

Overcoming the Barriers and Seizing the Opportunities for Active Ageing in Norway: Report from an Expert Panel Meeting

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UNIFOB AS

DECEMBER 2005

Working Paper 12 – 2005

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Foreword

Demographic ageing is a key challenge European policy-makers will face in the coming decades. An ageing society will strain European labour markets, pension systems and health care systems. This publication comes out of the Active Age project, financed by the European Union. The project aims at identifying and analysing the socio-institutional, economic, and political realities facing the implementation of active ageing policies in 10 European countries. This implies the following: 1. Chart and analyse the existing active ageing policy landscape in Europe, 2. Identify and outline barriers to and opportunities for implementing active ageing policies in Europe, 3. Highlight and explore means of overcoming barriers and seizing opportunities for active ageing policies in Europe.

Rune Ervik

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Summary

This report provides the result from the expert panel meetings as a key element of the sixth work package (WP6) of the Active Ageing project. A main concern of this WP is to identify barriers to active ageing and means to overcome them. Panel led consultations with leading experts in each country is applied as a method in this process of identification. The Norwegian meeting of experts was arranged in Oslo on the 20th of April 2005. The report is organised into the three main parts. The first part describes the process of recruitment of experts, place and date of the meeting, description of methodology and implemented tools in the expert panel debate and the agenda of the panel discussion. The second part, which makes up the bulk of the report provides the actual panel debate as it unfolded, but with some reorganisation of the arguments into different subsections in order to systematize and offering easier reading of the arguments. The last part sums up the foregoing discussion and present the experts view on the most significant barriers and opportunities identified. In addition, suggested strategies for overcoming barriers according to the experts are briefly listed. This part also contains the so-called Consultation Document, which provides the main research findings from the ActivAge Project in Norway in terms of barriers and opportunities. This enables a comparison of findings from the project with that of the expert panel.

The panel discussion revealed that the key field of policy making is the labour market followed by pensions and then health. The third sector has a more peripheral role in active ageing. Still many of the issues cannot be classified in a clear-cut way and encompasses several policy fields and most of the barriers and opportunities will have secondary effects on other policy fields.

A list of the five most important issues in terms of barriers and opportunities across the four policy fields was identified. The most important barrier was the opinion of the elderly that had to be overcome to promote active ageing. That means both opinions on individual level and the collective level. Together these opinions work as pressures to retire early, or serves as a basis of stereotype roles of how to behave as elderly. Secondly, an important barrier is knowledge in general and how to fill-up of knowledge during the whole life-course. Thirdly, the economy and the lack of sticks and carrots in the pension and labour market policy were identified as important barriers. Fourthly, the legislation on age limits are not in line with the health conditions of the today's elderly. Neither are the lack of possibilities to combine work and pension. Finally, the increased demand of efficiency is a barrier to prolonged working career. The panel discussed strategies for overcoming barriers and seizing opportunities and agreed on introducing strategies that were identified as innovative: For instance, a suggested strategy is to introduce a program «Inclusive working life II», that is to unite the decision makers working against marching out of the labour market. Another suggested strategy is to establish a new welfare and labour market administration to improve collaboration and coordination. A third strategy is to secure user control and choice for older people.

Samandrag

Dette notatet gir resultata frå ekspert panel møta, som utgjer eit hovudelement i den sjette arbeidspakken (WP6) i ActivAge prosjektet. Eit kjernepunkt i denne arbeidspakken er å identifisere hindringar for aktiv aldring og måtar å kome over desse hindringane på. Panel leia konsultasjonar med leiande ekspertar i kvart av landa som deltek i prosjektet er nytta som metode i dette identifiseringsarbeidet. Det norske ekspertmøtet fann stad i Oslo den 20. april 2005.

Dette notat består av tre hovuddelar: den første delen gjer greie for rekrutteringsprosessen av ekspertpanel deltakarar, tid og stad for møtet, skildring av metode og verkty nytta i ekspert panel debatten og dagsorden for paneldiskusjonen. Den andre delen legg fram sjølve paneldebatten slik den utfalda seg, men med noko reorganisering av argumenta inn i ulike underseksjonar for å kunne systematisere og gje ei klårare lesing av argumenta. Den siste delen oppsummerar diskusjonen og presenterar ekspertane si oppfatning av dei viktigaste hindringane og moglegheitene av dei som er identifisert i debatten. Moglege strategiar for å vinne over hindringar i følgje ekspertane blir og kort presentert. Til slutt i denne delen blir hovudfunna frå vår eiga forskning innafor dette prosjektet lagt fram med omsyn til hindringar og moglegheiter, slik at ekspertane sitt syn og våre resultat kan samanliknast.

Paneldiskusjonen synte at hovudområdet for politikktutforming i høve til aktiv aldring er arbeidsmarknaden, så følgjer pensjonsområdet og for det tredje kjem helseområdet. Den tredje sektoren har ei meir perifer rolle innafor aktiv aldringspolitikk. Likevel er det slik at mange av problemstillingane innafor dette saksfeltet ikkje kan klassifiserast på ein eintydig og klart avgrensa måte, men femnar om fleire politikkkfelt og dei fleste av hindringane og moglegheitene vil ha sekundære effektar i høve til andre politikkkfelt.

Ei liste over dei fem viktigaste saksområda i høve til hindringar og moglegheiter for dei fire politikkområda vart identifisert. Den viktigaste var misoppfatningar om eldre som måtte overvinnast for å fremje aktiv aldring. Dette omfattar oppfatningar både på kollektivt og individuelt nivå. Saman verka desse oppfatningane som press mot eldre for å gå ut av arbeidslivet tidlegare og som ein basis for stereotype oppfatningar av korleis eldre bør vere og handle. Ei anna viktig hindring er generell kunnskapsmangel og korleis ein kan sikre påfyll av kunnskap gjennom heile livsløypen. For det tredje, økonomiske incentiv, mangelen på «pisk» og «gulrøter» i pensjonssystemet og på arbeidsmarknaden blei identifisert som viktige hindringar. For det fjerde, lovgjevinga i høve til aldersgrenser for pensjon var ikkje i samsvar med helsetilstanden til dagens eldre. Som del av dette var heller ikkje moglegheitene for å kombinere pensjon og arbeid godt nok utvikla. Til sist, det auka effektivitetskravet er ei hindring i høve til å stå lenger i arbeid.

Panelet diskuterte og moglege nyskapande strategiar for å fremje aktiv aldring. Ei vidareføring og utviding av målsettingane i avtalen om eit inkluderande arbeidsliv (ein IA II avtale) blei sett som viktig. Ein annan strategi er å etablere ein ny velferdsarbeidsforvaltning for å betre samarbeid og koordinering mellom dei to felta. Ein tredje strategi er å sikre auka brukarstyring og individuell valfridom for eldre menneske.

Introduction

This report provides the result from the expert panel meetings as a key element of the sixth work package (WP6) of the active ageing project. A main concern of this WP is to identify barriers to active ageing and means to overcome them. Panel led consultations with leading experts in each country is applied as a method in this process of identification. In this case, the result from the Norwegian meeting of experts arranged in Oslo on the 20th of April 2005 is reported.¹

The report is organised into the following main sections. The following section (2) describes the process of recruitment of experts, place and date of the meeting, description of methodology and implemented tools in the expert panel debate and finally the agenda of the panel discussion is provided.

Section 3 which makes up the bulk of the report provides the actual panel debate as it unfolded, but with some reorganisation of the arguments into different subsections in order to systematize and make for hopefully easier reading of the arguments.

Section 4 sums up the foregoing discussion and also offer the experts view on the most significant barriers and opportunities identified. In this section suggested strategies for overcoming barriers according to the experts is briefly listed. Section 5 contains the Consultation Document, which provides the research findings from the different work packages in terms of barriers and opportunities within the Norwegian case study.

Section 6 concludes by giving a brief observation about the ageing panel discussion, the priorities and the recommendations.

Section 7 provides a Descriptive Summary. Several annexes are amended that provide important information on the different stages of preparation for the panel led discussion in terms of input to participants etc. These documents provide the reader with relevant information in order to understand the background context of the meeting.

Recruitment of Experts, Date of the Panel Meeting, Description of Chosen Methodology and Implemented Tools Conducted in Ageing Expert Panel

Participants of the meeting were: In alphabetical order: Steinar Barstad, Senior Executive Officer Ministry of Health and Care Services, Randi Bjørgen, President of the employee organisation The Confederation of Vocational Unions (YS), Bjørn Halvorsen,

¹ The authors wish to express their thanks to the experts for participating at the panel meeting and providing their views, opinions and knowledge on the issue of active ageing. Their contribution and cooperation was essential for accomplishing this part of the ActivAge project.

Senior Executive Officer , Ministry of Labour and Social Affairs, Øysten Haram, Senior Executive Officer, Ministry of Labour and Social Affairs, Erik Råd Herlofsen, Executive Vice President HR , *Storebrand* (insurance company) and member of the National Council for Senior Citizens, Ola Ribe Assistant Director General Ministry of Labour and Social Affairs, Gudmund Sørensen, pensioner and former Wage and Personnel Manager, Municipality of *Stord*: moderator of the meeting was Finn Bjørnar Lund Senior Executive Officer, Ministry of Modernisation.² The two researchers on the project Rune Ervik and Ingrid Helgøy were also present but did not take part in the discussion apart from on issues of clarification.

Recruitment was based on the group of people previously interviewed during the project. We found it useful to recruit people with some previous knowledge of the project. Our guidelines for recruitment was firstly to cover the main policy fields of the project, i.e. labour market, pensions and health, and in addition, we aimed at including persons from the firm level. Recruitments were made by email in February. All contacted persons responded positively. In addition to the six participants plus moderator recruited by us, we were asked to include one more person from the Ministry of Work and Social Affairs with responsibility for a forthcoming white paper on senior policy. Thus at the meeting there were seven participants (4 from 3 ministries, two firm levels participants, (one public and one private sector) as well as one representative from the social partners on the employee side. The moderator was also employed at the Ministry of Modernisation working on the issue of a more inclusive working life and the role of the state as employer in that context.

The meeting was held in Oslo on the 20th of April 2005. The meeting started at 10.00 and ended at 14.30. Effective working time was 3.45 hours.

After having recruited the persons the following steps were made ahead of the meeting:

On the 30th of March a translated version of the active ageing document were sent to the panellists (confer Annex 1 and 2). In addition a short questionnaire on opportunities and barriers were also provided to the panellists with a request to voluntarily provide answers and return the scheme to the researchers within the 8th of April (confer Annex 3)

On the 10th of April a consultation document were provided based on findings from the Norwegian case studies, but without any European input as this was not available at the time (confer section 5). To fill in this vacancy of information on the European dimension the participants received a Rapid Report based on WP1 of the Active Ageing project (Ney 2004a), and a power point presentation for a lecture given in Bergen, (Ney 2004b), as well as the EC communication on *Towards a Europe for All Ages* (European Commission 1999).

The aim of providing this information beforehand of the meeting was to prepare the participants for the discussion and to allow most of the time at the meeting for discussion instead of stealing valuable meeting time spent on explaining and informing.

² As concerns anonymity the participants all agreed on being identified by name and institutional affiliation. However there were also agreement on not identify single statements during the meeting with individual experts. Thus, as regarding the quotation we have only indicated the point of time during the meeting when this was said.

We also wanted the meeting to be relatively short, as long meetings would not necessarily add value to the content.

Before the meeting, we had a briefing with the moderator to adjust the agenda and make clear the role of the moderator. It was agreed that the moderator should take an active role, probe, and provoke if needed to spur the debate. The moderator had prepared a Powerpoint presentation based on the background documents and the agenda to be actively used during the session. Since facilities in this particular meeting room unfortunately was lacking only a paper version was distributed to participants that was partly used as a guide for the discussion.

Introduction to Panel Discussion

The following agenda was set for the meeting:

1. Short introduction with welcome and self-presentation around the table.
2. Discussion on the concept of active ageing on the basis of the definitions given by the OECD and the WHO.
3. Coffee break
4. Barriers and Opportunities for Active Ageing in Norway.
5. Lunch.
6. European perspective
7. Comments on CD, final notes
8. Closing of meeting

The meeting went on quite well with interesting discussions on several of the suggested topics. However, it became quite clear that there was a mismatch between the ambitions for the meeting and the time allocated. As indicated by the moderator the scope of the meeting in terms of topics and substance would have required several meetings in order to cover all the themes fully and satisfactorily.

The Panel Debate

The following provides a focused presentation of the discussion of the meeting based on the Norwegian transcription of the recording. The presentation here follows the chronology as given by the agenda presented above. To some extent, we have tried to organise the arguments of the debate concerning fairly similar issues into different subsections. We have entered a few keywords for each subsection to indicate roughly the main content. We start with the discussion of the active ageing concept and then move on to the discussion of barriers and opportunities. As a way of summing up the

discussion on barriers and opportunities, section 7 provides a table containing the main arguments in terms of barriers and opportunities in a condensed form.

What is Active Ageing? A Conceptual Discussion on the Basis of OECD and WHO Definitions

The moderator commented that the international organizations have different definitions: the OECD definition is about the capacity/mastery of the individual i.e. a more subjective approach. The WHO definition is more about possibilities, conditions of the environment for active ageing. Health, participation and security are keywords, whereas the OECD definition is more about being active within the productive dimension. One of the experts also added the importance of the UN rights for elderly people within this international context.

This sparked off a discussion on the concept concerning a wider or a more narrow definition of active ageing, a discussion on the age-perspective of the concept and a discussion on paternalism and freedom of choice as a dimension of active ageing.

A Comprehensive Definition of Active Ageing

The panellists favoured a wide definition of the concept which considered not only work, but also stressed the importance of other non-productive activities as important in contributing to an active life. It was argued that very often active ageing is described as being active in working life and being productive. In this way barriers against active ageing are understood in terms of being able to learn more, be more productive, participate and prolong working life. It was also pointed out that health improvements gave more time to have some kind of an after life, after one have retired (from working life) i.e. to participate more actively in society and be productive there in other respects. For instance this meant to be able to take care of oneself in other ways than before, to participate and have influence by participating politically, in organizational life, in care for others, both younger and older. In relation to definitions the preference was clearly towards the WHO definition stressing the ability of people to realize their preferences and which also have a wider perspective on activity, than that of the OECD. A contrast between Europe and the US concept of «productive ageing» was also made, where active ageing was seen as a more European concept and being more extensive. It was also added that active ageing not only concerned the seniors, not only older people, but rather all of us, because active ageing did not accept any form of discrimination in the form of ageism, segregation or otherwise, and stressing a cross-generational perspective that requires that the social life in various areas shall include all ages. Another reason for not emphasising the value of work too much was that it would have strong effects on how we evaluate people and their value, so that it easily ends up saying that when you are outside work then you are excluded from rest of life as well. In addition and here

questioning the fundamental assumption of a future scarcity of labour argument it was argued that:

«It may be that we don't need all the labour power that we now think we need in the future. If we look back at the last 50 years, we see that much the same concerns were made when looking at demographic change from 1950 to 2000 as when we look forward from here. It may be that we will have unemployment in 2030 also, and then the situation concerning work quite another» (than what we believes to be the case for the future, authors addition) (51:37).

Apart from the conceptual discussion others had a more practical approach based on practical experience from the productive dimension of active ageing. One of the panellists had somewhat of an awakening when he witnessed that whole age cohorts suddenly disappeared when the AFP age limits was lowered to 62 years. He found it wrong that if there was an opportunity to leave the labour market one ought to do so. Therefore the challenge was to formulate some policy that included measures that provided those who wanted to stay in working life an opportunity to do so. Another aspect of this was a long term time perspective wherein the expert saw an possibility of changing attitudes over time by providing measures that made it more attractive for older persons to be in work, and so over time spreading this norm to other ageing persons. In this way it was hoped for bit by bit the average age of departure from working life would increase. This expert argued that active ageing should be understood as policies providing measures for activity within both the productive sphere as well as the non-productive sphere.

Individual Choice and Paternalism

Although there was a consensus towards the wide definition there was some discussion about the balance between individual choice and government policy to impact these choices. Individual choice meant to be in the position of making independent choices and find one's own way and to choose more independently. This relates to active ageing as it concerns more self-determination and more user focus (*brukerretting*). For the panellists this implied that older people were not to be stored away in old people's homes anymore, without any choices, but that they ought to have stronger influence on the services they wanted. The direction of change accordingly were towards not only more productive and active older people, but also towards having more influence on their own life and the services they wanted, thus a movement away from a paternalist way of thinking about old people and old age care. One of the panellists in this context warned against the fallacy of paternalism, i.e. of having a policy on defining what is good and bad activities:

«...the other fallacy is paternalism, to put it bluntly, a form of state paternalism on this or even a European paternalism on what it means to be active for people. For some an active and rich life may be to watering the flowers or to have time for grandchildren. Some considers it to be active if they can play golf in the South (i.e. the Mediterranean countries), but some think that we ought to have a policy on this where we doesn't facilitate such activities. For me it is a bit strange that we shall have a sort of policy on people's choices, that considers some forms of activities as better than other forms, so I think there are many fallacies there of being normative and state paternalist». (16:30).

Not everyone feared such paternalism and argued in favour of stating some policy goals in terms of what was considered to be acceptable choices:

«I belong to the one who claim that we cannot accept that people sit 30 years in the South and play golf in senior cities. I think one has to put forward some demands on this part of the population, that society must have some expectations and clearly express them. These expectations must be different from (the traditional one, our adds) of saying that now its time for withdrawal and enjoying one's leisure time. That period is ended and we have entered a new period where we need this part of the population in active duty in different ways». (23:00).

