working-age receive social insurance benefits due to sickness / reduced health: Close to 20 per cent of the population aged 18-66, of which 11 per cent of the population is on disability benefits. The majority of disability pensioners are aged 50-66. App. 40 per cent of new old age pensioners 67 years old “comes directly from” a previous disability pension.

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^1 Source: Statistics Norway. Web: www.ssb.no/english
Income and income distribution
Norway is a quite egalitarian country. The personal household income is relative high, compared to most other European countries, and the income distribution is quite fair. Poverty is not very frequent among pensioners, even when measured in relative terms. Most seniors and elderly are quite well off economically. Some main indicators (Statistics Norway 2009):

- **Median after tax household income per consumption unit**
  - All households: 240,000 NOK
  - Old-age pensioners: 211,000 NOK
  - Disability pensioners: 209,000 NOK
  - Single pensioners with minimum state pension: 160,000 NOK

- **Per cent of persons in households with persistent low income 2007-2009**

<table>
<thead>
<tr>
<th>Income lower than</th>
<th>50%</th>
<th>and 60% of median</th>
</tr>
</thead>
<tbody>
<tr>
<td>All households</td>
<td>4%</td>
<td>8%</td>
</tr>
<tr>
<td>Old age pensioners</td>
<td>1%</td>
<td>16%</td>
</tr>
<tr>
<td>Disability pensioners</td>
<td>1%</td>
<td>8%</td>
</tr>
<tr>
<td>Families with children, 2 adult persons</td>
<td>5%</td>
<td>7%</td>
</tr>
<tr>
<td>“ ” “ ” 1 adult person</td>
<td>8%</td>
<td>16%</td>
</tr>
</tbody>
</table>

The reason why so many old age pensioners have income lower than 60 per cent of the median income compared to 50 per cent of median income, is that the minimum pension level within the National Insurance Scheme (NIS) is close below the 60 per cent threshold. A lot of women have minimum pensions.

Health and care
Elderly persons are expected to have rather many remaining years to live, and to live longer. The (statistical) expected remaining years to live on different ages are (2009):

<table>
<thead>
<tr>
<th>Age</th>
<th>Women remaining years</th>
<th>Men remaining years</th>
</tr>
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<tbody>
<tr>
<td>50</td>
<td>34.3</td>
<td>30.7</td>
</tr>
<tr>
<td>60</td>
<td>25.2</td>
<td>21.9</td>
</tr>
<tr>
<td>70</td>
<td>16.8</td>
<td>14.1</td>
</tr>
<tr>
<td>80</td>
<td>9.4</td>
<td>7.7</td>
</tr>
</tbody>
</table>

Most elderly people in Norway have a good health condition and rather good access to health and care services, when needed. About 3 of 4 persons aged between 50-80 years old report that their general health situation is good or very good. More than 50 per cent of elderly aged 80+ say the same. 7 of 10 men and 8 of 10 women aged 50-66 years old say that they are exercising or training regularly, and 65 per cent of men and 60 per cent of women aged 67+ say the same.

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2 Consumption units, OECD-scale: First adult value 1.0 and 0.7 for any other adult, and 0.5 for each child 0-16 years old.
3 1 EUR = 7.75 NOK Nov. 2011
4 Minimum pension from the National Insurance Scheme (NIS)
5 Household income less than 50 / 60 per cent of median income during the last three years respectively
6 Statistics Norway. Seniors in Norway
At the same time 7 of 10 persons 50-66 years old have a permanent health reduction, and about 8 of 10 persons aged 67+ have the same. 4 out of 10 seniors 50+ say they have diseases that influence their daily life. ¼ of men 67+ and 1/3 of women 67+ say they have reduced physical mobility, but this is improving. Heart- and circular diseases and muscular & skeleton diseases are the most frequent diseases. Cancer hurts men aged 60+ more often than it hurts women 60+. Prostate cancer is most frequent among elderly men, and breast cancer is most frequent among elderly women. About 50 per cent of elderly persons 80+ needs daily help (men 40% and women 60%), and 8 per cent (of 80+’s) need daily care (men 4% women 10%)

**Social contact and social activity**

About 20 per cent of male seniors and 40 per cent of female seniors 67-79 years old live alone. Among elderly persons aged 80+, app. 40 per cent of men and app. 70 per cent of women live alone.

Most Norwegian seniors have an active life. They have often contact with family members: 2/3 of all seniors aged 50+ have weekly contact with their family. Although they don’t meet friends as often as younger adults, six of ten seniors have weekly contact with friends.

