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NATIONAL REPORT

Submitted by the Government of Norway

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* The Regional Population Meeting is in the work programme of the Conference of European Statisticians.

(1) *Perception and policy related to the family, fertility and reproductive health*

Cohabitation

There is a lack of Norwegian data on the evolution of cohabitation. There are, however, reasonably comparable interview data on this issue, with women in the age group of 20-44, covering the last two decades. From 1977 to 1987, the proportion of cohabitants in this age group rose from five to 18 per cent. From 1987 to 1997, it increased to 24 per cent.

Cohabitation has become the most common way of sharing a household for couples under 30 years of age. According to estimates, a total of 225 000 couples live together as cohabitants, and 77,000 of them have children together. The majority of those who marry lived together as cohabitants first.

In 1996 the Norwegian Government appointed a committee to study the problems raised by cohabitation as regards rights, benefits and obligations. The background for the establishment of the committee was the unclear practices prevalent in a great many areas of public and civil law in respect of cohabitant households. The committee is to submit its recommendation by 1 May 1999.

Children born out of wedlock

About 50 per cent of all children are born out of wedlock. Almost all births that are registered as out of wedlock are children of cohabitant parents. Forty per cent of the children born in 1996 were the offspring of cohabitants. Ten per cent of the children were born to mothers who lived with neither a spouse nor a cohabitant. The proportion of ten per cent has remained stable since the mid-1970s.

Fertility

In the early 1980s, the birth rate in Norway was low and slightly declining. Later in the decade, however, the overall fertility rate rose to 1.89 in 1989, since when it has varied by only a few hundredths. In 1997, a total of 59,800 children was born. This represents an equivalent to an overall fertility rate of 1.86 children per woman. In a European context, this is very high, and among the larger countries only Ireland has the same fertility rate.

Labour force participation and care of children

Today, 80 per cent of married and cohabiting women with children under 16 years of age are economically active. Labour force participation increases as the youngest child grows older. 74 per cent of the mothers, whose youngest child is less than two years old, are nevertheless, gainfully employed. This compares with 47 per cent of such mothers being employed in 1980. A number of factors have led to this trend, including women's desire and demand for equality in social and family life.

The priorities of the Government are to concentrate on family and gender equality policies. These policies are aimed at enabling both men and women to combine labour force participation with the care of their children and the creation of stable conditions for development of children. Maternity leave is compensated for one year with 80 per cent of the

regular salary. Alternatively, 42 weeks with full pay may be given. Four weeks of the maternity leave must be taken by the father or be forfeited. Seven out of ten fathers make use of this opportunity, and about 10 per cent stay at home for a longer period of time. Steps have been taken to enable the parents of very young children to reduce the number of working hours and take one year of unpaid leave of absence each in addition to maternity leave. The number of day care centres has increased steadily, and 60 per cent of children aged 1-5 now attend a day care centre. There has also been a significant increase in day care facilities for the youngest schoolchildren.

A programme for financial support to families with one-year old children was introduced in August 1998 for in order to give families with very young children more time to take care of their children themselves. Two-year-olds will be included in this programme from January 1999. The programme will provide parents with a financial support of NOK 3,000 (USD 400) per month, provided the child does not attend a public day care centre. If the child attends a day care centre on a part-time basis, the cash support will be reduced proportionately.

Evolution of the family

After a continuous increase in the number of divorces over several decades, the numbers are now declining to a certain extent. The statistics have not shown such low levels since 1989. In 1997, divorce affected 10 300 children. To this figure must be added the children whose cohabiting parents split up, for whom there are no statistics. Sample surveys indicate that there is a greater chance that cohabitants will split up than married couples. The trend of fewer divorces may therefore provide a distorted picture of reality.

Most children (79 per cent of children under 18 years of age) live with their biological mother and father. The following measures have been introduced to further strengthen the family:

Family counselling agencies provide advice and guidance to the whole family, to couples or to individuals. Family counselling agencies also act as mediators as part of divorce proceedings. Mediation is compulsory for all spouses who have children together under 16 years of age. The purpose of mediation is to help parents reach a satisfactory agreement as to where their children are to live, and the right to access, after the parents have left each other. Guidance programmes for parents help to facilitate relations between parents and children, provide support and encouragement for parents and improve communication between professionals and parents. A broad range of information and counselling material has been developed for parents and professionals. Guidance programmes for parents are offered by public health clinics and day care centres. Programmes include a variety of measures to increase the participation of fathers in child care. Fathers' groups seek to encourage greater participation by fathers and underscore the importance of fathers in child care, strengthen the joint responsibility of both parents and promote gender equality. Various organisations receive government support for the organisation of courses on marital or cohabitant relations.

(2) Perception and policy concerning mortality and health:

The government is very concerned about cigarette-smoking. The previously registered decline in the number of cigarette smokers has halted. This trend is especially true for the youth group. Recent data indicate that the previous decline in the number of smokers has been reversed. The Government has introduced strict legislation to reduce smoking. The government programmes have also implemented advocacy and educational programmes. Supplementary measures in the future will depend on the results of the assessment of the success of existing laws and regulations. Taxation on cigarettes is used to impede availability.

