

Commentary on Norway's domain ranks in the 2014 Global AgeWatch Index

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Global AgeWatch Index rank

1
out of 96

Norway ranks first on the Global AgeWatch Index. As with many other countries in its region, Norway ranks consistently high across all domains, including first for income security with the highest GDP per capita in its region.

It also ranks first in the capability domain, with an employment rate among older people that is approximately 15 percentage points above the regional average (70.9%). It also has the highest rate of educational attainment among older people (99.4%).

It comes in at number 4 in the enabling environment domain, with high rates of perception of safety (86%) and civic freedom (96%) among older people. It ranks lower in the health domain (16), with slightly below regional averages for life expectancy and healthy life expectancy at 60.



Income security

1
89.1/100

Norway's universal pension coverage and the added value of various benefits result in a high level of income security for older Norwegians. The long-term effects of the pension reforms introduced in 2011 are not yet clear. So far, the most positive development was an increase in the level of pension points earned by care providers.

The Government Pension Fund Global (commonly known as the Oil Fund) is among the world's largest sovereign wealth funds. The revenues from Norway's oil sector are channeled into the fund, and are invested globally to create revenue. The fund is an international best practice of public revenue management and provides a high degree of economic security for the country's social welfare system to benefit current and future generations of older people. The Norwegian Ministry of Finance forecasts that the fund will reach 4.3 trillion NOK (US\$717 billion) by the end of 2014.



Health status

16
73.5/100

Norway scores high on all health status indicators. However, studies remind the Norwegian people not to take its good public health system for granted; recent data indicates that the social care services for older people have been reduced in Norway over the last 20 years; at the same time major reforms and action plans have improved services for users younger than 67 years old. The health care system in Norway is semi-decentralized. The responsibility for specialist care lies with the state (administered by four Regional Health Authorities) and the municipalities are responsible for primary care. Public sources account for over 85% of total health expenditure; the majority of private health financing comes from households' out-of-pocket payments. Older persons and children under 18

years old also get free dental treatment (not covered by the public system for adults).

The organisation and provision of long-term care is the sole responsibility of the municipalities and is often administratively integrated with health and social services at the local level. LTC is provided in three types of setting: patients' homes, nursing homes and sheltered houses run by the municipalities¹.

Capability 1 76.2/100

Although Norway has one of Europe's highest shares of working people over the age of 60-66, older people still report facing discrimination when applying for jobs. A recent study reveals that about one-third of employers believe that qualified applicants should have at least ten remaining working years before retirement left in order to be invited to a job interview.

A recent OECD report states that despite Norway's high level of employment among older workers, more could be done to mobilise inactive older people. The report highlights the 2011 pension reform, allowing flexible retirement between the ages of 62 and 75, which has resulted in improved incentives to continue to work for longer.

Enabling environment 4 80.1/100

Created in 1970, the National Council for Senior Citizens is perhaps the most important channel of older people's direct political participation in Norway. The Council is appointed by the Government and acts as an advisory body for public authorities and national institutions. The Council focuses on issues concerning the living conditions of senior citizens and their opportunities to take part in working life and in the society at large.

The responsibility for the provision of public transport services to older people is divided between different governmental bodies. The state is responsible for the provision of transportation related to health services, and provides extra financial support to local public transport in the bigger cities. The municipalities are responsible for local public transportation. They are also responsible for the financing and organization of special transport services for disabled persons, while the municipalities can decide who is entitled to such services.

Public transports in Norway are reliable and generally of a high standard, although overcrowding is common during rush hour in the larger cities. Outside the cities, public transport is infrequent and far between, which significantly reduces the mobility for older people who are no longer able to drive cars. Another reason why older people may be prevented from using the public transport system is the lack of suitable places (benches) to rest on the way to the bus stop or at the stop itself. In most of municipalities the public transports design is planned to follow the school year calendar, which is not suitable for older persons who needs the service all year round.

Notes

¹For more information, please visit:

http://www.euro.who.int/_data/assets/pdf_file/0018/237204/HiT-Norway.pdf

The Global AgeWatch Index ranks countries by how well their older populations are faring.

For general enquiries please contact HelpAge International's Media Manager, Sarah Gillam (sarah.gillam@helpage.org).

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