As more of a consensus position it was argued that if policies were made to increase the attractiveness of being active (in whatever form) and that it was accepted that people made different choices, the eventual problem of people choosing to go to the South would be reduced, because people in general preferred to be active in other ways than playing golf. In this way as we interpret it, the paternalism was avoided by having a policy that increased the range of choices in line with the definition of active ageing as being about enabling people, without being normative in respect of the actual choices made by individuals.

The Age Groups and Age Limits of Active Ageing

A third aspect of the conceptual discussion concerned the age groups involved in active ageing policy and the need to differentiate between various age groups and adhering policies. One of the panellists was concerned about age limits and the attitudes concerning when it was time to retire. The expectations had fast and steadily moved downwards and so something had to be done about these attitudes so that it became more acceptable to increase the age of withdrawal from the labour market. To this it was added that to speak of active ageing without specifying the age group under concern was meaningless from a policy formation perspective. And thus one important distinction had to be the one between those of working age and those outside that age group. In relation to those of working age policies accordingly ought to focus on creating conditions, making it attractive to be in the labour market, to impact the attitudes that have to be present in order to let people take part in working life and benefit from it so that if one contributes productively one is rewarded. For the other group other policies would be relevant and so the main point was to differentiate policies according to various groups. On the other hand it was warned against having to strict limits on ages. The argument was that because ageing as such started at the age of 0 and lasted until death it was important to have an approach that was valid both in working and after working age. Within this perspective the nursing and caring aspect of the last years of life was included and so included different life phases varying from individual to individual. The differentiation between those of workable age and those not was questioned by the moderator and opened up for scrutinizing the meaning of existing age limit definitions.

Starting out from the principle that older people either through income generating production or home production are to be provided with greater opportunities and throughout the walk of life be prepared to keep and uphold their ability to contribute in

different areas, this opened up for the importance of several policy areas such as preventative health measures, training and education, etc. From this perspective the institution of fixed and general age limits was seen as somewhat peculiar:

«It's a bit paradoxical that age limits are in most instances common to all, irrespective of what kind of occupation and health condition people have. Whereas in fact there should have been some kind of assessment of functional abilities present, life expectancy varies 10 years depending on what kind of occupation you have. For a Supreme Court judge the 70 year limit is felt like a barrier, because they want to continue in work after 70 years of age. For physically demanding occupations it may be impossible to continue beyond 60 years of age.» (43:36).

In this way the discussion effectively questioned the conventional dichotomy between groups in working age and those outside, by showing how the variability of meaning of the concept of «working age» and the lack of clear boundaries between the two groups complicates the easy separation of policies directed at just one of the groups.

Barriers and Opportunities for Active Ageing in Norway

The intention of this session was to identify barriers and opportunities and point to workable policy tools that enabled active aging in the context of Norway. The debate was based on the short questionnaire (confer Annex 2) delivered to the participants before the meeting. The panellists were on a wholly voluntary basis asked to fill out the scheme and return it to us before the meeting. Two of the participants delivered the scheme or returned written reply. However most participants had read through it and filled in some points just before the meeting and so the scheme was applied during the meeting also as part of the moderator's guideline for this session on barriers and opportunities. Most of the time was spent on labour market issues including firm's personal policy, but pensions, health and voluntary sector topics were also addressed.

Labour Market, Firm's Personnel Policy and Pensions

Age Limits and Functional Work Abilities

Age limits was seen as a barrier. The argument put forward was that functional abilities of people vary a lot, and the variation increases with age. Among people of 30 years of age the variation is smaller, but when you move upward to the oldest age brackets, some people functions very well, whereas others functions badly. In this way common age limits may function as barriers for people with higher functional abilities, and this relates both to formal age limits, special age limits as is the case for among others policemen and military personnel. In those cases and in others it was argued that it quite obviously would be possible with some kind of adaptation of work tasks, persons within these groups would be able to continue for several years. But because employees are locked into fixed positions with specific tasks and because their employers does not consider to

reorganise them in order to continue much longer in their work by adjusting tasks to work ability individually as inflexibility of general or specific age limits hinders this.

These barriers of general age limits and lack of adjustment of work tasks according to functional work ability is closely interlinked with the pension system. As the pension system opens up for the possibility of withdrawing from working life at a certain age employers are relieved of the task of adopting work places to reduced work ability of older employees. An important part of this picture is the relationship between wage and pension. Many employees (especially within public sector schemes, our addition) have so-called final salary schemes, which means that your final year of salary will be the basis for calculation your pension benefits. In this context for many individuals it will be better in economical terms to stop working at an earlier point than to move into another position but with lower salary. A similar inflexibility was mentioned concerning the combination of salary and pensions during the final years of employment, and also this connected to the inter-linkage of work ability, work tasks, pensions and wage. As concerns the lack of adaptation of tasks this was seen as a major barrier because too few employers actively thought of this possibility and took advantage of the practical tools available through the Assistive Technology Centres *Hjelpemiddelsentralene*. A part of this barrier of adaptation also included lack of adaptation of work time for older workers. On the opportunity side, cooperation between firms on relocation of employees, i.e. between firms instead of gift pensions (*sluttpakker*) was mentioned. Such policies could also be implemented within firms through relocation between different departments. Here an example was given by one of the expert from a public firm where resources and manpower was deployed with responsibility for internal relocation policy that provided gains in form of a reduced number of disability cases.

Attitudes and Discrimination: Small versus Larger Firms

Another barrier was attitudes in the form of discrimination and myths about older persons. In this context it was also discussed whether there are differences between smaller and larger firms. Here the panel experts argued that the smaller firms was the most flexible in terms of employing older workers because they are in a position to see each individual worker and their work ability and with more possibility for wage flexibility according to tasks. Personal managers in larger firms are often younger persons and have negative stereotypes of older people and because of the number of employees to relate to is so large have less possibilities for seeing the qualities of each individual. Another factor mentioned was that often the speed of restructuring and down sizing is faster in larger than in small firms at that this may contribute in excluding and pushing out older workers from these firms and the labour market.

A More Demanding Working Life and «The Great Emigration»

In line with this, the general level and speed of restructuring may also be seen as a barrier. At an even more general level, it was added that a more demanding working life worked as a barrier for some:

«I do see that we (employers) demand more and more from our employees, fewer employees are to do more, preferably 120% performance and preferably all of the employees» (01.13:36)

As part of this it was pointed out that internal relocation was made more difficult because of outsourcing of more easier or less stressful work tasks.

The issue of a more demanding working life were also part of what was labelled «the great emigration» by the expert mentioning it. It was seen as a great barrier and consisted of all those excluded from the labour market in one way or another and that were dependent on National Insurance benefits. Over the last 10 years this emigration has increased substantially and today consisted of well above 500 000 persons of working age that were outside the labour market temporally or permanently. Adding to this about 100 000 on social assistance, then nearly 700 000 at any time were outside the labour market. Not all of these persons were on their way out of the labour market, for instance many of the unemployed and those on sick leave would re-enter, but this fact of emigration constituted a main problem of the labour market. Probing into this the moderator provokingly asked whether this problem not easily could be dealt with by removing welfare state income security and benefits. The expert's response was that:

«that's too easy and that is the reason why I wanted to portray this wider perspective, because within this perspective there are in fact several barriers, and a key barrier among them is that many of these people are not wanted or asked for, because of health reasons, because they are too expensive, maybe they are not considered as sympathetic, and many other factors. I could have read from a pile of letters from single persons writing to the minister and telling us that they have tried all what is required, but 'the labour market does not want me'. This is more than attitudes. It is about strategies to break the growth of the emigration. In this context the concept of barriers is too easy. I would like a wider more comprehensive strategy...And we have to be so cynical as to state that employers both within the private and public sector don't want these people at the going wage, and so they prefer to pay for these people through the tax and transfer system instead.» (1.19:45).

The «great emigration» barrier was thus seen as a combination of several factors: welfare and pension arrangements, push and exclusion within the labour market and attitudes. And as concerned the welfare arrangement one of the expert reasoned that one of the reasons for emigration could be that the (economic) benefit of being in employment was so small that some groups preferred National Insurance benefits that they had a right to instead of work and consequently that the benefits were too generous.

The lack of congruence between profitability on the individual firm level and societal profitability was also mentioned as a crucial barrier and could be seen as one factor explaining the great emigration. An example of this was how several larger firms dealt with the demographic challenge and the increasing need of keeping older workers.

«They (i.e. personal managers in larger firms) say that they are all aware of this challenge, but that their firm is so good at attracting and recruiting younger people so that the young one will choose to work for us. In this way we don't have to think of employing or retaining older workers, because they always will be able to recruit from the stock of younger workers, although this will become more expensive in the future». (1.23:32).

In this way selective practice of recruitment in some firms externalised societal costs that had to be covered elsewhere. This opened up for a critical notion on efficiency, calculations of profitability and how this related to barriers. A fundamental concern was that what is considered as profitable for many firms was not profitable at the societal

level. This aspect touched upon the basic organisation of the economic system and one of the expert argued that there was something fundamentally wrong about this structure leading to a lack of congruence between social and firm level conceptions of profitability. The challenge was therefore to increase the compatibility and coherence between these two levels. On the opportunity side the importance of bringing together decisions and their different makers that lead to unwanted processes, so that the costs of one decision is not transferred wholly to another field of decision, but are felt more directly by those making the decision. In this perspective forms of cost-sharing was mentioned as useful approaches. In addition the approach set out in the IA treaty was also seen as an equally useful strategy wherein the goal of a more including working life was seen as a common challenge that had to be tackled on the practical level, not only by applying incentives and sanctions. Therefore a renewal of the IA treaty was seen as an opportunity. It was argued for a broader approach than the strong focus on sick leave reductions that is the key issue in the present IA treaty. Within such an approach it was important to consider critically the whole range of welfare state instruments and means and see how they can be improved to function better.

As one aspect of the debate on the economic system was the way labour market negotiations traditionally was focused on wage and productivity increases. This situated those with lower productivity in a problematic position with the risk of being squeezed out because of the misfit between productivity level and wage. One opportunity then was to broaden the issues included in the negotiations between employers and employees, i.e. to negotiate on other factors than just wages and that such a refocus may be conducive for persons with lower productivity to be included in the labour market. The arrangement wherein disability benefits was given as wage subsidies to employers who employed disabled persons was also mentioned as an example of government policy within this area. One of the panellists also argued that something ought to be done at the legislative level:

«We have some people above 55 years that should be given some easier tasks and maybe less responsibility, but many older employees feel that when they've earned certain rights in the form of a certain position and salary they will not freely change these positions. In this situation the only option for the employer is dismissal or a so-called dismissal on work content change (*endringsoppsigelse*). The legal work environment protection as concerns the employer's options for changing work tasks, responsibility and conditions is so strong that it represents a barrier. This contributes to many employer's reluctance towards employing older people, and in addition the few older people that don't function well contribute in stigmatising the whole group of older workers». (01.37:48).

Clearly, this point is also interwoven with the way pensions calculation are made, i.e. final salary arrangements. Commenting on the point above the moderator pointed out that this also had to do with strong personal feelings for the employees and maybe more so than just legislative aspects.

Within this complex, the need for an active personal management policy that encompassed planning of careers quite early in the employment life course was also added as an opportunity in order to better match productivity and wages.

Competence and Incentives: «Education, education and education»

Lack of renewal and adding of competence was mentioned as a key barrier for older employees. In this case it was pointed out that change of attitudes was not enough, practices had to be changed by implementing competence measures for older employees into personal policy of both private and public sector firms. However as part of this firm policy change it was necessary to change attitudes of employers and employees as well. For older employees this implied a sort of self-evaluation in order to build up confidence of one owns attractiveness and activeness and enthusiasm. On the opportunity side the UK New Labour slogan of «education, education and education» was put forward. Here, the demand for adapted education for elderly was hold as important according to this expert:

«Especially education I consider as important. Today, age-adapted education is very important because there are great changes when it comes to technical development. Especially, information and communication technology is of significance. The elderly are in need of another type of education and training if they are going to hang on in working life. I believe that many of the elderly are excluded from working life because the training is adapted to younger generations of the employees. By adaptation to the need of the older workers I think of training strongly related to the working place and use of personal counselling. This I think is necessary if they shall not give up and retire» (02:05:56).

As concerning the employers it was argued that knowledge of the demographic challenge of individual firms and the benefits of employing and retaining older workers was lacking in many firms. Government policy in this area could be the provision of tax incentives for investment in competence and knowledge building for the experienced worker. In relation to this the economic aspect in terms of incentives for active ageing policy was seen as important. One of the expert felt that the incentive in the form of lower employer contribution (4% lower) for employees above 62 years (This is part of the IA treaty) was to little to make a difference because of all the opposite incentives for withdrawing from the labour market that were present in the form of the AFP scheme, and the general welfare system. Stronger incentives were needed and more use of carrot and stick policy was advertised for. The French example where there is no employer contribution for employees above 55 years of age was mentioned as an example to follow and that would help. On the other hand one expert argued that because there were costs associated anyway with these different pension schemes and particularly the AFP scheme, employers did have an economic incentive to keep workers in work instead of letting them go on pensions. Thus even small incentives could be helpful if they were applied as resources for firm's active ageing policies involving targeting policy towards the need of older workers. Other panellist agreeing on the needs of economic incentives also pointed out that if these incentives were very costly, the revenue need of the state had to be sought elsewhere and so complicated the easy logic of the incentive thinking. Another barrier was the uneasiness of combining partial work and pension benefits as a way of making a gradual shift from full employment to retirement. This was because what was seen as rigid regulations within the AFP scheme. Thus instead of combining work and pension people instead chose to leave labour market all together because of this barrier.

As concerning unemployed older workers removing barriers, because of too strong employment protection, by increasing the possibilities for temporary employment was mentioned. In this way it was argued more numbers of older people would get the chance of getting access to the labour market.

The experts also questioned whether preventative policies in the area of disability were good enough. It was pointed out that in some firm health, environment and security management were of poor quality resulting in exclusion instead of inclusion of disabled workers.

Mobilisation of Elderly and Agenda Setting

At the opportunity side one of the experts argued strongly for the importance of mobilisation of the elderly themselves. He saw this as a key issue across all the four areas:

«I don't think there will be any progress in this area (active ageing) until the older people themselves are getting on the stage and mobilise with even stronger force and start to fight for their interests as other groups have done. If the senior population still continue to withdraw and are satisfied with what they got from the National Insurance, then I think we have lost, and therefore we have to back up the new senior generations. However I think they are on their way and there I see the opportunity» (1.41:34).

As example of this optimism the expert pointed to the new senior movements, for instance the Danish Age Cause (*Alderssagen*) with over 500 000 members with a broad engagement concerning all dimensions of life and not only pension benefits and old age care. The basic perspective for this panellist was that the group of older persons had to compare themselves with and do as other groups had done before them, i.e. groups that had been in positions where they experienced exclusion, discrimination and not being part of society. Thus this issue was fundamentally about increasing this group's power and influence in society and that government policy should support such ambitions in the same way as they had supported other groups struggle for inclusion. The expert (s) also pointed out that in terms of economic resources, consumer power, health, education, and share numbers this group had all the means to increase their influence in the future.

Not everyone agreed on this description, i.e. as something that was going to happen in the future but argued that this situation of increasing economic and political power of older people had already taken place.

The concept of a senior career was also used including activities that not necessarily was considered as profitable in a narrow sense but was important in a societal context and that ought to be seen as profitable.

Incentives Directed at the Firm Level

The logic behind the IA treaty was seen as an opportunity because it brought together the actors responsible for pushing people out of work. The concept of cooperation between the main actors of working life and the possibility for a more holistic approach in dealing with the great emigration was seen as valuable and an aspect that ought to be continued through a new IA treaty.

One of the panellists argued that if it is profitable for large or smaller firms to implement senior and active ageing policies they will do so. And so this pointed to the importance of having carrot and stick measures directed at the firm level. Another point was how key issues such as equality of opportunities between men and women had entered the agenda of annual reports. This had an important signalling effect and as well as a substantial core that made firm management to act on these issues. Thus if senior policy also entered the annual report as an issue that firms had to compete on in order to perform with the best results this would become an opportunity for strengthening active ageing at the firm level. Of more practical measures opportunities for combining 80% work with 90 or 100% pay was mentioned as important incentives for prolonging work careers. (1.53.12)

One of the firm level expert very strongly recommended firms to check the possibilities to invest the amount they save by reduced employers' social security contributions for elderly employees into active measures in order to further prolong their careers. Experiences from a municipality illustrated that if measures was set in based on surveys of employees own demands older employees prolonged their career by one to three years. Accordingly, the employer saved the expense that otherwise would be spent on contribution to AFP. What is needed is an awakening among the employers to think in more active terms, i.e. define an amount in the account as savings for use instead of «reduced expenditures». Further, to strengthen the employers focus on measures pursuant to the IA treaty a suggestion was to require particular action at the firm level as a precondition for financial firm support. The carrot and sticks logics were supported by the experts, not at least as a mean to strengthen the community perspective in this, as formulated by this expert:

«If the employers' social and security costs are reduced the community economy should be taken into consideration. It doesn't come from nothing, there should be done some changes here. To help firms to think in trajectories like the municipality we heard of. The reduced costs given to firms should require a plan made in the firm which in turn had to be approved by the authorities. This is an excellent idea; in addition to direct the attention to what is profitable for the community. If a person retires one year earlier, it makes a huge amount of expenditures for the community. By putting some investments into measures at firm level great community savings are expected. To retire could be profitable for the employee and for the employer whereas for the community it is extremely expensive. Still, there is a long way to go when it comes to laws and regulations» (02:08:59).