Most elderly people have family and good friends, and regularly contact with other people. But quite a lot are in lack of such social contact: 9 per cent of all persons 67 years + say that they miss a close friend, and 14 per cent say that they have little contact with friends. The corresponding figures for all adult persons younger than 67 years is that 5 per cent miss a close friend, and 7 per cent have little contact with friends.7

**Political activity**

Elderly persons’ participation at political elections are very high (84% 67-80 years old), but decreases a little when they have passed 80 years old. There are no representatives older than 66 years old in the Parliament. In the municipalities 40 % of the representatives were 50-66 years old in 2007 (compared to app 28 % of the population,) and app 5% of the representatives were 67-80 years old (compared to 12% of the population.

**Review and Appraisal of National Actions to fulfil Commitments of UNECE**

**MIPAA/RIS**

**RIS Commitment 1:**

*To mainstream ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages*

Mainstreaming, none-discrimination and sector responsibility are the main principles in all elements and sectors of the society. The *Anti-Discrimination Act* was set into force 1 January 2006 with the aim to promote equality, ensure equal opportunities and rights and prevent discrimination based on ethnicity,

7 Statistics Norway. Surveys of Living Conditions
national origin, descent, religion or belief in all areas of society, except for family life and personal relationships.

_The Working Environment Act_ also has regulations that forbid discrimination of any kind in all kinds of working life, including discrimination due to age.

_The Equality and Anti-Discrimination Ombud_ (EDO) was established 1 January 2006, built on different previous institutions that had equality and equal treatment as their goals. EDO makes independent statements and provides advice and guidance concerning equality and anti-discrimination of any kind and within a broad set of laws and regulations, including the Anti-Discrimination Act and the Working Environment Act.

_The Norwegian Equality Tribunal_ (ET) was also established 1 January 2006, and enforces various Norwegian equality and anti-discrimination acts. The ET handles concrete complaint cases and makes recommendations in cases of equal treatment and discrimination. The rulings of the Tribunal are administratively binding. The Tribunal is easily accessible to the general public and its services are free of charge. The members of the tribunal are appointed by the Government. Most of them are of the legal profession.

**RIS Commitment 2: To ensure full integration and participation of older persons in society**

_Governmental White Paper no 6 (2006-2007) to the Storting (Parliament)_ presented a broad and holistic approach to senior policies in Norway. The main issues were inclusion, participation and active ageing in all important arenas in the society. Labour market inclusion and participation policies were especially focused.

_The Centre for Senior Policy_ (SSP) started its work in 1969, as a national information-, coordination- and cooperation centre for senior policies in Norway. It is now financed by the Ministry of Labour. Representatives from the social partners constitute the board of SSP. SSP contributes to coordination and cooperation on senior policy issues between governmental agencies, the social partners, enterprises and human relation- and educational institutions. SSP can also initiate and support research on senior issues, and serves as an “information bank” on such issues.

_The National Council for Senior Citizens_ (SSR) is an advisory body for public authorities and national institutions. It is appointed by the Government and consists of 15 members. The present Council was appointed in 2010 and will serve until 2013. The council focuses on issues concerning living conditions for senior citizens (50 +) and their opportunities to take part in the working life and society at large. Encouraging political participation and active participation in other sides of the society are also given priority by the SSR, both on national, regional and local levels.

_In the Fiscal Budget for 2010 / Ministry of Labour_, the Government presented a broad status and future plans for a holistic and active senior policy. Inclusion and active participation were the main themes, covering labour market policies, pension, housing, communication, culture, health and care policies.
The Tripartite Cooperation on Inclusive Workplaces is an agreement and cooperation between the Government and the Social Partners, aimed at 1) reducing sickness absence, 2) inclusion of the disabled in work and 3) increasing of the real pension age. The first agreement was made in 2001, and the present agreement in 2010, is for the period up to 2013.

**RIS Commitment 3: To promote equitable and sustainable growth in response to population ageing**

**The Fiscal Policy Guidelines**

The Governmental fiscal guidelines, introduced in 2001, ensure a predictable and prudent phasing-in of public petroleum revenues into the mainland economy. Specifically:

- Petroleum revenues shall be gradually phased into the economy in line with the expected real return on the Governmental Fund Global, estimated at 4 per cent a year.
- Fluctuations in economic activity shall be smooth out in order to ensure high capacity utilization and low unemployment

This is also an element of the Generational Accounting which aims to balance long term, future fiscal expenditure and taxation. The market value of the Governmental (Pension) Fund Global is estimated to 3250 Billion NOK in 2011, which equals about 120 per cent of GDP this year. The most important thing, however, is to aim the economic policy as well as the labour market policy and social policy to achieve high labour force participation and low unemployment.