Norway is currently preparing for the introduction of the Family Doctors Reform. The reform seeks to enhance the continuation of service and more clearly defined responsibilities.

There are no changes in the legal status of contraception, induced abortion or sterilisation over the passed 5 years. Changes in reproductive health and birth control practices are not anticipated.

(3) Perception and policy related to population ageing, including change in population age structure:

Demographic projections indicate that the number of elderly will increase in Norway as in the rest of Europe during the next one or two decades, as will the number of pensioners. The number of persons aged 67-79 will, however, decrease in the same period. The main demographic trend will be the increase in the age cohort 80 and above. A new strong increase in the number of elderly people is expected after 2015. This is also the group with the most extensive needs for social services and care.

To bring the services to an acceptable level, and meet the increasing needs for services and care the Government has made a four year plan, with the following main objectives:

- The creation of 12.000 more full-time posts in the services
- The construction of new institutions with a capacity of 24.000 new beds, either as service housing or in nursing homes.

The construction activity will be financed by a combination of direct state subsidies, and by long term loans financed by the state. In addition, the municipalities who have the responsibility for providing services, will get a special bloc grant covering the operating costs. A condition for receiving these grants from the state is that the municipalities prepare a plan for the development of services for the elderly.

A main objective is also to increase the average retirement age, which is presently around 60 years. The most important strategy for increasing the average retirement age is to stabilise or reduce the number of young and middle aged disability pensioners.

The second main demographic trend is the ratio change between dependents and people in the working force. Like most others European countries, the maintenance burden of the labour force is increasing. The proportion of old age pensioners was 29 per cent in 1995. In 2010 the proportion of pensioners is expected to decrease to 26 per cent, but will rise again to 40 per cent in 2030 and to 45 per cent in 2040-45

As a result of the existing provisions concerning entitlement and calculation of pensions, future pensioners will be entitled to higher pension pay-outs than present old age pensioners. The high number of elderly people will also increase the demand for health care and institutional care services. This will require increased public spending, while the active working population will increase only slightly. Calculations regarding the prospects of economic growth in Norway consequently indicate relative modest growth.

Even with a strong economic policy and long-term financial planning in order to restrict public spending in other areas, the Government recognises that Norway is faced with major challenges. In several white papers to Parliament the Government has discussed how to cope with these challenges. The fundamental aim of the Government is to provide employment opportunities for all persons in order to be able to maintain welfare provisions in the future. Future generations should not be liable to inappropriate and unreasonable costs due to the current policy. Measures will be taken in terms of sound fiscal policies and through the taxation of the revenues from, in particular, the petroleum industry in order to make provisions for future pensions and increasing health care cost. Additionally steps will be taken to influence the dependency ratio through the "Work Approach Strategy" presented below.

The Work Approach Strategy consists of several measures. The most important are:

- More effective rehabilitation programmes
- Remodelling the programmes for single parents in order to increase their self-reliance
- Programmes for the disabled to help and assist them towards self-reliance
- Other programmes to raise the effective retirement-age.

The Government will pursue an economic policy that will try to maintain modest increases in prices and wages in order to ensure that Norway can compete in the global market and thus strengthen the basis for a high level of employment. Contrary to many other European countries, Norway has been able to maintain low levels of unemployment in recent years.

Prognosis indicates that this policy is feasible. The first allocations to the State Petroleum Fund were made in 1996. The Government regards it as essential to pursue a fiscal policy that allows allocation of the increased revenues from the petroleum industry for the future into the State Petroleum Fund. Thus public savings in terms of the fiscal budget surplus are important in the political strategy to guarantee welfare and redistribution between the generations in a long-term perspective.

Nevertheless, growth in the economy is necessary in order to meet the future financial obligations of the National Insurance Scheme. The above mentioned Work Approach Strategy constitutes a vital element in the Government's effort to establish a firm basis for our welfare schemes.

In order to safeguard our social security and welfare in a long-term perspective, it is necessary to reduce the number of people dependent on permanent social security benefits.

The Government continues to place emphasis on the role of civil society and therefore provides support for the private care in household, and through non-governmental organisations. Norway has a long tradition of voluntary service through non-governmental

organisations. These have provided supplementary health and social services for several decades. Local voluntary centres began to emerge during the first part of the 1990's. Today the the Government provides a partial grant to 213 volunteer centres. The centres represent opportunities for the people in need of assistance to meet people and organisations providing voluntary contributions. Such centres fulfill a social function and also provides services. Many of the services and activities offered are provided by pensioners themselves.

The National Insurance Scheme is the main element of our pension system. Additionally there are private and occupational pension schemes that can supplement the National Insurance Scheme. The taxation system provides incentives for such voluntary pension schemes. The Government intends to maintain these provisions, but have lately made some adjustments. The main principle behind these changes is that supplementary pension schemes must be designed in such a way that they support the National Insurance Scheme and the Work Approach Strategy.