The experts agreed upon the importance of some firms being positive models for others. Spreading information about «well-performing» firms is already a strategy in the IA project, so that firms can learn about other firms' experiences. In connection with this opportunity the fact that employees in Norway are overall highly educated could increase the possibility for replacing employees to other kinds of tasks.

On the basis of personal experience one of the firm experts illustrated what could be a positive model. I.e. the firm he represented used some conditions to be fulfilled if the firms' leaders could get a bonus. That is, the leader has to show what he had done against older or handicapped employees according to the soft values penetrating the firm. Moreover, some of the measures could be a win-win situation. For example, the firm participates in a handicap-program and included handicapped by giving them an

office while the public handicap program offered the wage. Due to the training, the employee would have raised the chance to get a permanent work. Likewise, there should be a similar hospitality program for elderly, according to the expert (s).

Another example on spreading of responsibility throughout the firms is to give them budget responsibility. Instead of centralising the decisions the lower level leaders decide upon early retirement. Thus, the decision makers got a closer ownership to the budget and consequences of early retirement, both for the firm and the employee.

Incentives and the Pension System

A repeated barrier for active ageing/prolonged working life career mentioned by the expert is the incentives in the pension system. The rule of «best income years» as the basis for the pension is a barrier against prolonged working careers. As the pension system is under revision the experts expect changes that to a lesser extent will pull employees to retire early. A connected and widely agreed opportunity is the suggestion of making it possible to combine income and pension. A lot of models are thinkable according to the experts. If a person, after he/she has retired, change one's mind and wish to go back to work this is almost impossible today. The choices of either work or retire push employees out of work. Thus, a more flexible working hour's scheme could be socially beneficial with respect to make use of competence in addition to be a good community economy. A more radical suggestion is to implement a model of time-account. The intention is that employee over different periods of time make use of their pensions rights instead of waiting until 100% retirement. However, one of the experts made clear a disadvantage with flexible schemes: the more flexibility the more complexity when it comes to practise. In removing a fence there will always be a risk of putting up a new one. Therefore, one has to spell out both the advantages and disadvantages by flexible schemes.

Another important measure was to make employees conscious about career planning throughout their whole working career. In that way both employees and employers would be prepared to change the working conditions and tasks. For instance, head-teachers could go back to education and employees working in the front line could get more secluded tasks. However, there should be no reason to reduce the wage in these cases; enough profit lies in prolonged working careers.

Health Care and Active Ageing

A New Opinion on Elderly; from Miserable Patients to Competent Users

Education is seen as an opportunity also when it comes to health due to the strong connection between education and health. However, the health expert in the panel put forth, in his view, an even stronger opportunity to active ageing. He strongly recommended adapting another opinion on elderly and the phenomenon ageing. If we are going to work against active ageing we have to quit perceiving older people as sick, miserable and useless, according to this expert:

«There exist quite stereotype opinions and the myths says that this is a group who hasn't got much left to spend, they are sick and end up at elderly institutions and

are useless all of them. The policy debate are characterised by the evasiveness of taking a real fight with the elderly! As equal discussants, they are afraid of this today, it's not yet possible to do that. It is not possible to have a real fight over the table, in the full view of the audience. Instead, the starting point is that this group has to be defended. <...>This picture, which is also adopted as a wrong picture by the elderly themselves, we have to break» (02:18:33)

In addition to the importance of changing opinions of the elderly there should also be given weight to focus on activity in the «fourth age». In the very last phase in life there are a lot of limitations but also possibilities. If elderly initiatives of activities are appreciated they will continue to be active. Currently, there is more lack of cultural and social activities than health care. In addition, another wrong perspective in the policy for elderly is that everybody lives together in a family. The case is that your marriage partner die or that your children move out, which could make the elderly more passive and isolated. What could change the passivity is the trend among the elderly to use their consumer power. According to the experts the consequence might be participation in voluntary organisations and in politics.

As a contrast to the picture of elderly as miserable and sick, several of the experts stressed the point of user control, power and user owned services as a trend to be taken into consideration in the future. That means increased power to the richer and educated elderly. Among others, the professional monopoly might be challenged:

«Again, the key word is user control. In other European countries there is a debate on giving the user more power in choosing among different services. This does not necessarily mean de-professionalisation, because we might use the profession as counsellors. Our generation will use the doctors as counsellors, and we will choose what kind of technical aid to use, for instance» (2:56:16)

The Lack of Prevention in Health Care

A barrier in the health care is the prioritising of cure instead of prevention. The focus on cure is connected to the huge possibilities according to the technical development and prestige in technical advanced medical specialities. This is supposed to advantage some medical areas on the expense of others. I.e. to get quickly treatment for simple diseases is of great importance to function in working life but might not perceived as that important from the perspective of the health care system where the most complicated technical advanced treatment are prioritised before simple treatments. The question of prevention also concerns questions of organisation and coordination:

«Further, voluntary organisations, I have been involved in local government and it is incredible difficult to receive money to the necessary preventive measures, for instance local activity. A lot of resources could be spent, i.e. elderly could transport food for others, senior courses, elderly university, several positive and cheap measures but which are in need of an initiative from the municipality. In the squeezed economy even the small allocations are difficult to get. Still it is a mystery to me why elderly and their resources are not used, because it would have stimulated activity among the elderly. It's all about money» (2:37:01)

However, the experts agreed upon that knowledge about consequences is of importance. Politicians might not know how crucial small amounts of money could be, for instance the organisation of food transport was laid down because the cut down of the petrol grant. Knowledge and impart of the knowledge is the keyword:

«I believe there are still huge barriers in the lack of knowledge. To change the culture and to be aware of the possibilities that exist there is much to draw upon. Small moves can bring about huge advantages. By this knowledge we can avoid to cut of the one and important position if one know about the positive effects in the other end» (2:41:18)

There is also a lack of knowledge among the elderly themselves and the effects of exercise, for instance. One of the firm level experts pointed to the information and motivation they gave their older employees about exercise in addition to free access to training facilities. However, in his view, the firm was punished for promoting prevention because the firm has to pay tax for offering their employees training facilities.

A Better Balance between Public and Private Care

Several of the experts pointed to the importance of adapting for the family or the social network to take care of the elderly. According to the experts, the health care system has lost the dimension of private care in the wake of the evolution of the welfare state and the extensive public care. A few of the experts asked for an agreement allowing staying at home with sick parents, as a parallel to stay home with sick children.

«It's a question of how to combine work and care for the family. We have been concerned of bringing forth enough children. It has been focused on 'the parents of the young children' the last two decades, which has been necessary, but now the next step should be for instance parents with disable children or persons with sick and old parents. To the point; my wife had a three months maternity leave, which was too short. Now she has a mother in need of help and care, and we are thinking, do we have to start again! Working in the public sector make it easier for us, but establishing social rights on this is my suggestion» (2:56:16).

The lack of personnel in care in the future actualises new thinking about care for the elderly. In addition to new methods to involve the family the status of the professionals should be heightened according to the experts.

Coordination and Organisation in Health Care

A key problem in the health care system is the lack of coordination between the specialist and primary health service. The consequence of the gap between primary and specialist care is the break down of responsibility leaving the patients more or less on their own. A challenge in the future is to clear up the responsibility:

«If we take the patients seriously – that someone has to have the responsibility whether be the medical institutions, the specialist care or the primary care, in the transition between the levels, both for disabled or elderly, there is a lot to be improved here. In addition we find barriers between the state and the municipality, and between different pensions benefits, some health care services and also when it comes to technical aid services: you are not allowed to receive this or that technical aid, this kind of car, but not that kind, someone decide for you, sometimes on the municipality budget, sometimes on the state budget. People does not understand the reason behind this fragmentation» (2:56:16)

Sometimes the problem is that the municipalities, for instance, do not use their possibility to push for elderly initiatives or collaborate with voluntary organisations.

«The way it is organised, not at least the municipalities intervention when it comes to the most elderly and what to do to make their lives more active. Here, we have

to confront the municipalities economy and their priority between economy and service because a lot of the elderly will claim better services in the future<..> I have to say that the preventive perspective is not prioritised today. This is also the case for children and youths, in schools, one have to start already in primary school. The life-course perspective – a lot of money would be saved if prevention starts early.»

The coordination between the different sectors will, according to the experts, be even more crucial in the future because of the employers' responsibility in reducing sick leave. The state and the employer might represent different interests in some cases. The employer will profit on disability pension while the state will rehabilitate employees by involving the employer in order to avoid disability pension. Thus, in such cases it is important to ensure collaboration between the health system and the rehabilitation system.

Norway in Europe

In the discussion about active ageing in Europe the experts chose the approach of contrasts between Norway and Europe. The agreement on An Inclusive Working life was again pointed out as a success, not at least because it unite all the involved parties to work in the same direction. This is considered as a template to be building on in the future. Another contrast in the favour of the Nordic countries is the extended primary medical and care services at the local level. This sector is even bigger than the hospital sector. Due to this, elderly use the hospitals and medical services to a lesser extent than in Europe. We do also have a low degree of poverty due to the generous welfare state benefits. Further, Norway has very high labour market participation, combined with a high birth rate. The welfare state has made it possible for women to stay in work after becoming a mother. However, Norway has a high rate of persons excluded from the labour market due to different reasons. Norway has the highest rate of women in the labour market. However, inclusion of women in the labour force at the same time makes them vulnerable to be expelled from the labour market. Generally, high labour force participation seems to be followed by higher exclusion from the labour market which makes a big difference between the Nordic countries and the South and Eastern part of Europe. Thus, the experts hold that exclusion from the labour market is the most negative trait in contrast to the rest of Europe. The experts point to another consequence that might be a result of women's entry in the labour market namely the lack of private responsibility to take care of our old parents. Again the possibilities to take a «leave» when your parents are sick are pointed out by the experts:

«We have cleaned up in the birth and family area, even though we are not finished yet, we need 2,1 birth in average but have 1,8.., but we have not cleaned up in the area of work and elderly. If the pressure to take care of both your children and your parents combined with a working career, then it will have consequences on the birth rate. If you are supposed to take care of your children and your old mother then you don't have time to work. If the welfare rights are bad in one area they will have consequences on other areas too. I think we have to take this interplay into consideration and not look at isolated sectors» (3:40:41).

The experts' opinion is that the elderly, due to lack of private care, is the loser in the welfare state building upon full employment.

Barriers and Opportunities: A Summary of Discussion

In this main section we provide a summary of the discussion on barriers and opportunities. On the basis of this summary we very briefly give our account of the ranging of scopes. The section then offers a list of the main barriers and opportunities across different policy fields as identified by the experts as well as their suggested strategies in terms of workable policy tools for seizing opportunities for active ageing.

Barriers and Opportunities for Active Ageing Policies in Norway

As a way of summing up the panel discussion in terms of barriers and opportunities the following table contains the barriers and opportunities mentioned by the experts.

Table1. Barriers and Opportunities for Active Ageing Policies in Norway According to Experts in Panel Led Consultation.

Policy Areas	Barriers	Opportunities (means of overcoming barriers)
Labour market and pensions	Fixed and special Age limits	Removal of age limits and adapting time of retirement to individual functional work ability (Removal of the old age pension?)
Pensions/labour market	Final salary pensions within defined benefit arrangements	Removal of final salary pensions (These are typical within the public sector)
Labour market/(pensions)	Inflexibility between functional ability and wage setting	More flexibility between work ability, work tasks and individual wage setting
Labour market	Lack of adaptation of working place to functional ability	Adaptation of work tasks to functional work ability through physical/technical means, relocation of positions and reorganisation of time schedules
Labour market	Negative attitudes/discrimination towards older employees	Attitude change both on the employer and employee side as well as implementation of non-discrimination/ageism in firm personal policy
Labour market/(Education)	Lack of filling/renewal of competence for older workers The training is adapted to younger generations of employees	Competence investment for experienced workers as key aspect of personal policy. Tax incentives for competence/educational investment. Planning of senior careers Adaptation of the training to elder workers at their working place and by individual counselling
Labour market	More stressful working life and reorganisation /downsizing of firms. Last point especially important for larger firms and possibly less flexibility there in terms of employing older workers. Outsourcing of more easier work tasks in these firms increase the potential for push out of older workers	IA treaty on a more inclusive working life, IA firms on the firm level. More flexibility in smaller firms on employing older/more experienced employees because better opportunity to adjust functional work ability, work tasks and wage setting. Cooperation between firms on relocation of older workers. Investment in terms of resources and personnel to manage and implement policies of relocation within and between firms.
Labour market	Unemployed older people face barriers for entering the labour market	Increasing the use of temporary employment contracts as this reduces the risk for the employer in employing persons Lower employer social security contribution for older workers
Labour market/health	Lack of preventive policies on work injuries	Stronger enforcement of HSE policy on the firm level.Relocation of employees within firms (and between, see above)

Policy Areas	Barriers	Opportunities (means of overcoming barriers)
Pensions	AFP pension scheme provide incentives to leave the labour market	More flexible rules for combining partial use of the AFP pension and part time work. Employers especially within the public sector have incentives in the form of cost saving if they manage to reduce take out of the AFP pension.
Pensions	The Pension Scheme and the rule of «best income years» is a barrier against prolonged working careers Lack of possibility to combine work and pension	Revision of the pensions system demanding longer working career as basis for the pension benefit Possibility to choose to go back to work, to combine work and pension, flexible working hour schemes and a model of time-account
Labour market	Lack of knowledge on the personnel management side about the competence of older workers and the economic benefits of implementing senior and active ageing policy	Information and education in order to circulate knowledge on the benefits of senior policy. Putting senior policy on the firm level agenda by entering it in the annual report as an issue that firms had to compete on in order to perform with the best results. This would create an opportunity for strengthening active ageing at the firm level.
Labour market	To small economic incentives in the IA treaty for employing or keeping senior workers.	Stronger economic incentives i.e. removal of employer social security contribution for older workers. In general more use of stick and carrot policy towards firms in order to keep and employ older employees. (However a substantial reallocation of resources in the form of tax incentives may jeopardize the revenue need of the state to be used on other public goods)
Labour market/pensions/ Health	«The great emigration». Points to the existence of a substantial stock of people within working age but outside employment relying on National Insurance benefits and the challenge of reducing that stock. These people are not asked for/wanted/demanded in the labour market. Barriers consist of a complex combination of exclusion and push out mechanisms, pension and welfare arrangements, and attitudes.	Combining economic incentives and inclusive working life strategies. A continuation and broadening of the IA treaty Change in content of wage negotiations to include other aspect than wage and productivity may be conducive for including those with lower productivity. Arrangements combining reduced working time (80%) with full or nearly full wage (90–100%) Disability benefits as wage subsidy to employers, employing disabled persons. Lowering of social security benefits to avoid that groups of people choose to live on benefits instead of being in work, because the additional economic benefit of being at work is too small.
Labour market/pensions/ Health	Mismatch between individual firm profitability and societal profitability, for instance that some firms may externalise costs that have to be carried by society at large and other firms. Points to a basic tension within the economic system	Cost sharing strategies to increase the coherence between different decisions and to avoid cost shifting by bringing together the responsible decision makers. May bring about a better congruence between individual, firm and socio- economic profitability

Policy Areas	Barriers	Opportunities (means of overcoming barriers)
Labour market	Too strong employment protection in the current labour protection Act legislation works as a barrier against keeping older workers and prolong their working career	More flexibility in terms of allowing change of positions and wage settings.
General active ageing /voluntary sector	Exclusion of aged population	Mobilisation of older people in all aspects of life and society. Senior movements fighting for their rights as other excluded groups previously have done. Government policy to support their activities
Labour Market/Firm level	Lack of carrot and sticks at firm level	Investing saving amounts from reduced employers' social security contributions for older workers into active measures Requirement of particular action at the firm level as a precondition for financial firm support Introduction of senior policy in the annual reports as a competitive issue
Labour market/Firm level	Lack of information and learning about how to perform in firms Lack of responsibility for senior policy at the middle and lower levels in firms	Spreading of information about «well-performing» firms Spreading of responsibility to get a closer ownership to the budget and consequences of early retirement
Health	Wrong opinion on older persons as sick, miserable and useless Evasiveness of taking a real fight with the elderly because the opinion of elderly in need of being defended	Changing the opinion on both the collective and individual level to the reality: older persons are healthy, rich and can be used in several of society's arenas. Open up for a real fight with older persons as equal discussants in the full view of the audience
Health/voluntary sector	Lack of focus on activity in the «fourth age»Lack of cultural and social activities Family perspective and professional monopoly in care for elderly	Appreciation of elderly initiatives of activities Integrate cultural coordinators in health care Let the elderly use their user power/user owned services
Health	Focus on technical advanced medical specialities/Lack of prevention in health care	Strengthen the status of gerontology/change the medical education Ensure quickly treatment to simple diseases
Health	Lack of coordination of municipality and voluntary preventive initiatives Lack of knowledge among the elderly themselves about the effects of activation	Better organisation and improve the coordination of initiatives. Improve the knowledge about consequences on local and private initiatives for elderly activity «small moves can bring about huge advantages»
Health/Labour market	Lack of possibility to combine private care for parents with working career	Introducing welfare rights to stay at home with sick parents

Policy Areas	Barriers	Opportunities (means of overcoming barriers)
Health	Lack of coordination between specialist and primary health care systems	Improving the coordination between the levels in order to clear up the responsibility
Health/Labour market	A general lack of coordination between different sectors is actualised with the increased employers responsibility in sick leave and rehabilitation	Ensure collaboration between the health and rehabilitation system. Neutralizing the different interests the employer and the stats might have in the case of rehabilitation

As can be seen from the table above where we have tried to classify barriers and opportunities roughly into different policy fields. Based on this classification the key field of policy making is the labour market followed by pensions and then health. The third sector has a more peripheral role in active ageing. Still many of the issues cannot be classified in a clear-cut way and encompasses several policy fields and most of the barriers and opportunities will have secondary effects on most other policy fields.