**Increasing pensions**

The pension incomes in Norway are increasing, mainly due to the following factors:

- Yearly indexation of public pensions in line with increasing wages and prices
- The legal minimum pension levels within the NIS has been increased substantially (first pillar pensions). The NIS minimum pension for a single person is app. 157500 NOK (app. 20000 EUR) a year from 1 January 2011.
- Each new age cohorts of new NIS pensioners have obtained higher pension assets due to previous income from work (second pillar pensions)
- More and more people are covered by supplementary pension schemes from work / employers (3rd pillar), and also additional individual private pensions (4th pillar).

**RIS Commitment 4:**

*To adjust social protection systems in response to demographic changes and their social and economic consequences*

**Old Age Pension Reform**

In a White Paper forwarded to the Storting (Parliament) in February 2009 (Ot.prp. no. 37 (2008–2009)), the Government proposed a comprehensive Old Age Pension Reform within the National Insurance Scheme (NIS). The act was passed in May 2009, and gradually implemented from 2011.
Some main characteristics of the former NIS pension scheme:

- The NIS pension system consisted of three main elements:
  a. An universal, flat-rate basic pension to all pensioners according to the number of years of residence in Norway, and independent of previous work income and contributions.
  b. A supplementary, income-tested benefit. Together with the basic pension (a) these two elements together sum up to a guaranteed minimum income pension
  c. A mandatory and universal income-related pension, calculated mainly as follows:

- A 40 year earning period (with income above a certain threshold) was required in order to be entitled to a full pension. Any earning in excess of 40 years did not result in increased pension.
- Pension earnings up to a certain income ceiling (app. 150 % of median work income)
- Old age pensions were calculated on the basis of the 20 years in which the pensioner had his or her highest income (“best years”).
- The pensionable age was 67, with no possibility for early retirement within the NIS.

Some main characteristics of the new NIS old age pension scheme:

- The NIS old age pensions will be based on lifelong pension earning and offer flexible retirement from 62 years of age – a flexibility based on cost-neutral principles, through the introduction of a life expectancy based adjustment ratio to the calculation of pensions.
- The system of pension earning in the new old age pension scheme is designed in such a way that the individual person’s pension capital is built up through income from work between the ages of 13 and 75. All years are taken into account.
- The pension may also be increased as a result of unpaid care for children and old family members, service as a conscript or receipt of NIS unemployment or sickness absence allowances etc.
- The individual persons will each year increase their pension capital corresponding to 18 per cent of their pensionable income, up to a ceiling of approximately 1.5 times the median wage income level.
- A person may draw his/her pension from the age of 62, either fully or partially. He/she may also have (continued) income from work at the same time, without deductions in his/her pensions.

Supplementary public and private pensions are also being adjusted to the principles of this NIS old age pension reform.

Reforming Disability Benefits
In May 2011, a Government Bill on reformed Benefits and Pensions to Disabled persons was presented for the Parliament. The reform proposals are to a large extent in line with NIS Old Age Pensions Reform. The new NIS disability scheme will be separated from the old age pension scheme and instead follow the calculation principles of the new Work Assessment Allowance in the NIS:
The disability benefit level will be \( \frac{2}{3} \) of previous work income, up to a certain income ceiling, app. 150 per cent of the median income level.

Previous work income is calculated as the average income in the three best of the last five years prior to the contingency.

The disability benefit will be taxed as wage income.

Minimum benefits should be increased to compensate for higher taxation.

Persons who are born disabled or who have become disabled before the age of 26, will (as before) be guaranteed benefits at a certain level.

The present income-tested supplement for persons supporting children younger than 18 years old will not changed, but the supplement to disabled persons supporting a spouse should not be paid to new recipients of the reformed disability benefit.

The reformed Disability Benefit system is proposed to be implemented from 2015.

**Work, Welfare and Labour Inclusion Reform**

In 2006, the Government forwarded a White Paper to the Parliament on more socially inclusive labour market policies, aimed at the big and increasing number of persons outside or at the margin of the labour market due to health- and/or social disadvantages. The reforms are not aimed at specific age groups, but they are important for seniors as well as younger persons with health or social problems and reduced work capacities or abilities. The policies were also aimed at improved, more effective and coordinated strategies, measures and methods for the New Employment and Welfare Administration (NAV) – see below.