The welfare system in Norway is under continuous review. Thus a Government appointed committee has recently presented a new report on how to prepare financially for the rising pension costs in the next century. The committee considered different alternatives including a closer linkage between the State Petroleum Fund and the financing of the pension system. A larger role of the private sector in the financing of the pension system was also considered..

(4) Perception and policy concerning international migration

The Norwegian government perceives the trends of migration to Norway to resemble the trends of migration in other European OECD countries. The main migratory flow to this region stems from the Balkans, the Middle East and North Africa.

The net immigration of foreign nationals has fluctuated considerably from year to year. Immigration reached its highest level in 1988 when a total net of around 15,000 foreign nationals immigrated. A new high level of immigration was experienced in 1993 (12,000). In 1998 the numbers are again expected to increase. The increases seen during these three years are mainly related to influxes in the number of asylum seekers, but also to labour based migration between the Nordic countries.

Statistics from 1990-93 indicate that around 45% of net immigration to Norway are protection related. Around 35% arrive as part of a family (re)unification. Only 10-15% of the immigration is labour related.

Except for the quota for resettlement of refugees and the quota for seasonal work, the Norwegian government does not set targets or ceilings for the number of immigrants to be admitted to Norway. The quota for the resettlement of refugees was increased in 1998 from an annual ceiling of 1 000 to 1 500 places. The quota for seasonal work is 7,000 persons, and is mostly used for agricultural work for persons from Central and East European countries. The rules regulating the issuing of work permits to persons from countries outside the European Economic Area are relatively restrictive.

An inter-ministerial working group was established in 1998 to evaluate the needs for recruitment of foreign labour in the years to come. The Directorate for Employment has indicated that there will be a need for a net immigration of 20,000 workers to fill the present

employment gap in Norway. Active recruitment has only taken place within the common labour market of the European Economic Area.

Norway entered an agreement of co-operation with the Schengen countries in December 1996. Re-negotiation of the agreement is needed due to the revision of the Treaty of the European Union in Amsterdam, where the Schengen axis is incorporated into the TEU,. The implementation of this agreement will require a harmonisation of the visa policy of the European Union.

(6) Perception of the Government regarding the need for policy-related collection of data and research

The Norwegian Government acknowledges the need for a solid database for the development of policy in the field of migration. The Ministry of Local Government and Regional Development has commissioned research and evaluation of the effect of reform programmes over several years. The Ministry has also commissioned Statistics Norway to develop the data-collection, registrations and statistics on migration to and from Norway and on the living conditions of immigrants. The Ministry also contributes to the financing of a research programme called *International Migration and Ethnic Relations* which the Research Council for Culture and Society has developed for the period 1997-2001. Similar programmes have been in operation since 1985. The programme researchers have developed close working relations with colleagues in other countries.

A substantial portion of the research allocation of the Ministry of Children and Family Affairs has been granted to programmes run by the Research Council of Norway. *The Child, Youth and Family programme* is intended to strengthen our understanding of the living conditions of children, young people and families. The *Welfare and Society programme* provides additional insights with regard to the functioning of the welfare provisions..

The primary objective of the *Gender in Transition programme* is to help develop fruitful approaches to research on gender. Several research workers involved in these programmes work in close co-operation with researchers in other countries. The Ministry also finances individual projects.

Norway lacks numerical data on the number of cohabitant relationships that are being established or dissolved each year. There is a need for , e.g. a more detailed housing registration scheme that would enable the Government to significantly improve statistics on cohabitants, but this is still to be developed. The Government also lacks systematic data regarding living conditions and gender equality at family level among immigrants. This may be a potential research topic.

(7) International follow up of the Plan of Action (POA) from the Cairo Conference on Population and Development

The Norwegian Government has given high priority to the implementation of the POA from the Cairo Conference in development assistance programmes. A policy document for Norwegian population assistance was developed in 1995 in response to the Plan of Action setting out the priority issues in the follow up from the conference. Issues such as gender equality and broad based reproductive health have also been highlighted in the Norwegian participation in e.g. the Board of UNFPA and Donor's Meetings in the IPPF. A particular concern has been to increase the resource allocation to the poorest countries, in particular in Africa.

The development Agenda is supported by the increasing assistance to the social sector, in particular health and education. Increasingly the education support has been directed towards girls through support to Unicef and the World Bank. The gender perspective and the empowerment of women has for many years been a cross-cutting issue in Norwegian development co-operation.

In 1997 the population assistance reached 4,3 % of the Norwegian ODA budget. Norway has been one of the principal funders of the UN Population Fund (UNFPA). The funds allocated to UNFPA has increased gradually and the general contribution reached NOK 210 mill (USD 28 mill) 1998. UNFPA has also been funded on a multi-bilateral basis. Organisations such as the Population Council, IUSSP and ICOMP have all received grants through the UNFPA. The International Planned Parenthood Federation (IPPF) received NOK 45 mill (USD 6 mill) in 1998. Reproductive health programmes have also been supported through the World Health Organization (WHO), the World Bank and through bilateral programmes.