Given the time restriction there was no time for the panellists to provide a complete list of five barriers and opportunities within each field with priority setting (but confer table above) and so what follows below is a list of the five most important issues across the four policy fields.

The Ranking of Barriers and Opportunities

- The most important barrier pointed out was the opinion of the elderly that has to be overcome to promote active ageing. That means both opinions on individual level and the collective level. Together these opinions work as pressures to retire early, or serves as a basis of stereotype roles of how to behave as elderly.
- Secondly, an important barrier is knowledge in general and how to fill-up of knowledge during the whole life-course.
- Thirdly, the economy and the lack of sticks and carrots in the pension and labour market policy.
- Fourthly, the legislation on age limits are not in line with the health conditions of the today's elderly. Neither are the lack of possibilities to combine work and pension.
- Fifthly, the increased demand of efficiency is a barrier to prolonged working career

Strategies for Overcoming Barriers and Seizing Opportunities

The panel discussed the concepts of barriers and opportunities and agreed on introducing strategies that were identified as innovative:

- For instance, a suggested strategy is to introduce the program «Inclusive working life II», that is to unify the decision makers working against labour market exit.
- Another suggested strategy is to establish a new welfare and labour market administration to improve collaboration and coordination.
- A third strategy is to secure user control and choice for older people.

Consultation Document: Barriers and Opportunities Identified in the Norwegian Active Ageing Study

As other European and OECD countries, Norway will have to face the challenges of an ageing population. Demographic change in the form of a future composition of the age structure, wherein the group of older persons makes up for a relatively larger share, whereas the group of young persons will decrease their share confront Norway with economic, social and health challenges. There are numerous ways to illustrate this change. For instance whereas in 1970 the number of persons aged 67 years or older amounted to 11% of the population, in 2030 this group is expected to account for 19 % of the population. Another way of illustrating the change is to look at the number of workers per pensioner: In 1967 there were 3,9 workers for each pensioner, in 2001 the number was 2,6 and in 2050 it is expected that this number will decrease to 1,6 workers per pensioner. In addition the average number of pension years will increase: In 1973 the average number of pension years or a 67 years old person was 14 years, in 2001 this was increased to 17 years and in 2050 the average is expected to be 22 years. The demographic transformation will imply a necessary transfer of resources from the group of economically active to the group of people previously active. In terms of income security, expenditure on public pensions will increase from 9.1% of Mainland GDP in 2001 to 19.7% of mainland GDP in 2050. The separate figures for old age pensions are 5.9% in 2001 to 15.2% in 2050 under current rules, and 12.5% based on the Pension Commission proposal. Also within the health and old age care expenditures are expected to increase, especially for the oldest of the old, 80+. This will also have implication for the structure of the labour market, as old age care and health services for older persons will have to expand. This means increased need for labour power within this sector.

The general scarcity of labour power imply a policy challenge in terms of recruiting people into the labour market and keeping them there as long as possible. However the concept of active ageing encompasses more than being active in the labour market and the economic sphere of life as it includes the possibility of participating in meaningful activity within the context of civil society, through voluntary organisations, more informal networks, family etc. The capability of people of living an active life in their non-work part of life must be valued in itself apart from its eventual beneficial impacts on for example health status and cost saving aspects. This may point to a certain tension within the concept between the production oriented dimension and the dimension concerning leisure activity outside the production sphere. Thus a key issue in active ageing will be the balancing of these dimensions and the need for flexibility in terms of combining work and leisure over the life course.

There is increased awareness of Active Ageing in Norwegian politics. The government and the social partners have agreed on some measures to improve labour market prospects for older workers (inclusive workplaces, senior policies). The overall objective of the government is to keep up the high labour force participation rates, one example being the measure taken to prevent further growth in the number of people on disability pensions. The policy approach is characterised by a high degree of consensus building and avoidance of conflicts through corporatist integration of the major labour market organisations into the policy process. Hence, Active Ageing policies in Norway have a strong focus on labour market policy and pensions. Current labour market policy focuses on the need to increase labour force participation and restrict early retirement. Training, skill development and other forms of learning are also in focus. The measures taken are based on voluntary agreements with the social partners, and information campaigns. Basically it is the traditional benefits to work line that is strengthened. The pension reform proposal is mainly driven by economic cost considerations, i.e. how to adjust the pension system through measures that secure long-term financial sustainability. Still, there are strong direct and indirect effects on active ageing from the pension reform measures as they are intended to provide incentives to stay in the labour market as long as possible. Health care issues, and especially policies aimed at the voluntary sector, are less prominent. In this way active ageing as a more holistic policy approach has not conquered the Norwegian policy agenda, but elements of this policy menu is picked up and applied in policy debate and policy formation.

The following tables present some of the barriers and opportunities identified within our study. When reading the tables please have the following caveats in mind: Firstly, the division of issues into opportunities and barriers are not fixed: I.e. often an opportunity seen from one angle represents a barrier from another angle and vice versa. Secondly, the placing of issues into specific policy fields should be seen as somewhat haphazard; thus an issue of health may be relevant to pension policy for example strong health inequalities in terms of expected longevity may represent a barrier for pension reforms. This point to a core topic of active ageing namely the interaction of policy fields and the need for coordination, horizontally between them as well a vertically between different organizational levels.

Table 3. General and Labour Market Barriers and Opportunities

Barriers	Opportunities
<p><i>State finances</i> can function as a barrier. Compared to Finland and Sweden, were economic crises in the early 1990s forced the countries to take actions to restrict early retirement, Norway's oil revenues makes it harder to get the message through to the social partners that it is necessary to take action. (In general the increasing number of pension years is the result of a wealth effect that enables people in the rich world to spend more years at the end of the life course outside paid employment.)</p> <p><i>Small firms:</i> Economic life in Norway is very fragmented, with a large share of small and medium sized firms. The presence of small firms may represent a barrier towards implementing Active Ageing policies at company level. Thus, is there a gap between small and large firms in terms of senior- and inclusive working life policies?</p> <p><i>Knowledge gap:</i> not much knowledge about how Norwegian firms strategically adapt to an ageing labour force. Studies on company level are important to get a better understanding of the dynamics of attitudes, personnel policy, and company culture in treatment of older workers.</p> <p><i>Introduction of market-oriented measures in most sectors of the economy.</i> This has led to a debate over the negative consequences of modern capitalism. Previously public owned industries like the postal services and the railways have all been forced to reduce their staff during the 1990s. Usually, the older workers seem to be the first out. Has the strong and general focus on senior policy/seniors affected these staff reduction processes or are they just window-dressing?</p> <p><i>Contradictory aims of the inclusive working life program:</i> The aim of reducing sickness absence might override the inclusion of marginalized workers. The size of the financial support and the fact that there is no quantitative targets set for the other aims in the agreement can indicate that sickness absence are the main objective in the programs. This view is also shared by our informants. The committee reports and policy programs reflects this style of encouragement in formulations as «companies are urged to adapt tasks», «are supposed to implement senior policy», «to stimulate continued work» and so on. The aims concerning disabled and older workers seem to have a more symbolic character.</p> <p><i>Veto power of social partners:</i> The established collaboration system between the social partners has resisted radical changes in the system of welfare rights. Consequently, we have to take into consideration the <i>tripartite collaboration decision making system</i> as a barrier against active aging.</p> <p><i>Changing preferences:</i> Another barrier is elderly employees changing attitudes to work. Elderly preference to work part-time and retire early could, among other factors, mean negative attitudes against work. Still, this group doesn't represent the majority.</p>	<p><i>Tripartite cooperation between the government and the social partners:</i> Active Ageing policies call for coordination between different actors in the labour market as well as coordination between different policy fields. It is important to note that Norwegian working-life is highly organised with a comparatively high level of union membership and membership of firms in employer associations. There is a long tradition of corporatist bargaining between these parties and the government. Our informants also stress that this tripartite cooperation has been vital for the development of the Norwegian welfare state, and that the system eventually will be able to handle the challenges. <i>Low general unemployment:</i> The cornerstone of Norwegian labour policies is low unemployment, combined with high (but declining) employment rates for older workers. Is generally low unemployment rate a precondition for the development of a labour market that is open for all age groups? <i>Enterprise focus:</i> Initiatives taken so far (CSP, and the National Initiative) have a clear focus on the enterprises themselves. Initiatives on company level are essential to reduce early retirement. In order secure qualified labour firms will have to put senior policy on the agenda. More and more companies see the value of formulating a coherent personnel policy for all age groups.</p> <p><i>Media focus:</i> Media gives more attention to senior policy as such.</p> <p><i>Focus on the firm level and the working conditions.</i></p> <p><i>Subsidies for keeping older workers:</i> Increased financial support could be an opportunity for maintaining older workers. A question is how possible and reasonable it is to set in financial support to prolong working careers. This opportunity is mentioned by a few of our experts. The financial advantages by supporting employers to maintain older workers seem obvious compared to the burdens by paying AFP. On the other hand this could have negative effects in discriminating or stigmatising older workers. It could also remove the currently strengthened responsibility of the employers and employees back to the authorities.</p> <p><i>Legitimacy of policy measures and goals:</i> question of legitimacy among different groups are of great importance. The main measure, An Inclusive Working Life, can be seen as a typical example of policy with strong legitimacy.</p> <p><i>The experience surplus:</i> Older workers posit experience and formal competence as a valuable form of human capital in larger degree than younger age cohorts on the labour market.</p>

Barriers	Opportunities
<p>Anyhow, this is seen as an important barrier by the authorities, due to the measures set in. Moreover, the attitudes to early retirement are one of the main barriers reported from the experts' interviews. <i>The skill deficit</i>: older workers lack of skills. Even though the general population in Norway is well educated the elderly are still the looser. During the last decade education for youths has been in focus implying that the gap between the elderly and youths has widened, and makes the competition in labour more favourable for younger generations.</p> <p><i>Working environment</i>: A main barrier on firm level is the working environment or conditions. As we have pointed out the main reason to choose prolonging working career are factors connected to the daily working life. Educated people seems more often to prolong their working career, due to interesting tasks and the feeling of participating in the firms core activities. That could mean that people who is not taken care of and given interesting or relevant tasks is less inclined to enjoy one self and feel comfortable at work.</p> <p><i>Lack of company leadership</i>: The lack of employers' responsibility in taking care of elderly is also a barrier in active ageing. Our informants find it relevant to specially underline the role of the firm leadership as a barrier. They are not aware of their own importance to influence their employees' attitudes or to work or the working conditions. In addition, this might reflect employers negative attitudes against older workers, thus pointing at discrimination as a barrier.</p> <p><i>Job capacity requirement excludes workers</i> Currently, there is a smaller chance to keep a job if you are not 100 per cent employable. This point could be strengthened by the fact that there are no longer traditions for policies limited to special target groups. <i>Lack of flexibility</i> still seems to be a barrier to participate in labour market.</p>	<p>(Confer the slogan of CSP: Senior Gold)</p> <p><i>New technology and productivity increase</i>: Labour saving technology within the old age care sector, for instance by applying robots to perform house cleaning and other necessary daily routine activities may liberate time for carers to concentrate on other aspects of the care situation. General productivity increases within the production of goods sector makes labour power available for other more time consuming work activities within the service sector. Generally productivity increases are faster within the production of goods than within services, that are less capital intensive (for instance hair dressing) but more labour intensive. This may change in the future through smart housing technology etc.</p>

Table 4. *Active ageing and pension systems*

Barriers	Opportunities
<p><i>No automatic life expectancy adjustment within present system</i> (Number of expected pension years increase not taken into account)</p> <p><i>Weak correspondence between life time income and pension benefits</i> (Best years rule, 40 years of earning)</p> <p><i>Unequal incentives:</i> However this general view has to be qualified as it could be questioned whether these incentives to work are equally divided between different income groups. Critics argue that the way the minimum pension is organised through a guarantee pension creates disincentives for those with lower incomes, whereas increased incentives is provided for high income earners through the proposed rules for benefit calculation (i.e. stronger income relatedness).</p> <p><i>AFP scheme as a retirement incentive:</i> According to the interviews included here the most important aspect of the pension system and pension reform seems to be the AFP scheme which is viewed as problematic in an active ageing perspective. It is seen as representing a barrier towards extending the working career for those in good health that could have continued to work as well as representing an expensive cost burdens to firms. There has been an increasingly focus on leisure and the possibility to retire earlier.</p> <p><i>Time perspective: short term and reactive:</i> Type of branches is of relevance for what kind of senior policy could be implemented. Branches operating in competitive markets have business arguments for implementing senior policy. If senior policy serves the aim of business it will be realised. Skilled and unskilled labour is also of significance here. Companies employing unskilled female workers have a tendency not to implement incentive measures because of the workers dependency to earn for their pension. On the other hand, unskilled work often implies hard work demanding preventive measures. However the impression is that such policies of integration are made increasingly difficult because of increasing competitive demands. Whether this division is the case also on the aggregate level is not clear. If this difference between the sectors is losing its importance that may not be very surprising when taking into account the increasing demand for efficiency, productivity increase, privatisation and competitive exposure i.e. to apply the basic logic of the private market onto the public sector.</p> <p><i>A possible dilemma between the demands of the market logic and the goal of an inclusive working life:</i> In Norway relatively high wages, and a relatively generous welfare system is reflected in high labour productivity as a precondition for competitive success on the world market. Within this context it may become increasingly difficult to include and activate more marginal groups with lower labour productivity in the midst of generally high levels of labour market participation.</p> <p><i>Pull, push and jump factors:</i> Economic incentives in the form of generous early pensioning schemes (pull factor),</p>	<p><i>Pension reform proposal:</i></p> <p><i>Remaining life expectancy adjustment.</i></p> <p><i>The principle of life time income as basis for pension benefits</i></p> <p><i>Introduction of actuarial deductions in the proposed flexible retirement element of the NIS</i></p> <p><i>Life course perspective:</i> The firm interviews point to the importance of a life course perspective on active ageing. I.e. a good active ageing or senior policy requires a good junior policy. This means that attention within the firm has to be on both ends both recruitment policy as well as policies to keep older workers. In this way active ageing policies at the firm level are more about securing the right balance between different age groups than on just keeping older employees. The importance of this balancing view is that it enables a good division of burdens between age groups (for instance in work characterised by much physical strain) as well as securing transformation of competence and new ideas from older to younger persons and vice versa.</p> <p><i>AFP-scheme as Opportunity:</i> The APF scheme gives the majority of the employees a choice to fulfil alternative activities outside the labour market.</p> <p><i>Time perspective: Long term and proactive:</i> established and permanent personnel policy in firms before experiencing the demographic challenge. Two, maybe three, of the firms could be characterized by a value oriented personnel policy and a social responsibility for their employees as well as taking responsibility for the societal development. What is typically for these firms' are the long term strategy, and adhering policies set in before the demographic challenge become a crisis. Typically, these firms have leadership emphasising this policy and use it as a part of the companies building of trademarks.</p> <p><i>Private vs public sector context?</i> The interviews point to the importance of different contexts of firms and how it may impact their space for integrating people with reduced work abilities or with disabilities. There seems to be somewhat more room for pursuing such policies within the public sector than in the private firms here analysed. On the other hand the historical experience of the two production firms also points to a form of corporate responsibility (to apply the current fashionable term) of integrating workers, existing long before that term was applied in modern corporate terminology. For active ageing this implies that policy measures must encompass incentives, work environment and health measures, as well as creating more</p>

Barriers	Opportunities
<p>bad or physically demanding working conditions (push factor) and the preference for leisure over work-time (jump factor) are all at play in determining the retirement decision of older workers and often there is an interaction between factors which adds up to a complex pattern which rules out any single cause explanations of the retirement decision. In this respect pension deductions or increments will probably have a positive effect on prolonging working life. However active ageing policies based only on such economic incentives is bound to fail if it is not accompanied with measures aiming at improving working and health conditions as well.</p>	<p>soft and gradual exit ways from work to pension through combinations of reduced working time and more leisure. And policies must relate to the different contexts of firms and employees within and between branches of the economy.</p>