The Parliament approved of the plan in 2007. The Ministry has thereafter implemented the plan through legislation, budgets and administration during the years of 2008-2011. The main strategies and reforms proposed are the following:

- Preventive and facilitative measures at the workplaces
- New and better coordinated work-oriented measures for individuals
- Reformed intermediate income security: Work Assessment Allowance
  A new, merged intermediate income security benefit has replaced different intermediate vocational, medical and disability income security benefits in the NIS. The compensation is \( \frac{2}{3} \) of the previous wages, within minimum and maximum benefit levels.
- A new Qualification Programme and - Benefit outside the NIS.
  Aimed at job-seekers who currently have significantly reduced working and earning capacity, minor previous work experience, and no or minor acquired social insurance rights within the NIS.
- Supplementary measures for handicapped persons
- Supplementary measures for the immigrant population
- Other work-related measures to combat poverty

**New Employment and Welfare Administration (“NAV”)**

In order to develop improved and more labour-effective and user-oriented coordination of benefits, services and administrative efforts, the Parliament decided in 2006 to merge the Public Employment Services, the National Insurance Services and the Social Assistance Offices.

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8 See enclosed paper “Norwegian Social Security and Labour Market Inclusion Policies, point 7 pages 7-9.”
The three main goals for the reform are:

- Increase the transmission of people from benefits to work
- More user-oriented employment and welfare services
- A more effective administration

A new, merged Employment and Welfare Administration (NAV) has been gradually implemented during the years 2006–2009 in all (430) municipalities, (19) counties and centrally, at the national level.

**RIS Commitment 5:**
To enable labour markets to respond to the economic and social consequences of population ageing

**Inclusive Workplaces – a tripartite Agreement (IWA)**
In 2001, the Government and the social partners signed an agreement to cooperate on developing a more socially inclusive labour market policy at the workplaces (Inclusive Workplace Agreement –IWA) for the period of 2001–2005. The specific objectives of this agreement were to:

- Reduce sickness absence by at least 20 per cent
- Increase the employment of persons with disabilities
- Raise the real (average) retirement age

The agreement was for a period of four years, and it was renewed in 2006 for the period 2006–2009, and in 2010 for the period 2010–2013. The labour force participation rate among persons aged 50 + is relatively high in Norway, compared to most other countries, and it is slightly increasing. The average retirement age for a 50 years old worker has increased from 62 ½ years of age in 1999 to 64 years of age in 2009, but decreased to 63 ½ years in 2010.

Reference also to the old age pension reforms mentioned under RIS commitment 4.

**RIS Commitment 6:**
To promote lifelong learning and adapt the educational system in order to meet the changing economic, social and demographic conditions

“**Vox**” - Norwegian Agency for Lifelong Learning, is an agency under the Ministry of Education and Research. The main goal is to promote active citizenship, improving employability and increasing participation in learning. Vox manages governmental subsidies for the operational costs of study associations, distance learning institutions and study centres, as well as financial support for pedagogical development of lifelong learning. They also have a support program for promoting basic learning in firms. Seniors and elderly persons are encouraged to participate, and to an increasing extent they do so. Vox is also engaged within the tripartite cooperation on more inclusive workplaces, see the report to commitment no 5.
RIS Commitment 7:  
To strive to ensure quality of live at all ages and maintain independent living including health and well-being

The aim of the current Norwegian “sector responsibility principle” is to make all parts of the society accessible for everybody and to mainstream policies and services in order to give equal possibilities for everybody, independent of age, sex, income, residence, origin of birth etc. The aim is also to combat any types of discrimination due to the same set of backgrounds.

Housing
The Norwegian State Housing Bank provides different kinds of support schemes to make housing more accessible. The support schemes are not especially aimed at elderly people, but elderly and disabled persons will benefit from the different support schemes. For instance, a new support scheme for installation of elevators in existing buildings has been implemented from 2008.

Communications
All kinds of communications should also be universally designed, so that they should be accessible for everybody. Additional financial resources are aimed at fulfilling this aim. There are special transportation support schemes for persons who cannot use, or who have difficulties using, public transportation, mainly elderly and disabled people.

Culture
Cultural activities should also be made accessible for everybody, including elderly people. The Ministry of Culture have introduced certain initiatives to promote cultural accessibility and participation among elderly people, for instance “a senior cultural activity- and participation campaign aimed at old-age people.”