Table 5. *Active ageing and health systems.*

Barriers	Opportunities
<p><i>The cultural/life style barrier:</i> The preconditions for an active age have never been better. However, due to demographic ageing the authorities is dependent on activity for healthy elderly in particular manners, namely to be used in taking care of them selves and to give something back to the community in order to lighten the burden. This challenge is even stronger because of the manifested cultural norms of self realisation among the older population. Accordingly, the barrier is only to some extent possible to overcome by political tools.</p> <p><i>Healthy Pensioners choose leisure instead of work:</i> Improved health enables people to participate in economic activity, but healthy and wealthy pensioners prefer leisure activities (travelling, sports, cultural participation etc.) instead of work.</p> <p><i>Lack of coordination and dialog:</i> There seems to be too little coordination and dialog between the doctors and those involved in daily care for elderly. The lack of collaboration between the primary health care and the specialists care is a recurring issue. The financial mechanism are some of the reasons why patients to fast is handled over to the municipalities.</p> <p><i>A social division of active ageing:</i> In a European comparative perspective Norway has wide differences in health between different groups and these differences are growing. The traditional strong emphasis on equality has not become a reality in the health area. The general health condition has improved but rich and well educated on average live 10 years longer than those on low incomes and short education. (Folkehelseinstituttet 2003:1.) This represents an important barrier to active ageing and represents a challenge for future health policy as well as working life policy. In addition the absence of discussions on difference in life expectancy and how these are strongly correlated with income and other social background variables is characteristic for the pension Commission's work. Within an ordinary pension insurance system the risk of outliving one's economic means is the reason for insurance. But within social insurance the redistributive aim is motivated partly by these differences in life expectancy that are related to income, i.e. richer people live longer than does poor people and hence to avoid or compensate redistribution from the income and pension years poor to the income and pension year rich redistribution is legitimated within this system.</p> <p><i>Health risks:</i> Physical inactivity, eating habits, smoking, alcohol and drugs</p> <p><i>Narrow medical focus:</i> lack of consideration of the social dimensions of health and care provision</p> <p><i>Lack of labour supply and especially lack of skilled labour within old age care and other services for the elderly?</i></p> <p><i>Lack of attention to patients with more complex diagnosis, psychiatric problems? How to balance priority between mental and somatic health?</i></p>	<p><i>General health level is high</i></p> <p><i>High level of health service provision</i></p> <p><i>Changing attitudes toward elderly:</i> Focus on self-responsibility instead of dependency may enhance status of elderly and open up for inclusion. However increasing inequality between groups of elderly may be an unwelcome outcome.</p> <p><i>Escalation Plan for Psychiatric Health Care:</i> Action plan to promote collaboration between primary and specialist health care in caring for people with psychiatric disorders. Strong focus on preventative measures. (But also danger of paternalism here).</p>

Table 6. *Active ageing and self-organising: Barriers and Opportunities*

Barriers	Opportunities
<p>Less activity among men than women in voluntary activities:</p> <p>Reaching the inactive: Real challenges for active ageing policies is to reach those who do not show up at activities like this, or do not have the personal resources to organise activities of their own.</p> <p>Thinking of elderly as one homogenous group: There is obviously also a large number of elderly who do not engage in self-organised activities, but who must be considered to be active (doing things on their own, taking care of grandchildren, etc.). It also seems imperative to resist the temptation to think of «the elderly» as a natural group, distinct from society at large. One cannot expect the elderly to behave qualitatively differently from younger generations.</p>	<p>Strong historical traditions of participating in voluntary organisations: In a comparative perspective Norwegian elderly score high in terms of participation and activities within civil society and elderly women are particularly active, a fact that reflect that these women have been active also in earlier periods of their life-course.</p> <p>Improved health condition of elderly: Many pensioners and especially AFP retirees are healthy and are characterised by a lot of resources. One of the reasons to retire is to use the leisure more active. Accordingly, this might be an opportunity to participation in other arenas.</p> <p>Intergenerational projects: Intergenerational projects might be especially conducive to active ageing, since they build bridges between generations and make it possible for citizens to retain strong links between their life before and after retirement. Policies for social inclusion in general must moreover be seen as important in relation to leading an active old age. For instance, a policy that secures a stable, lasting connection to the labour market, could create social networks that are crucial resources for people after having retired.</p> <p>Non-costly government assistance: Authorities can offer some non-costly assistance to self-oriented voluntary activities. Economic support in the initial phase of a project may be stimulating, since money is an important issue for those involved (when the activity is up and going, this seems to be required, since expenses are kept low through the attitude of sobriety). Providing localities to those who need it, is another form of assistance than could make it easier to create and run voluntary projects.</p>

Consultation Document Conclusion

Active ageing understood as policies of inclusion, integration and activity has to start early in the life course and include children and family policy (possibilities of combining work and child rearing) and educational policy (in which vocational training and systems of apprenticeships are essential for the firm level) to enhance the individual's capability of remaining active during the rest of the life-course. Within this perspective there is also a need to «rethink our social accounting practice» as argued by Esping-Andersen (2002) and see welfare measures as social investments rather than seeing them as «social outlays (that) are an unproductive, yieldless consumption of a surplus produced by others» (Esping-Andersen 2002: 9). Thus social investments made early in the life course may yield much later in terms of active ageing for instance as higher labour market participation rates. In this respect the specific Nordic welfare model has been relatively successful in terms of such investment policies that have contributed to especially high participation rates for women. In addition the traditional emphasis of full

employment policy and active labour market policy as well as the general consensus orientation of the social partners constitute part of a socio-institutional and cultural setting in Norway that in general should facilitate active ageing policies. A higher factual age of retirement and higher employment rates of older people in comparative perspective also means that Norway should have less substantial obstacles to reverse the current downtrend.

Both the remark on the life-course perspective and the various contexts of firms (see tables above) points to the importance of the time perspective and how different time horizons may exist both between different firms within national economies (for instance different sectors of the economy) and also between different work and welfare regimes. Given such possible different time-perspective within various political economies, evaluations of success stories in active ageing must take into account this time perspective, i.e. some policies may involve investments that will bear fruit at a much later time, others may involve small current costs and with immediate benefits, but may involve accumulation of costs at a later stage. Thus, how the active ageing calculus is set up in different countries will be decisive for what outcomes will count as successes and failures. Moreover, barriers in some contexts may be opportunities in others.

Conclusion

As stated in section 2.1. the meeting went on quite well with interesting discussions on several of the suggested topics. Already from the start it became quite clear that there was a mismatch between the ambitions for the meeting and the time allocated. As indicated by the moderator the scope of the meeting in terms of topics and substance would have required several meetings in order to cover all the themes fully and satisfactorily. Thus when compared to the points on the agenda (confer section 2.1.) the least covered ones (in terms of time devoted to the topic) were the European perspective, the ranging of scopes and priorities. In addition there was almost no time left over for providing comments on the Consultation Document (CD) which presents the key findings in terms of barriers and opportunities in our research project (confer previous section). Comments on CD were listed as the final agenda point. As concerns the time aspect what could be learned from the panel debate is that either a less ambitious agenda would have to be set or if resources had been available to arrange a series of meetings that together would cover all topics and tasks satisfactorily.

As concerns the questionnaire, the response in terms of written answers was not as good as hoped for. Only one of the experts supplied a written response on parts of the questionnaire. A second expert provided a written answer but without filling in the actual questionnaire. Still some of the other participants had used it as preparation for the meeting. Some of the experts found the scheme difficult to understand and fit their ideas into. The idea behind the questionnaire was to let the experts provide to us (the researchers) their own opinions on barriers and opportunities, their ranging of scopes and priorities before reading the Consultation Document. In this way, we would have secured some output on the issues of ranging of scopes and priorities even before the meeting. We found it difficult to make the «homework» of filling in the scheme a

compulsory task, as we feared this could have reduced the number of participants at the meeting, and so we made this into a voluntary task.

As regards the composition of the panel the basic premise was that there was no possibility for selecting a panel representing all interests and actors. Our selection was guided by three considerations. Firstly, to cover the main policy areas by including experts that possessed expert knowledge on each of the three areas. Secondly, we prioritised the inclusion of experts on the firm level with a mix from the public and private sector. Thirdly, we considered it important to include representatives from the social partners. Since experts from the firm level represented the employer side, we therefore chose to include an expert from one of the major employee organisations. Given this precedence and the limitation on the number of panellists, we had to exclude experts from self-organised organisation or more unconventional and critical voices in the active ageing and senior policy debate.

In this way, the panel was biased towards public policy making and state actors. This also to some extent explains why the panel debate went on in a very consensual manner, with few dissenting voices or conflicting views. The only issue where conflicting views was exposed concerned the discussion on paternalism and how far state policy should reach in terms of influencing or directing people's choices (confer 3.1.2).

Within the panel there was agreement on a comprehensive conception on active ageing, i.e. closest to a European conception and more distant from the US concept of «productive ageing». In terms of policy recommendations there was a strong consensus on the Inclusive working life strategy combined with reforms of the pension system encompassing incentives for prolonging working life. This need for a combined and broad strategy was also stressed in the consultation document as necessary in order to reach policy solutions with a high degree of legitimacy and consensus. The panel emphasised much more strongly the importance of attitudes and opinions towards older people as a barrier and the need to change them in order to promote active ageing than the consultation document did. Another point where the panel experts and the consultation document differed was on the evaluation of the difference between small and larger firms. Here we questioned whether small firms possibly represented a barrier to active ageing, to the extent that active ageing policy required knowledge and competence/expertise that smaller firms did not have financial capacity to afford. This point was commented by the experts who argued for a opposite view, namely firstly that larger firms more often had to face the challenge of restructuring and downsizing than smaller firms. Secondly, because smaller firms made possible daily face to face contact between leader and employees it was argued that this worked as a barrier against exclusion of older workers. In larger firms the distance between personal management and employees was wider and so made it easier to get rid of people which they did not have to face personally.

Finally an overall contrast between the consultation document and the panel debate recommendations in our view was that the latter one was more practical and policy focused in terms of proposals (i.e. ways of overcoming barriers/seizing opportunities) and also including some proposals such as lowering welfare state benefits and allowing more possibilities for temporary employment that are known to be controversial topics. In contrast to this the CD was more theoretically oriented and more questioning and

critical towards proposed policy solutions (i.e. those that are part of the general political debate and part of the standard policy menu developed within active ageing).

Descriptive Summary

This report provides the result from the expert panel meetings as a key element of the sixth work package (WP6) of the active ageing project. A main concern of this WP is to identify barriers to active ageing and means to overcome them. Panel led consultations with leading experts in each country is applied as a method in this process of identification. In this case, the result from the Norwegian meeting of experts arranged in Oslo on the 20th of April 2005 is reported.

The report is organised into the following main sections. The following section (2) describes the process of recruitment of experts, place and date of the meeting, description of methodology and implemented tools in the expert panel debate and finally the agenda of the panel discussion is provided.

Section 3 which makes up the bulk of the report provides the actual panel debate as it unfolded, but with some reorganisation of the arguments into different subsections in order to systematize and make for hopefully easier reading of the arguments.

Section 4 sums up the foregoing discussion and also offer the experts view on the most significant barriers and opportunities identified. In this section suggested strategies for overcoming barriers according to the experts is briefly listed.

Section 5 contains the Consultation Document, which provides the research findings from the different work packages in terms of barriers and opportunities within the Norwegian case study.

Section 6 concludes by giving a brief observation about the ageing panel discussion, the priorities and the recommendations.

Section 7 provide a Descriptive Summary.

Several annexes are amended that provide important information on the different stages of preparation for the panel led discussion in terms of input to participants etc. These documents provide the reader with relevant information in order to understand the background context of the meeting.

As a way of summing up the panel discussion in terms of barriers and opportunities the following table contains the barriers and opportunities mentioned by the experts.

Table 7. Barriers and Opportunities for Active Ageing Policies in Norway According to Experts in Panel Led Consultation. A summary

Policy Areas	Barriers	Opportunities (means of overcoming barriers)
LM and P	1. Fixed and special Age limits	1. Removal of age limits and adapting time of retirement to individual functional work ability (Removal of the old age pension?)
P/LM	2. Final salary pensions within defined benefit arrangements	2. Removal of final salary pensions (These are typical within the public sector)
LM/(P)	3. Inflexibility between functional ability and wage setting	3. More flexibility between work ability, work tasks and individual wage setting
LM	4. Lack of adaptation of working place to functional ability	4. Adaptation of work tasks to functional work ability through physical/technical means, relocation of positions and reorganisation of time schedules
LM	5. Negative attitudes/discrimination towards older employees	5. Attitude change both on the employer and employee side as well as implementation of non-discrimination/ageism in firm personal policy
LM/(Ed.)	6. Lack of filling/renewal of competence for older workers 7. The training is adapted to younger generations of employees	6. Competence investment for experienced workers as key aspect of personal policy. Tax incentives for competence/educational investment. 7. Planning of senior careers 8. Adaptation of the training to elder workers at their working place and by individual counselling
LM	8. More stressful working life and reorganisation /downsizing of firms. Last point especially important for larger firms and possibly less flexibility there in terms of employing older workers. Outsourcing of more easier work tasks in these firms increase the potential for push out of older workers	9. IA treaty on a more inclusive working life, IA firms on the firm level. 10. More flexibility in smaller firms on employing older/more experienced employees because better opportunity to adjust functional work ability, work tasks and wage setting. 11. Cooperation between firms on relocation of older workers. 12. Investment in terms of resources and personnel to manage and implement policies of relocation within and between firms.
LM	9. Unemployed older people face barriers for entering the labour market	13. Increasing the use of temporary employment contracts as this reduces the risk for the employer in employing persons
LM/H	10. Lack of preventive policies on work injuries	14. Stronger enforcement of HSE policy on the firm level. 15. Relocation of employees within firms (and between, see above)

Policy Areas	Barriers	Opportunities (means of overcoming barriers)
P	11. AFP pension scheme provide incentives to leave the labour market	16. More flexible rules for combining partial use of the AFP pension and part time work. Employers especially within the public sector have incentives in the form of cost saving if they manage to reduce take out of the AFP pension.
P	12. The Pension Scheme and the rule of «best income years» is a barrier against prolonged working careers 13. Lack of possibility to combine work and pension	17. Revision of the pensions system demanding longer working career as basis for the pension benefit 18. Possibility to choose to go back to work, to combine work and pension, flexible working hour schemes and a model of time-account
LM	14. Lack of knowledge on the personnel management side about the competence of older workers and the economic benefits of implementing senior and active ageing policy	19. Information and education in order to circulate knowledge on the benefits of senior policy. 20. Putting senior policy on the firm level agenda by entering it in the annual report as an issue that firms had to compete on in order to perform with the best results. This would create an opportunity for strengthening active ageing at the firm level.
LM	15. Too small economic incentives in the IA treaty for employing or keeping senior workers.	21. Stronger economic incentives i.e. removal of employer social security contribution for older workers. In general more use of stick and carrot policy towards firms in order to keep and employ older employees. (However a substantial reallocation of resources in the form of tax incentives may jeopardize the revenue need of the state to be used on other public goods)
LM/P/H	16. «The great emigration». Points to the existence of a substantial stock of people within working age but outside employment relying on National Insurance benefits and the challenge of reducing that stock. These people are not asked for/wanted/demanded in the labour market. Barriers consist of a complex combination of exclusion and push out mechanisms, pension and welfare arrangements, and attitudes.	22. Combining economic incentives and inclusive working life strategies. A continuation and broadening of the IA treaty 23. Change in content of wage negotiations to include other aspect than wage and productivity may be conducive for including those with lower productivity. 24. Arrangements combining reduced working time (80%) with full or nearly full wage (90–100%) 25. Disability benefits as wage subsidy to employers, employing disabled persons. 26. Lowering of social security benefits to avoid that groups of people choose to live on benefits instead of being in work, because the additional economic benefit of being at work is too small.
LM/P/H	17. Mismatch between individual firm profitability	27. Cost sharing strategies to increase the

Policy Areas	Barriers	Opportunities (means of overcoming barriers)
	and societal profitability, for instance that some firms may externalise costs that have to be carried by society at large and other firms. Points to a basic tension within the economic system	coherence between different decisions and to avoid cost shifting by bringing together the responsible decision makers. May bring about a better congruence between individual, firm and socio-economic profitability
LM	18. Too strong employment protection in the current labour protection Act legislation works as a barrier against keeping older workers and prolong their working career	28. More flexibility in terms of allowing change of positions and wage settings.
G/VS	19. Exclusion of aged population	29. Mobilisation of older people in all aspects of life and society. Senior movements fighting for their rights as other excluded groups previously have done. Government policy to support their activities
LM/F	20. Lack of carrot and sticks at firm level	30. Investing saving amounts from reduced employers' social security contributions for older workers into active measures 31. Requirement of particular action at the firm level as a precondition for financial firm support 32. Introduction of senior policy in the annual reports as a competitive issue
LM/F	21. Lack of information and learning about how to perform in firms 22. Lack of responsibility for senior policy at the middle and lower levels in firms	33. Spreading of information about «well-performing» firms 34. Spreading of responsibility to get a closer ownership to the budget and consequences of early retirement
H	23. Wrong opinion on older persons as sick, miserable and useless 24. Evasiveness of taking a real fight with the elderly because the opinion of elderly in need of being defended	35. Changing the opinion on both the collective and individual level to the reality: older persons are healthy, rich and can be used in several of society's arenas. 36. Open up for a real fight with older persons as equal discussants in the full view of the audience
H/VS	25. Lack of focus on activity in the «fourth age» 26. Lack of cultural and social activities 27. Family perspective and professional monopoly in care for elderly	37. Appreciation of elderly initiatives of activities 38. Integrate cultural coordinators in health care 39. Let the elderly use their user power/user owned services
H	28. Focus on technical advanced medical specialities/Lack of prevention in health care	40. Strengthen the status of gerontology/change the medical education. 41. Ensure quickly treatment to simple diseases

Policy Areas	Barriers	Opportunities (means of overcoming barriers)
H	29. Lack of coordination of municipality and voluntary preventive initiatives. 30. Lack of knowledge among the elderly themselves about the effects of activation	42. Better organisation and improve the coordination of initiatives. Improve the knowledge about consequences on local and private initiatives for elderly activity «small moves can bring about huge advantages»
H/LM	31. Lack of possibility to combine private care for parents with working career	43. Introducing welfare rights to stay at home with sick parents
H	32. Lack of coordination between specialist and primary health care systems	44. Improving the coordination between the levels in order to clear up the responsibility
H/LM	33. A general lack of coordination between different sectors is actualised with the increased employers responsibility in sick leave and rehabilitation	45. Ensure collaboration between the health and rehabilitation system. Neutralizing the different interests the employer and the stats might have in the case of rehabilitation

Key: LM: Labour market, P: Pensions, H: Health systems, G: General active ageing, VS: Voluntary Sector, F: Firm level, Ed: Education.

The panel discussion revealed that the key field of policy making is the labour market followed by pensions and then health. The third sector has a more peripheral role in active ageing. Still many of the issues cannot be classified in a clear-cut way and encompasses several policy fields and most of the barriers and opportunities will have secondary effects on other policy fields.

A list of the five most important issues in terms of barriers and opportunities across the four policy fields was identified. The most important barrier was the opinion of the elderly that had to be overcome to promote active ageing. That means both opinions on individual level and the collective level. Together these opinions work as pressures to retire early, or serves as a basis of stereotype roles of how to behave as elderly. Secondly, an important barrier is knowledge in general and how to fill-up of knowledge during the whole life-course. Thirdly, the economy and the lack of sticks and carrots in the pension and labour market policy were identified as important barriers. Fourthly, the legislation on age limits are not in line with the health conditions of the today's elderly. Neither are the lack of possibilities to combine work and pension. Finally, the increased demand of efficiency is a barrier to prolonged working career. The panel discussed strategies for overcoming barriers and seizing opportunities and agreed on introducing strategies that were identified as innovative: For instance, a suggested strategy is to introduce a program «Inclusive working life II», that is to unite the decision makers working against marching out of the labour market. Another suggested strategy is to establish a new welfare and labour market administration to improve collaboration and coordination. A third strategy is to secure user control and choice for older people.

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Annex 1

(Translated and adapted version made by authors of S. Ney (2005) «The Active Ageing Project»)

Active Age prosjektet

I de kommende år vil europeiske samfunn i økende grad erfare presset fra demografisk aldring. I gjennomsnitt vil europeerne leve lengre liv, ha færre barn og pensjonere seg tidligere enn i foregående årtier. Ifølge de fleste eksperter vil dette medføre betydelig ubalanse mellom generasjonene fra c. 2010 og fremover. Viktigere er det at denne ubalansen har store effekter på europeiske arbeidsmarked, sosiale sikkerhetssystem, helse- og omsorgssystem og den sosiale integrasjonen som helhet. Ut i fra dette argumenterer mange kommentatorer for at de europeiske sosiale modeller ikke lenger er levedyktige. Disse modellene bygger i stor grad på det sosialforsikringsystemet som ble innført av Bismarck i Tyskland i 1880-årene. Ett hovedargument for at de ikke er levedyktige er at de i tiden fremover vil bli for dyre å opprettholde, de gir for sjenerøse ytelser og færre yrkesaktive må i fremtiden bære en stadig større økonomisk pensjonsbyrde. Det er derfor tid for radikal strukturell reform, fortrinnsvis i retning av mer markedsorienterte systemer.

I løpet av det siste tiåret om lag, så har politikere hørt på disse argumentene og har, riktignok i ulik grad, forsøkt å tilpasse de europeiske sosiale modellene for aldersutfordringen. Men selv om argumentene for radikal reform av europeiske sosiale sikkerhetssystemer kan være overbevisende (World Bank 1994), så er det grenser for strukturell reform. For det første viser reformerfaringer at forsøk på å endre sosiale sikkerhetssystemer er politisk risikable spesielt med omsyn til helse- og pensjonssystemer (Pierson 1994). Pensjons- og helsesystem basert på solidaritet mellom generasjoner har vist seg å være svært populære blant de europeiske velgerne (Hinrichs 2000, Pierson 1996). For det andre; eksisterende europeiske velferdssystemer består av store, godt artikulerte, og nettverksdominerte institusjoner. I tillegg er disse institusjonene relativt tregt foranderlige. Derfor synes en radikal omlegging å være usannsynlig på kort- og mellomlang sikt. Sist, og mest viktig, så er det på ingen måte helt klart at ett radikalt brudd med sosialforsikringsmodellen alene er noen mirakelkur for de demografiske aldringsproblemene (jf. Orszag and Stiglitz 1999, European Commission 1999). I forhold til pensjonssystemer alene, så har studier vist at politiske tiltak for å øke pensjonsalderen (for eksempel gjennom å øke den obligatoriske pensjonsalderen, introdusere aktuarisk avkortning ved tidligpensjonering og lignende) har hatt relativt begrenset innvirkning på tidligpensjoneringen (OECD 1998). Dessuten har de potensielle følgene av de radikale reformmodellene for sosial rettferdighet og sosial likhet vært utålelige for mange politiske aktører i Europa.

Den demografiske aldringen representerer også en unik mulighet for europeiske samfunn. Nåværende og fremtidige generasjoner er ikke bare i en bedre helsetilstand enn før, de har også hatt utbytte av ett høyt nivå for opplæring og utdanning. Istedenfor bare å gjøre krav på den offentlige pengepungen, så er de eldre i en posisjon der de kan

gi verdifulle bidrag til de europeiske samfunn. En hovedutfordring for den demografiske aldringen er derfor å kunne gjøre bruk av denne menneskelige og sosiale kapitalen til beste for de europeiske samfunn.

Hvordan kan så europeiske politiske beslutningstakere møte utfordringen fra den demografiske aldringen? I tillegg til reformer av sosiale sikkerhetsordninger og helsesystemer, så har mange politikktaktører spesielt på europeisk nivå, argumentert for en bredere politikktilnærming. Heller enn å stole på konvensjonelle velferdsstatsinstitusjoner eller markedsincentiver, så har disse politikk utformerne, mest framtrædende den Europeiske Kommisjonen (1999), tatt til orde for en mer helskaplig og omfattende politisk dagsorden ofte innbefattet under slagordet »aktiv aldring».

Hva er aktiv aldring? OECD (1998) definerer aktiv aldring som:

«Muligheten for mennesker, ettersom de blir eldre, til å leve produktive liv i samfunnet og økonomien. Dette betyr at de kan gjøre fleksible valg i måten de bruker tiden gjennom livsløpet – til læring, til arbeid, til fritid og til å gi omsorg» (OECD, 1999: 84).

Men, fortsetter OECD, som regel møter eldre mennesker hindringer i forhold til å leve ett aktivt liv. Disse barrierene inkluderer dårlig helse, lite fleksible arbeidsmarked, dårlig offentlig politikk. Aktiv aldringspolitikk, er utformet for å overkomme disse hindringene for aktiv aldring.

Ulikt mer tradisjonell sosialpolitikk, så krysser aktiv aldringsagenden mange ulike politikkområder og involverer ett mangfold av ulike politikktaktører. For arbeidsmarkedet impliserer aktiv aldring det å overbevise folk om å arbeide lenger og tilpasse arbeidsmiljøet til eldre folk. Dette målet alene innebærer å gi tilgang til opplæring og nye kunnskaper gjennom ett individs arbeidsliv og å skape fleksible pensjonsordninger både på bedriftsnivået og i økonomien som helhet.

Innenfor området sosial sikkerhet betyr aktiv aldring at pensjonsordninger må tilpasses slik at de tillater deltidsarbeid og gradvis pensjonering. Denne tilnærmingen, mener Kommisjonen, er en mer «produktiv» måte å hankses med aldring på enn debatten om hvordan pensjonssystemet skal utformes. Og en slik alternativ tilnærming vil, ifølge Kommisjonen, påvirke individuell- og kollektiv pensjoneringsatferd. Innenfor denne må politiske beslutningstakere endre fagforenings- og arbeidsgiverpraksis. I tillegg må de politiske beslutningstakerne endre adferden til individuelle arbeidere og ansatte.

Innenfor helsefeltet krever aktiv aldring vesentlige endringer i forhold til dagens helsepraksiser både på individuelt og institusjonelt nivå. Ett aktivt liv i alderdommen, det vil si ett liv uten svekkende eller funksjonshemmende helseproblemer, vil blant annet avhenge av hvor godt individene har «passet på seg selv». Dette i sin tur vektlegger viktigheten av å øke forebyggende helsepolitikk i forhold til dagens lindrende/forbedrende praksiser. I tillegg, siden stadig flere mennesker passerer fra «den tredje» til «den fjerde» alderen (80+), så vil behovet for langtids helse- og eldreomsorg sannsynligvis øke. En dagsorden for aktiv aldring må ta opp spørsmålet om hvordan samfunn og helseomsorgssystemer kan organisere og levere effektiv langtidsomsorg.

Aktiv aldring medfører koordinering og samarbeid mellom ett mangfold av politiske aktører på ulike styringsnivå. Siden ideen om aktiv aldring krysser den tradisjonelle grensen mellom offentlig og privat sektor, så kan aktiv aldring og aktiv aldringspolitikk aldri bli kun ett offentlig ansvar. Det å muliggjøre ett aktivt liv i alderdommen til

europiske borgere krever nært samarbeid mellom politiske aktører innenfor det sivile samfunn. For at aktiv aldringspolitikk skal bli vellykket, så må statsinstitusjoner samarbeide med firma og med mangfoldet av organisasjoner i den tredje sektor (det vil si frivillige organisasjoner og selvhjelps initiativ). I tillegg så vil denne samhandlingen finne sted på alle styringsnivåer. Hvorvidt europeiske borgere vil være i stand til å føre ett aktiv liv i den senere delen av livsløpet avhenger ikke bare av det politiske rammeverket som er på plass på europeisk eller nasjonalt nivå. I avgjørende grad vil suksessen til aktiv aldringspolitikk avhenge av den fremtidige eksisterende praksisen i bedrifter, i sykehus, i utdanning og i individuelle hushold.

Dermed er aktiv aldring en svært ambisiøs politikkgenda. Aktiv aldringspolitikk har en målsetting om å endre måten vi oppfatter, forstår og handler i forhold til alderdom både på institusjonelt og individuelt nivå. Den vil kreve en koordinert tilnærming på tvers av politikkområder og på flere styringsnivåer. Enhver vellykket aktiv aldringsdagsorden må derfor ta hensyn til eksisterende offentlig politikk. Den må også legge vekt på forskjellige politikkrelevante aktiviteter innenfor komplekse nettverk av private og frivillige organisasjoner og etablerte institusjonelle strukturer. Aktiv aldringspolitikk, enten det er på regionalt, nasjonalt eller europeisk nivå er alltid plassert innenfor spesifikke institusjonelle, sosio-kulturelle og politiske omgivelser. I en svært reell forstand, så institusjonaliserer eksisterende europeiske velferdsstatsstrukturer normer og praksiser i forhold til arbeid, pensjonering, læring, helse og mest viktig i forhold til aldring. Disse sosio-institusjonelle omgivelsene representerer potensielle barrierer men også muligheter for å formulere og implementere aktiv aldringspolitikk.

ActinAge prosjektet, ett internasjonalt forskningssamarbeid finansiert av den Europeiske Kommisjonens femte rammeverk program, har gitt seg i kast med å utforske barrierer og muligheter for aktiv aldringspolitikk i Europa. I løpet av de siste 30 månedene, har flerfaglige team av samfunnsvitere fra 10 ulike Europeiske land (Østerrike, Frankrike, Finland, Tyskland, Italia, Norge, Polen, Tsjekkia, Sveits og Storbritannia) anvendt ett bredt spekter av tilnærminger og metoder for å utforske både visjonen om og realiteten til aktiv aldring i Europa. Siden aktiv aldring er ett politikkkfelt som går på tvers, så har *ActinAge* prosjektet fokusert sin forskningsinnsats på fire ulike politikkområder:

- Aktiv aldringspolitikk og europeiske arbeidsmarkeder
- Aktiv aldringspolitikk og europeiske pensjonssystemer
- Aktiv aldringspolitikk og europeiske helseomsorgssystemer
- Aktiv aldringspolitikk i europeiske sivile samfunn

I hvert av disse feltene, har prosjekt konsortiet anvendt både kvantitative og kvalitative forskningsmetoder for å undersøke barrierer og muligheter for aktiv aldringspolitikk agendaer på nasjonalt og europeisk nivå. Spesielt har *ActinAge* prosjektet brukt både statistiske data og informasjon innsamlet fra ekspertintervju i alle 10 landene. Dette er gjort for å vurdere i hvilken grad nylige og pågående institusjonelle reformer innenfor disse områdene har hindret eller fremmet den aktive aldringspolitikkgendaen. Akkurat

nå er *ActivAge* prosjekt konsortiet i gang med prosessen for å avslutte feltarbeidet og analysen av de ulike politikkområdene. Rapporter om funnene fra denne forskningen er tilgjengelig og kan lastes ned fra: <http://www.iccr-international.org/activage>

For tiden er *ActivAge* prosjektet inne i sin avsluttende fase. Her vil prosjektkonsortiet invitere politikktutformere, praktikere og eksperter til å kritisk granske og reflektere over funnene fra prosjektet. Dette betyr at forskningsteamene fra hvert av landene vil organisere en panelledet konsultasjon. (Det er dette møtet dere skal være med på i Oslo). På dette møtet vil fremtredende nasjonale eksperter innenfor aldringsfeltet overveie og drøfte, blant annet gjennom bruk av de data som aktiv aldringsprosjektet har frembrakt, hvordan en skal gripe mulighetene og overvinne barrierene for en aktiv aldringspolitikk i Europa. Resultatet fra disse individuelle nasjonale konsultasjonene vil bli formidlet og inngå i en avslutningskonferanse på høyt nivå ved den Europeiske Kommissjonen hvor *ActivAge* konsortiet vil presentere de reflekterte funnene (mellom andre resultatene fra vårt Oslo møte) til ett publikum av europeiske politikktutformere og eksperter.

Annex 2. The ActivAge Project (Original English Version)

In the coming years, European societies will increasingly feel the strains of demographic ageing. On average, Europeans now live longer lives, have fewer children and retire earlier than in previous decades. This, most experts agree, will lead to a considerable imbalance between the generations from about 2010 onward. More significantly, however, this imbalance is likely to have profound effects on European labour markets, social protection systems, health care systems, and societal integration as a whole. As a result, many commentators argue that European social models, mainly based on Bismarckian social insurance mechanisms, can no longer cope and that it is time for radical structural reform, preferably along the lines of more market-oriented systems.

Within the last decade or so, policy-makers in most European countries have listened to these voices and have, albeit to varying degrees, tried to ready European social models for the challenges of demographic ageing. However, although the arguments in favour of radically reforming European social protection systems are persuasive (World Bank 1994), there are limits to structural reform. First, reform experiences of the past decade have shown that reforming social protection systems, particularly health care and pension systems, is politically risky (Pierson 1994). Pension and health care systems based on intergenerational solidarity have proven remarkably popular with European electorates (Hinrichs 2000, Pierson 1996). Second, given that current European welfare systems consist of large, well articulated, and networked institutions, and given that these institutions are relatively inert, a radical shift seems unlikely in the short and medium-term. Last, and most importantly, it is not altogether clear that a radical departure from the social insurance model alone is a panacea for the problems of demographic ageing (c.f Orszag and Stiglitz 1999, European Commission 1999). In terms of pension systems alone, studies have shown that policy measures aimed at increasing retirement ages (e.g. raising the statutory retirement age, introducing actuarial deductions for early retirement, etc.) have had a relatively modest impact on early retirement (OECD 1998). Moreover, the potential implications of radical reform models for social justice and social equity have been unpalatable for many European policy actors.

Quite apart from potential policy problems, demographic ageing also represents a unique opportunity for European societies. Present and future generations are not only be in better health than ever before, they also have benefited from a high levels of training and education. Rather than merely making claims on the public purse, the elderly are increasingly in a position to make a valuable contribution to European societies. One of the main challenges of demographic ageing, then, is to tap into and activate this rich reservoir of human and social capital for the benefit of European societies as a whole.

How, then, are European policy-makers to face the challenge of demographic ageing? Apart from reforms of the social protection and health policy mechanisms themselves, many policy actors, particularly at the European level, have argued in favour

of a more broadly based policy approach. Rather than relying on either conventional welfare state institutions or market incentives, these policy actors, most notably the European Commission (1999), have called for a more comprehensive policy agenda commonly subsumed under the buzz-word «active ageing».

What is active ageing? The OECD (1998) defines active ageing as

«...the capacity of people, as they grow older, to lead productive lives in the society and the economy. This means that they can make flexible choices in the way they spend time over life – in learning, in work, in leisure and in care-giving» (OECD 1998: 84).

However, the OECD continues, more often than not older people encounter obstacles to living an active life. These barriers include poor health, inflexible labour markets and poor public policy. Active ageing *policy*, then, is designed to overcome obstacles to active ageing.

Unlike more traditional social policy, the active ageing agenda cuts across many different policy arenas and involves a plurality of different policy actors. For the labour market, active ageing implies convincing people to work longer and adapting work environments to older people. This aim alone involves providing access to training and new skills throughout an individual's working life as well as flexible retirement schemes at both the level of the firm and the economy as a whole.

In terms of social protection, active ageing policy means that pension schemes be adapted to permit part-time work and gradual retirement. This approach, which the Commission understands to be a more «productive» way of dealing with ageing than the pension design debate, will affect individual and collective retirement behaviour. On the one hand, policy-makers will need to change union and employer practices. On the other hand, policy-makers will have to change the behaviour of individual workers.

In the health field, active ageing requires incisive changes to present health practices at an individual and an institutional level. An active life in older age, that is a life free of debilitating or disabling health problems, will depend on how well individuals have «looked after themselves». This, in turn, emphasises the importance of increasing preventative health policy with respect to current ameliorative practices. What is more, as increasingly more people pass from the «third age» to the «fourth age», the demand for long-term care is likely to grow. An active ageing agenda needs to address how societies and health care systems can organise and deliver effective long-term care.