Primary Health Services
The primary health services are the responsibility of the (430) municipalities. The specialist and hospital health services are owned and provided by state enterprises.

The municipal health authorities shall provide: General medical services, including a general practitioner scheme, emergency first aid medical services, long term care, home care service and nursing homes, primary mental health services and also physiotherapy and midwife services. A new Municipal Health and Care Service Act has been adopted by the Parliament and will come into force 1 January 2012. Patient rights in the Regular General Practitioner (RGP) Scheme are:

"Any resident in a Norwegian municipality has the right to be registered with an RGP who has entered into an RGP contract with the local authorities. The same right has also asylum seekers and their families who are members of the Norwegian Insurance Scheme.”

Long term Health Care
The Government has compiled a Care Plan with definitive measures up to 2015. Care Plan 2015 requires long term planning of investments in buildings, personnel efforts, skills development, educational capacity, and adapting the physical and social surroundings. Planning for the future must take place both at the municipal level as well as at the national
level. And the planning requires a close interaction between national authorities and the municipal sector.

The Care Plan 2015 has four main elements:
1) Increased number of health personnel
2) Strengthening the competence
3) Investment grant for nursing homes and community care housing
4) Dementia Plan

Health Services Coordination Reform
Equal access to good and well balanced health and care services is one of the most important underpinnings of Norway’s welfare system. The main strategies in the Coordination Reform are organizational development of services and encouraging the professions to cooperate better and provide services in accordance with political objectives.

The major challenges are:
- Patients’ needs for coordinated services are not being sufficiently met.
- There is too weak initiative aimed at limiting and preventing disease.
- Ageing population and the changing range of illnesses.

The key steps recommended in the Coordination Reform for dealing with the challenges:
- A clearer role for the patient
- A new and strengthened municipal role emphasizing prevention, early intervention, low-threshold and initiatives and interdisciplinary measures
- Introduction of municipal co-funding of the specialist health services
- Improving the quality of the specialist health services
- More clearly defined priorities


Public Supervision of Health and Social Services
The public supervision is about ensuring that health and social services are provided in accordance with national acts and regulations. Methods used are:
- Area surveillance (an overall perspective)
- Planned supervision of services (municipalities, nursing homes, hospitals)
- Individual cases of deficiencies in services

The main actor in performing the public supervision is the Norwegian Board of Health, a subordinate institution under the Norwegian Ministry of Health and Care Services. In cooperation with the County Governors’ offices, the Board of Health also monitors the primary health and social services. The supervision consists of both quantitative monitoring and control of the quality of performance.

See also the attached paper “Norwegian Social Security and Labour Market Inclusion Policies” point 12 pages 16-19 Health Services.
RIS Commitment 8: To mainstream a gender approach in an ageing society

Gender mainstreaming in Norway

Since the late 1980s, Norway has implemented action programs to support the incorporation of gender equality as an integral element of all Government policy areas and at all levels of public administration.

The Gender Equality Act, §1a states a duty for both public and private sector to promote gender equality and to report on the equality activities. § 1a is:

- Applicable for public and private sector, NGOs, employee- and employers organizations
- Reflected in the Act relating to annual accounts
- Impose active, targeted and systematic efforts to promote gender equality:
  - Employers within their enterprise
  - Employee and employer organizations in their spheres of activity.
  - Public authorities in all sectors of society

The Equality and Anti-discrimination Ombud enforces the Gender Equality Act and provides information, support and guidance for the promotion of equal opportunity and the combat of discrimination.

Gender mainstreaming – at the governmental level

At the government level gender mainstreaming means that each ministry is responsible for matters relating to gender equality in its own area of responsibility. The Ministry of Children, Equality and Social Inclusion (MCESI) is the coordinating Ministry.

Gender mainstreaming - at local and regional level

The county governors are mandated with the obligation to follow up the municipalities on their work to promote equality by providing guidance. However, the county governors have so far not given this task high priority.

Local Gender Equality Committees have been established at municipal level since 1975 in order to promote equality at the municipal level and to serve as a means of communication between individuals, organizations and the municipalities. Several evaluation studies of these local committees tend to confirm that, with a few exceptions, they tend to be without much influence. Many municipalities have since 1995 closed down their gender equality committees.

Gender mainstreaming do however attracts interest at local and regional levels. Projects have focused on mainstreaming a gender perspective in local and regional planning, and gender based assessment as a tool for better targeting and user-friendliness in service production and delivery. Guidelines and brochures have been issued, and action plans have been adopted that include concrete goals and measures for action.