Finally, active ageing also implies the co-ordination and co-operation of a multitude of policy actors at different levels of governance. Since the idea of active ageing cuts across the traditional boundary between the public and private sector, active ageing and active ageing policies can never be the sole «property» or responsibility of the public sector alone. Rather, enabling an active life in old age for European citizens calls for close co-operation between different policy actors within civil society. For active ageing policies to be successful, state institutions will have to co-operate with firms and with the plurality of organisations in the tertiary sector (i.e. voluntary organisations or self-help initiatives). What is more, this interaction will take place at all levels of governance. Whether or not European citizens will be able to lead an active life in old age not only depends on the type of policy frameworks in place at the European or national level. Significantly, the success of active ageing policies will depend on prevalent practices in firms, in hospitals, in education and in individual households.

Active ageing, then, is a very ambitious policy agenda. In effect, active ageing policies aim at changing the way we perceive, understand and deal with old age both at an institutional and an individual level. It will require a co-ordinated approach across different policy arenas at multiple levels of governance. Moreover, any successful active ageing agenda will have to take into account existing public policies, diverse policy-relevant activities within complex networks of private and voluntary organisations, and as well as established institutional structures. Active ageing policies, whether at regional, national, or European level, are always situated within specific institutional, socio-cultural and political environments. In a very real sense, existing European welfare state structures institutionalise norms and practices related to work, retirement, learning, health, and, most importantly, ageing. These socio-institutional environments represent potential *barriers* but also *opportunities* for formulating and implementing active ageing policies.

The ActivAge Project, an international collaborative research effort financed by the European Commission's Fifth Framework Programme, has set out to explore the barriers and opportunities to active ageing policies in Europe. Over the past 30 months, interdisciplinary teams of social scientists from 10 different European countries (Austria, France, Finland, France, Germany, Italy, Norway, Poland, Switzerland, and the UK) have brought a wide range of approaches and methods to bear on both the vision and reality of active ageing in Europe. Since the active ageing policy agenda is explicitly transversal, the ActivAge project has focused research efforts on four different policy arenas:

- Active ageing policy and European labour market;
- Active ageing policy and European pension system;
- Active ageing policy and European health care systems
- Active ageing policy in European civil society.

In each of these fields, the project consortium has applied both quantitative and qualitative research methods to investigate the barriers and opportunities to national and European active ageing policy agendas. In particular, the ActivAge project has used both statistical data and information gleaned from expert interviews in all 10 countries to assess to what extent recent and ongoing institutional reforms in these policy areas have hindered or promoted the active ageing policy agenda. Currently, the ActivAge project consortium is in the process of completing the fieldwork and analysis of the different policy domains. Reports on the findings of this research are available for download at <http://www.iccr-international.org/activage>.

At present, the ActivAge project has entered its final stage. Here, the project consortium will invite policy-makers, practitioners and experts to critically scrutinise and reflect upon the findings of the project. This means that each country team will organise a panel-led consultation exercise in which leading national experts in the field of ageing will deliberate, using the data generated by the ActivAge project, on how to seize the opportunities and overcome the barriers to a successful active ageing policy in Europe.

The output from individual consultation exercises at national will feed into a high-level final conference at the European Commission where the ActivAge consortium will present the reflected findings to an audience of European policy-makers and experts.

Annex 3. Questionnaire Delivered to Panel Participants:

Barrierer og muligheter for aktiv aldringspolitikk i Norge:
(Barriers and opportunities for active ageing policy in Norway:)

Navn på paneldeltaker:
(Pannelist's name:)

1. Kan du forsøke å definere barrierer og muligheter innenfor de fire områdene gitt nedenfor? (Please try to identify barriers and opportunities within the four areas given below?)

	Barrierer (Barriers)	Muligheter (Opportunities)
Arbeidsmarked: (Labour market)		
1.		
2.		
3.		
4.		
5.		
Pensjonsfeltet: (Pensions)		
1.		
2.		
3.		
4.		
5.		
Helsesystemet: (Health system)		
1.		
2.		
3.		
4.		
5.		
Generell aktiv aldring/frivillig sektor (General active ageing/voluntary sector)		
1.		
2.		
3.		
4.		
5.		

* Har du flere enn fem barrierer/muligheter så sett inn ny linje i tabellen. Har du færre eller ingen så er det helt ok. (If you have more than five Barriers/opportunities please insert a new line in the table. If you have fewer that is ok too).

2. I forhold til de barrierer og muligheter du har identifisert ovenfor har du ideer til hvordan barrierene kan forseres og mulighetene gripes? Hvordan kan vi måle eventuell fremgang? (Regarding the barriers and opportunities that you have identified above, do you have ideas on how the barriers may be overcome and the opportunities seized? How can progress be measured?)

	Barrierer; hvordan forsere dem og hva er gode indikatorer for å måle fremgang? (Barriers, how to overcome them and what are good indicators for measuring progress?)	Muligheter: Hvordan gripe dem og hva er gode indikatorer for å måle fremgang? (Opportunities: How to seize them and what are good indicators for measuring progress?)
Arbeidsmarked: (Labour market)		
1.		
2.		
3.		
4.		
5.		
Pensjonsfeltet: (Pensions)		
1.		
2.		
3.		
4.		
5.		
Helsesystemet: (Health system)		
1.		
2.		
3.		
4.		
5.		
Generell aktiv aldring/frivillig sektor (General active ageing/voluntary sector)		
1.		
2.		
3.		
4.		
5.		

3. Hva er det viktigste området etter din mening av de felt som er nevnt ovenfor, for å få fremmet aktiv aldringspolitikk? (*What is in your opinion the most important area of those policy fields mentioned above in order to promote active ageing policy?*)

4. Ut i fra de barrierene du har identifisert, kan du oppgi de tre (til fem) som det etter din mening baster mest med å forsere? (*Based on the barriers you have identified, could you please mention three (to five) of them that most urgently are in need to be overcome?*)

- 1.
- 2.
- 3.
- 4.
- 5.

Takk for hjelpen.

(Thanks for your help.)

Annex 4. Consultation Document, (Norwegian version) ActivAge prosjektet: Konsultasjonsdokument WP6 Norge: barrierer og muligheter for europeisk aktiv aldringspolitikk

I likhet med andre europeiske og OECD land, så vil også Norge møte utfordringene ved en aldrende befolkning. Demografisk endring i form av en fremtidig endret aldersstruktur, der gruppen av eldre personer utgjør en større del, mens de yngre aldersgrupper reduserer sin andel konfronterer Norge med økonomiske, sosiale og helsemessige utfordringer. Det er flere måter å illustrere denne endringen på. For eksempel, mens personer som var 67 år og eldre utgjorde 11 % av befolkningen i 1970, så er denne gruppen forventet å utgjøre 19 % av befolkningen i 2030. En annen måte å illustrere denne endringen på er se på antall arbeidere pr. pensjonist: i 1967 var det 3.9 arbeidere pr. pensjonist, i 2001 var antallet 2.6 og i 2050 er det forventet å synke til 1.6 arbeider for hver pensjonist. I tillegg vil det gjennomsnittlige antall år som pensjonist øke. I 1973 var det gjennomsnittlige antall pensjonsår for en 67 åring 14 år, i 2001 var dette tallet økt til 17 år, og i 2050 er gjennomsnittet forventet å være 22 år. Den demografiske omveltningen vil medføre en nødvendig overføring av resurser fra den økonomisk aktive gruppen, til gruppen av tidligere økonomisk aktive. I forhold til inntektssikring, så vil utgifter til offentlige pensjoner øke fra 9.1 % av BNP til Fastlands-Norge i 2001 til 19.7 % i 2050. Tallene for alderspensjonen alene er 5.9 % i 2001 og dette vil øke til 15.2 % i 2050 under gjeldende regler, mens økningen vil være til 12.5 % om en følger Pensjonskommisjonens anbefalinger. Også innenfor området helse og eldreomsorg er utgiftene ventet å øke, særlig for gruppen av de eldste eldre (80+). Dette vil også ha innvirkning på strukturen/sammensettingen av arbeidsmarkedet, siden eldreomsorg og helsetjenester for eldre personer må forventes å øke i omfang. Dette betyr økt behov for arbeidskraft innenfor denne sektoren.

Den generelle mangelen på arbeidskraft medfører en politikkutfordring i forhold til å rekruttere folk til arbeidsmarkedet og beholde de der så lenge som mulig. Begrepet aktiv aldring omfatter mer enn bare det å være aktiv på arbeidsmarkedet og i det økonomiske livet, det omfatter også mulighetene til å delta aktivt innenfor det sivile samfunnet, gjennom frivillige organisasjoner, mer uformelle nettverk, familien, etc. Muligheten for å leve ett aktivt liv utenom den arbeidsrelaterte delen av livet er verdifull i seg selv, uavhengig av dens eventuelle positive effekter i forhold til helsestatus eller økonomisk kostnadsbesparende aspekter. Dette peker frem mot en viss spenning i begrepet mellom den produksjonsorienterte dimensjonen og den dimensjonen som fanger opp fritidsaktiviteter utenfor produksjonssfæren. Dermed blir en nøkkeloppgave innenfor aktiv aldring å balansere disse dimensjonene og å møte behovet for fleksibilitet med omsyn til å kombinere arbeid og fritid over livsløpet.

Der er økende bevissthet om aktiv aldring innenfor norsk politikk. Regjeringen og partene i arbeidslivet har blitt enige om tiltak for å bedre arbeidsmarkedets utsiktene for

eldre arbeidstakere (inkluderende arbeidsliv, seniorpolitikk). Hovedmålet for styresmaktene er å opprettholde (og eventuelt forbedre) de relativt høye deltagelsesratene i arbeidsmarkedet, f.eks. gjennom tiltak for å redusere antall personer på uføretrygd. Politikktilnærmingen er preget av en høy grad av konsensusbygging og konflikt unngåelse gjennom korporativ integrering av hovedpartene i arbeidslivet i politikkkprosessen. Dermed har aktiv aldringspolitikk i Norge ett sterkt fokus på arbeidsmarkedspolitik og pensjoner. Gjeldende arbeidsmarkedspolitik fokuserer på behovet for å øke arbeidsmarkedsdeltakelsen og begrense tidligpensjoneringen. Opplæring, fagutdanning og andre former for læring er også i fokus. Tiltakene er basert på frivillige avtaler med partene i arbeidslivet og informasjonskampanjer. I grunnleggende forstand er det den tradisjonelle arbeidslinjen som blir forsøkt styrket. Pensjonsreformforslaget er hovedsakelig drevet av økonomiske kostnadsvurderinger, det vil si hvordan skal pensjonssystemet tilpasses gjennom virkemidler som sikrer langsiktig finansiell bærekraft. Likevel er det sterke indirekte effekter på aktiv aldring fra pensjonsreformtiltakene, siden de intenderer å gi incentiver til å stå i arbeidsmarkedet så lenge som mulig. Helseomsorgsspørsmål og politikk i forhold til den frivillige sektor er mindre fremtredende. Slik har aktiv aldring forstått som en mer helhetlig tilnærming ikke helt erobret den politiske agendaen i Norge, men element av denne »politikkmnyen» er plukket opp og anvendt i politikdebatten og politikktutforming.

De følgende tabeller presenterer noen av barrierene og mulighetene identifisert i vår studie. Når dere leser disse tabellene er det viktig å merke seg følgende: For det første er oppdelingen i barrierer og muligheter på ingen måte absolutt eller kategorisk. Med det mener vi at en mulighet sett fra en synsvinkel, kan representere en barriere sett fra en annen og omvendt. For det andre, plasseringen av tema i spesifikke politikkkfelt er i noen grad tilfeldig. Med andre ord en helseproblematikk kan være relevant for pensjonspolitik. For eksempel kan det være slik at sterke ulikheter i helse i form av forventet levealder kan være en barriere for pensjonsreformer. Dette peker mot ett kjernepunkt i aktiv aldring, nemlig samspillet mellom politikkkfelt og behovet for koordinering, horisontalt mellom dem og vertikalt mellom ulike organisasjonsnivå.

Tabell A1. Barrierer og muligheter innenfor arbeidsmarkedet og på generelt nivå

Barrierer	Muligheter
<p><i>Statsfinanser:</i> Kan fungere som en barriere. Sammenliknet med Finland og Sverige, der økonomiske kriser tidlig på 1990 tallet tvang landene til å handle for å redusere tidligpensjonering, så kan Norges oljerikdom gjøre det vanskeligere å nå gjennom med budskapet til de sosiale partnerne om at det er nødvendig å handle nå. Generelt så er økningen i antall pensjonsår resultatet av en velstandseffekt som gjør det mulig for folk i den velstående delen av verden å bruke flere år på slutten av livsløpet utenfor lønnet arbeid.</p> <p><i>Små bedrifter:</i> Det økonomiske liv i Norge er svært fragmentert, med en stor andel av SMB bedrifter. Den høye andelen av små firma kan være en barriere for implementering av aktiv aldringspolitikk på bedriftsnivået. Er det ett gap mellom store og små bedrifter i forhold til seniorpolitikk og inkluderende arbeidslivspolitikk?</p> <p><i>Kunnskapsgap:</i> Ikke så mye kunnskap om hvordan norske firma strategisk tilpasser seg en aldrende arbeidsstyrke. Studier på bedriftsnivået er viktig for å få en bedre forståelse av dynamikken av holdninger, personalpolitikk og bedriftskultur i behandlingen av eldre arbeidere og ansatte.</p> <p><i>Innføring av markedsorienterte virkemidler i de fleste sektorer av økonomien.</i> Dette har ført til en debatt om de negative konsekvenser ved den moderne kapitalismen. Offentlig eide bedrifter som post, vegvesen og jernbane har alle vært tvunget til å redusere antallet ansatte gjennom 1990-tallet. Vanligvis er det de eldre arbeidstakerne som forsvinner ved slik nedbemanning. Har det sterke fokuset på seniorpolitikk hatt effekt i forhold til disse nedbemanningsprosessene eller fungerer den bare som pynt og festtale?</p>	<p><i>Trepartssamarbeidet mellom regjeringen og de sosiale partnerne:</i> Aktiv aldringspolitikk behøver koordinering mellom ulike aktører i arbeidsmarkedet og mellom ulike politikkefelt. Norsk arbeidsliv er i høy grad organisert med ett relativt høyt fagforeningsmedlemskap og medlemskap av bedrifter i arbeidsgiverorganisasjoner. Det eksisterer en lang tradisjon av korporative forhandlinger mellom disse partene og regjeringen.</p> <p><i>Lav arbeidsløshet:</i> En hjørnestein i norsk arbeidsmarkedspolitik har vært full sysselsetting, kombinert med høye (men synkende) deltagelsesrater for eldre arbeidstakere. Er lav generell arbeidsløshet en forutsetning for utviklingen av ett arbeidsmarked som er åpent for alle?</p> <p><i>Bedriftsfokus:</i> SSP og det nasjonale initiativet for inkluderende arbeidslivsbedrifter har ett klart fokus på bedriftsnivået. Tiltak på bedriftsnivået (for eksempel arbeidsmiljø og seniortiltak) er avgjørende for å redusere tidligpensjonering. For å sikre tilgangen på kvalifisert arbeidskraft må bedriftene sette seniorpolitikk på dagsorden og flere og flere bedrifter ser behovet for å utforme en sammenhengende personalpolitikk for alle aldersgruppene.</p> <p>Mediafokus: Mer fokus på seniorpolitikk</p>
<p><i>Motstridende målsettinger for det inkluderende arbeidslivsprogrammet (IA avtalen)</i> Målsettingen om å redusere sykefraværet (som er kvantifisert) kan stå i motstrid til målsettingen om å inkludere marginaliserte arbeidere. Størrelsen på den økonomiske støtten og det at det mangler kvantitative målsettinger for de andre målsettingene i avtalen kan indikere at sykefraværet er hovedprioritet.</p>	<p><i>Subsidiering for å holde på eldre ansatte:</i> Økt finansiell støtte kan være en mulighet for å holde på eldre arbeidskraft. Er det fornuftig og mulig å bruke subsidiering for å forlenge arbeidskarrieren? I forhold til byrden ved å betale for AFP synes subsidiering å være rimeligere for arbeidsgiverne. Men kan ha negativ diskriminerende eller stigmatiserende effekter i forhold til eldre arbeidstakere. Og det kan flytte ansvarsfokus vekk fra bedrifter og mot offentlige myndigheter igjen.</p>
<p><i>Vetomakt for sosiale partnere:</i> Det etablerte samarbeidssystemet mellom partene har motstått radikale endringer i velferdsrettighetene. I den grad endringer blir sett som ønskelige ut i fra aktiv aldringspolitikk, så kan vetomakt innenfor trepartssamarbeidet bli vurdert som en barriere mot aktiv aldring.</p> <p><i>Endrede preferanser:</i> En annen barriere er eldre ansattes endrede holdninger til arbeid. Eldres preferanser for å arbeide deltid eller pensjonere seg tidligere, kan blant andre faktorer bety en endret preferanse fra arbeid mot fritid. Selv om dette ikke gjelder majoriteten av eldre er holdningen til tidligpensjonering en hovedbarriere ifølge informantene.</p>	<p><i>Legitimiteten til politikktiltak og målsettinger:</i> Spørsmålet om legitimitet til politikken fra ulike grupper er viktig. Hovedtiltaket, ett inkluderende arbeidsliv er eksempel på en politikk som nyter stor legitimitet fra brede grupper.</p> <p><i>Erfaringsoverskuddet:</i> Eldre arbeidstakere innehar erfaring og realkompetanse som gir en verdifull human kapital i større grad enn yngre arbeidstakere (jmf. slagordet til SSP om »Seniorgullet»)</p>