Regional Centers for Equality and Diversity

Since 2007 the Ministry (MCESI) has financially supported 3 regional centers for equality and diversity, geographic positioned in the north/middle, east and south of Norway. The
centers are mandated with following up local and regional municipalities and companies by providing guidance, training and exchanges of experience. They provide expertise on practical measures in their respective regions. The regional centers are to provide information on and promote compliance with the duty to take action and report under the Gender Equality Act, the Anti-Discrimination Act and the Anti-Discrimination and Accessibility Act.

Public committee on the future of gender equality policies
The government has appointed a public committee who is to report on the future of Norwegian gender equality policy, with reference to life stages, ethnicity and class. The committee’s mandate integrates the gender perspective with a perspective on life stages or age. The committee has also been asked to deliver a first report on the organizational framework of the gender equality policy. When the main report of the committee is expected to be delivered in August 2012 the MCESI will initiate the work with a new Governmental White Paper for the Parliament on Norwegian gender equality policy.

RIS Commitment 9:
To support families who provide care for older persons and promote intergenerational and intra-generational solidarity among their members

An important element of the Norwegian inclusion policies is to provide the combination of working life, family life and care for both children as well other family members and old parents. Individual rights to- and full coverage of kindergartens, extended and flexible birth leave with income compensation, flexible working time arrangements are elements of such combined labor-, social and family policies.

Further elements of such a flexibility are also the right to a flexible number of working hours per week, the right to be exempted from working at night, the right to a reduced number of working hours if necessary for health-, social or other weighty welfare reasons, and the right to a reduced number of working hours per week at the age of 62 (in all cases provided it can be arranged without major inconvenience to the undertaking), and also the right to the right to reduced number of working hours for the care of small children. These elements are regulated as individual rights in the Labor Environment Act (LEA).

In addition income compensated free from work when caring for sick children, as well as obtaining of pension rights during periods of unpaid care for children and sick family members are also individual rights according to the LEA and the National Insurance System (NIS). There are also regulation stipulating a right to income compensated leave to take care of close relatives at home in the terminal stage up to 60 days, and to unpaid leave for up to 10 days to provide the necessary care for parents, spouses etc.

RIS Commitment 10:
To promote the implementation and follow-up of the regional implementation strategy through regional cooperation

In June 2010 Centre for Senior Policy (SSP) in cooperation with the Norwegian Research Council hosted an international conference in Oslo on older workers in a sustainable society. A wide range of international researchers and academics gave a lot of presentations. A book:
“Older Workers in a Sustainable Society” (Richard Ennals and Robert H. Salomon, eds.) was published on basis of the conference and presentations.9

November 15-16, 2011 in Hamburg the Baltic Sea Network (BSLN) arranged a (final) conference – Working together for sustainable labor markets. The conference gathers representatives of social partners as well as government officials and labor market experts in the Baltic Sea region.  [www.bslabour.net](http://www.bslabour.net)

Norway, chairing the Nordic Council of Ministers in 2012, intends to focus on labor, welfare and social policies, including active ageing and solidarity between generations. Part of the preliminary planning is to arrange a Nordic conference on seniors and the labor market Wednesday 26th September 2012 in Bergen, Norway.

**Conclusions and Priorities for the Future**

Inclusion and participation of all citizens are embodied important elements of almost all types of policies in Norway. High workforce participation and low unemployment as well as fair distribution of income and welfare are given the highest priorities, together with economic policies aimed at a balanced and sustainable development both in the short and long run. Active ageing, flexibility of opportunities and individual preferences, high labour force participation and good incomes, welfare and services for seniors and elderly are important aims and elements of these policies.

The policies consist of both continuing developments as well as a lot of reforms that have been implemented during the last 4-5 years, and a lot of reforms are still being implemented. A challenge is therefore to ensure good implementation of the reforms, good following-up as well as monitoring and evaluating the reforms and their implementation, outcomes and effects. This is important for continuously developments and improvements. Special attention or challenges might be to ensure that the pension reforms and health services reforms will be good implemented and contribute to fulfilment of the desired aims and goals.

The present global economic crises also make a curtain of uncertainty, instability and corresponding challenges also for Norway, although the country performs quite well through the crisis so far. The present crisis must not be allowed to lead to exclusion from the labour force of neither seniors, nor youth nor persons with reduced health or work capacity.

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