Barrierer	Muligheter
<p><i>Fagkunnskapsunderskuddet:</i> Eldre arbeidstakere mangler fagkunnskaper. Selv om det norske folk generelt har ett høyt utdanningsnivå, ligger eldre arbeidstakere etter på dette området. I løpet av det siste årtiet har fokus vært på yngre aldersgrupper noe som impliserer at gapet kan ha økt, noe som gir de yngre ett konkurransefortrinn på arbeidsmarkedet.</p> <p><i>Arbeidsmiljø:</i> En hovedbarriere på bedriftsnivået er arbeidsmiljøet. En hovedgrunn for å avbryte/fortsette i arbeidslivet er faktorer knyttet til det daglige arbeidet. Folk med høy utdanning synes å forlenge arbeidskarrieren fordi de har interessante oppgaver og føler at de er med på kjerneaktivitetene til bedriften. Det kan bety at de som ikke blir ivaretatt i forhold til disse faktorene er mindre tilbøyelige til å trives på arbeid og i mindre grad ønsker å holde frem i arbeidslivet.</p> <p><i>Manglende bedriftslederskap:</i> manglende ansvar fra arbeidsgivere i forhold til å ta vare på eldre arbeidskraft er også en barriere mot aktiv aldring. Arbeidsgivere er i mange tilfeller ikke klar over hvor viktige de er i forhold til å påvirke arbeidstakernes syn på arbeidet og omgivelsene. For eldre arbeidstakere kan dette også bunne i en negativ holdning fra arbeidsgiverne mot dem, noe som peker mot alder i seg selv som en diskrimineringsfaktor.</p> <p><i>Jobbkrav ekskluderer arbeidstakere:</i> I dag er det færre muligheter for å få og beholde en jobb om du ikke er 100 % arbeidsdyktig. En faktor som styrker dette er at det ikke lenger er tradisjoner for politikk som er rettet mot begrensede målgrupper.</p> <p><i>Manglende fleksibilitet</i> synes fortsatt å være en barriere mot å delta i arbeidsmarkedet.</p>	<p><i>Ny teknologi og produktivitetsøkning:</i> Arbeidsbesparende teknologi innenfor eldreomsorgssektoren, for eksempel gjennom å bruke roboter for å gjennomføre renhold og andre daglige rutineoppgaver kan frigjøre tid til omsorgspersoner slik at de kan konsentrere seg om andre aspekter ved omsorgssituasjonen. Generell produktivitetsøkning innenfor vareproduksjonen frigjør arbeidskraft til mer tidsforbrukende arbeids-aktiviteter innenfor tjenestesektoren. Generell produktivitetsvekst er høyere innenfor vareproduksjon enn i tjenesteproduksjon. De sistnevnte er mindre kapitalintensive (for eksempel hårklipp), men mer arbeidsintensive. Dette forholdet kan endre seg i fremtiden gjennom bruk av ny teknologi.</p>

Tabell A2. Aktiv aldring og pensjonssystem

Barrierer	Muligheter
<p>Ingen automatisk justering i forhold til forventet levealder i eksisterende system: Økningen i antall forventede gjenstående leveår er det ikke tatt hensyn til</p> <p>Svak sammenheng mellom livsløpsinntekt og pensjonsytelser: Besteårsregel, 40 års opptjening</p> <p>Ulike incentiver: Pensjonsreformforslagene som mulighetsskapende må kvalifiseres. Det kan stilles spørsmål ved om de skaper like incentiver for alle. Kritikere har hevdet at måten minstepensjonen organiseres på gjennom en garantipensjon skaper disincentiver for de med lavere inntekter, mens de med høyere inntekter får sterkere incentiver gjennom styrkingen av prinsippet om en mer proporsjonal sammenheng mellom innbetaling og ytelse.</p> <p>AFP ordningen som incentiv for tidligpensjonering: Flere av informantene fremhever AFP ordningen som problematisk i forhold til aktiv aldring. Den blir sett på som en barriere for å forlenge yrkesdeltagelsen for de med god helse som har muligheter til å fortsette og ordninger representerer en kostnadsbyrde for bedrifter og samfunn.</p> <p>Tidsperspektiv: kortsiktig og reaktivt: Bransjetype er relevant for hva slags seniorpolitikk som kan implementeres. Bransjer som opererer i konkurranseutsatte markeder har forretningsmessige argumenter for å implementere seniorpolitikk. Om denne tjener bedriftens målsetting så vil den bli gjennomført. Faglært og ikke-faglært arbeidskraft er også av viktighet her. Bedrifter som ansetter ukvalifisert kvinnelig arbeidskraft har en tendens til ikke å tilby incentiver (eller arbeidsmiljøtiltak), fordi kvinnene ofte er avhengige av å tjene opp pensjon. På samme tid er dette arbeidsplasser med mye slit, som krever forebyggende arbeidsmiljøtiltak. Men inntrykket fra informantene er på generelt nivå at slik integrerende politikk er gjort stadig mer vanskelig på grunn av økende krav om å være konkurransedyktig. Muligheten for å integrere arbeidstakere kan ha vært større i offentlig sektor enn i privat sektor om vi går noe tilbake i tid. Men dette skillet kan ha blitt mindre i den senere tid. Dette på grunn av økende krav om effektivitet, produktivitetssøkninger, privatisering og konkurranseutsetting, altså i økende grad å anvende det private markedets grunnleggende logikk også i forhold til offentlig sektor.</p>	<p>Pensjonsreformforslaget:</p> <p>Justering i forhold til forventet gjenstående levealder.</p> <p>Prinsippet om livsløpsbasert opptjening</p> <p>Innføring av aktuarisk avkortning i det foreslåtte fleksible tidlig pensjonerings-elementet i modernisert folketrygd.</p> <p>Livsløpsperspektivet: Noen av bedrifts-informantene vektlegger viktigheten av en livsløpstilnærming til aktiv aldring. Det vil si at en god aktiv aldringspolitikk og en god seniorpolitikk krever en gjennomtenkt juniorpolitikk. I bedrifts-sammenheng betyr dette at en må ha fokus på begge ender av arbeidslivsløpet både rekruttering av yngre og politikk for å holde på eldre arbeidskraft. Dermed er aktiv aldringspolitikk mer om å sikre en balanse mellom ulike aldersgrupper enn bare å beholde de eldre. En slik balansert tilnærming muliggjør en god byrdefordeling mellom aldersgrupper (for eksempel i arbeid med fysisk slit) og sikrer overføring av kompetanse og nye ideer fra eldre til yngre og omvendt.</p> <p>AFP ordningen som mulighet: AFP ordningen gir majoriteten av ansatte ett valg til å utføre alternative aktiviteter utenfor arbeidsmarkedet.</p> <p>Tidsperspektiv: Langsiktig og proaktivt: I vårt utvalg fant vi noen bedrifter med etablert og permanent personalpolitikk forut for demografisk endring. Disse var også preget av en verdiorientert personalpolitikk med ett sosialt ansvar for de ansatte og også utover bedriften. Typisk for disse bedriftene var en langsiktig strategi og at de hadde på plass tilhørende politikk slik at den demografiske utfordringen ikke utviklet seg til en krise. Lederskapet i disse firmaene vektla denne strategien og den inngår også i oppbyggingen av merkenavn.</p>
<p>Et mulig dilemma mellom kravet til markedslogikken og målet om ett inkluderende arbeidsliv: I Norge med ett relativt høyt lønnsnivå og en rimelig generøs velferdsstat, så gjenspeiles dette i høy arbeidsproduktivitet som en forutsetning for å lykkes på verdensmarkedet.</p>	<p>Privat vs offentlig sektor kontekst? Informantene peker på viktigheten av ulike kontekster som bedrifter er plassert i og hvordan det påvirker muligheten og rommet for å integrere mennesker med redusert arbeidskapasitet eller funksjonsevne. Det kan virke som det er noe</p>

Barrierer	Muligheter
<p>Innenfor denne konteksten kan det i økende grad bli vanskelig å inkludere og aktivere mer marginale grupper med lavere arbeidsproduktivitet, i en situasjon med relativt høy arbeidsmarkedsdeltagelse.</p> <p>Økonomiske incentiver, utstøting og valg faktorer: Økonomiske incentiver i form av generøse tidligpensjoneringsordninger, dårlig eller fysisk/psykisk krevende arbeidsforhold (utstøting) og preferansen for fritid foran arbeidstid (valgfaktor) spiller alle en rolle i bestemmelsen av pensjoneringsbeslutningen til eldre arbeidstakere. Ofte er det en interaksjon mellom faktorer som summeres opp til ett komplekst mønster som utelukker enkeltfaktorforklaringer. I denne sammenheng vil pensjonsavkorting eller tillegg trolig ha en positiv effekt i forhold til å forlenge arbeidslivet for noen. Men en aktiv aldringspolitikk som bare baserer seg på slike økonomiske incentiver vil være mislykket om den ikke også følges av tiltak for å forbedre og utjevne ulikheter i arbeidsmiljøet og helsetilstanden også.</p>	<p>mer rom for slik integrasjon i offentlig sektor enn i de private bedriftene som vi har studert her. Men den historiske erfaringen i de to produksjonsfirmaene viste også til ett sosialt ansvar fra bedriftens side i forhold til å integrere arbeidere. Muligheten for slik inkludering var færre nå enn tidligere. For aktiv aldring medfører dette at politikktiltakene må omfatte incentiver, arbeidsmiljø og helsetiltak og skape mer myke og gradvise overganger fra arbeid til pensjon gjennom kombinasjoner av redusert arbeidstid og mer fritid. Og politikken må relateres til den ulike konteksten bedrifter er plassert i og ansatte innenfor og mellom bransjer i økonomien.</p>

Tabell A3. Aktiv aldring og helsesystemer

Barrierer	Muligheter
<p><i>Den kulturelle/livsstilsbarrieren:</i> Betingelsene for en aktiv aldring har aldri vært bedre. Men på grunn av den demografiske aldringen er myndighetene avhengige av at de eldre er aktive på en spesiell måte, nemlig at de aktivt tar vare på seg selv og er med på å gi noe tilbake til samfunnet slik at de bidrar til å lette omsorgsbyrden. Dette er en sterk utfordring i og med den sterke kulturelle normen om selvrealisering i den eldre aldersgruppen. Derfor er dette en barriere som bare i noen grad kan overvinnes gjennom politiske virkemidler.</p> <p><i>Friske pensjonister velger fritid fremfor arbeid:</i> Forbedret helsetilstand setter folk i stand til å delta i økonomisk aktivitet, men friske og rike pensjonister foretrekker fritidsaktiviteter (reise, sport, kulturelle aktiviteter og lignende) istedenfor arbeid.</p> <p><i>Manglende koordinering og dialog:</i> Lite koordinering og dialog mellom leger og de som er involvert i daglig omsorg for eldre. Det manglende samarbeidet mellom primerhelsetjenesten og spesialisttjenestene er ett gjennomgangstema. Finansieringsmekanismene er en av grunnene til at pasientene for raskt blir overført til kommunene.</p> <p><i>En sosial helsekløft innenfor aktiv aldring:</i> I europeisk komparativt perspektiv har Norge store ulikheter i helse mellom ulike grupper og disse er voksende. Den sterke vektleggingen på likhet er ikke fullt realisert på helseområdet. Den generelle helsetilstanden er bedret, men de velstående og høyt utdannede lever i gjennomsnitt 10 år lengre enn de med lave inntekter og lite utdanning (Folkehelseinstituttet 2003:1). Dette representerer en viktig barriere mot aktiv aldring og er en utfordring for fremtidig helsepolitikk og arbeidslivspolitik. Dette temaet ble lite diskutert i Pensjonskommisjonens arbeid, men er svært relevant i forhold til rettferdighetsbetraktninger i forbindelse med de innstramninger som er foreslått.</p> <p><i>Helserisikoer:</i> Fysisk inaktivitet, kosthold, røyking, alkohol og narkotika.</p> <p><i>Snevert medisinsk fokus:</i> manglende hensyn til de sosiale dimensjoner ved helse- og omsorgstjenester.</p> <p><i>Manglende arbeidskrafttilbud og spesielt mangel på kvalifisert arbeidskraft innenfor eldreomsorgen og andre tjenester for eldre?</i></p> <p><i>Manglende oppmerksomhet mot pasienter med mer komplekse diagnoser og psykiatriske diagnoser? Hvordan balansere prioriteten mellom mental og somatisk helse? Innenfor arbeidslivet utgjør psykiatriske diagnoser bakgrunnen for en stor del av sykefraværet.</i></p>	<p><i>Det generelle helsenivået er høyt.</i></p> <p><i>Høyt nivå på helsetilbudet.</i></p> <p><i>Endrede holdninger i forhold til de eldre:</i> Fokus på egenansvar istedenfor avhengighet kan øke statusen til de eldre og åpne opp for mer inkludering. Men økende ulikhet innenfor eldregruppen kan være en uønsket sideeffekt.</p> <p><i>Opptappingsplan for psykisk helsetjeneste:</i> Handlingsplan for å fremme samarbeid mellom primær og spesialisthelsetjenesten i omsorgen for mennesker med psykiatriske diagnoser. Sterkt fokus på forbyggende tiltak.</p> <p><i>Gradientutfordringen og handlingsplan i forhold til dette</i></p>

Tabell A4. Aktiv aldring og selvorganisering: barrierer og muligheter

Barrierer	Muligheter
<p>Mindre aktivitet blant menn enn blant kvinner innenfor frivillige aktiviteter</p> <p>Å nå de inaktive: Hovedutfordringen for aktiv aldringspolitikk er å nå de som ikke er med i slik selvorganiserte aktiviteter, eller som ikke har ressurser til å organisere slike aktiviteter på egen hånd.</p> <p>Tenke og handle i forhold til de eldre som en homogen gruppe: Det er åpenbart en stor gruppe av eldre som ikke er med selvorganiserte grupper, men som likevel kan være aktive (gjennom å gjøre ting selv, ta vare på barnebarn osv.)) Det er viktig å motstå fristelsen til å tenke på »de eldre» som en naturlig gruppe atskilt fra samfunnet for øvrig. Vi kan ikke forvente at de eldre skal handle og oppføre seg kvalitativt forskjellig fra yngre generasjoner.</p>	<p>Sterke historiske tradisjoner for deltagelse i frivillige organisasjoner: I sammenliknende perspektiv scorer eldre fra Norge høyt i forhold til deltagelse og aktiviteter innefor sivilsamfunnet. Kvinner er spesielt aktive, noe som kan gjenspeile at disse kvinnene har vært aktive i tidligere perioder i sine livsløp.</p> <p>Bedret helsetilstand for de eldre: Mange pensjonister og særlig AFP pensjonister er friske og har mange ressurser. En av grunnene til å pensjonere seg er å bruke den gjenstående fritiden mer aktivt. Dermed blir den bedrede helstilstanden og de økonomiske ressursene en mulighet til deltagelse på andre arenaer enn arbeidslivet.</p> <p>Intergenerasjonelle prosjekter: Inter-generasjonelle prosjekter kan være spesielt egnet for aktiv aldring, siden de bygger broer mellom generasjoner og gjør det mulig for borgerne å bevare sterke bånd mellom livet før og etter pensjonering. Politikk for sosial inkludering i generell forstand må videre sees på som viktig i forhold til å leve ett aktivt eldrelev. For eksempel politikk som sikrer en stabil og vedvarende tilknytning til arbeidsmarkedet, kan skape sosiale nettverk som utgjør avgjørende ressurser for folk etter at de er pensjonert.</p> <p>Rimelig offentlig støtte til selvorienterte frivillige aktiviteter: Myndigheten kan gi en begrenset støtte til selvorienterte frivillige aktiviteter. Økonomisk støtte i en oppstartsperiode for ett prosjekt kan være en stimulans, siden penger var en viktig sak for de som var involvert i de prosjektene vi analyserte (en turgruppe for eldre, en avdeling av Senioruniversitetet, en Bridge klubb, en sanggruppe for eldre). Det å stille lokalt til rådighet er en annen måte det offentlige kan hjelpe til med og som kan gjøre det enklere å starte opp med slike aktiviteter.</p>

Overordnede konklusjoner

Aktiv aldring forstått som politikk for inkludering, integrering og aktivitet må starte tidlig i livsløpet og omfatte barne- og familiepolitikk (muligheter for å kombinere arbeid og omsorg for barn) og utdanningspolitikk (der yrkesutdanning og fagbrevsordninger er sentrale på bedriftsnivået) for å øke individets muligheter for å være aktiv over livsløpet. Innenfor ett slikt perspektiv er det også behov for å »gjennomtenke vår sosiale bokføringspraksis» ifølge Esping Andersen (2002) og se velferdsvirkemidler som sosiale investeringer heller enn å se på dem som »sosiale utlegg som er ett uproduktivt, avkastningsløst konsum av ett overskudd produsert av andre» (Op.cit. 2002: 9). Sosiale investeringer som blir gjort tidlig i livsløpet kan gi avkastning senere i livsløpet for eksempel i form av høyere arbeidsmarkedsdeltagelse.

I denne sammenhengen har den spesifikke Nordiske velferdsmodellen vært relativt vellykket i form av slik investeringspolitikk og den har bidratt til spesielt høye deltagelsesrater for kvinner i arbeidsmarkedet. I tillegg har den tradisjonelle vektleggingen på full sysselsetting og aktiv arbeidsmarkedspolitikk og den generelle

konsensusorienteringen til arbeidsmarkedspartnerne dannet del av ett sosio-institusjonelt og kulturelt rammeverk i Norge som burde fremme mulighetene for aktiv aldringspolitikk. En høyere faktisk pensjonsalder og høyere sysselsettingsrater for eldre arbeidstakere i sammenlignende perspektiv bør bety at Norge skulle ha færre omfattende hindringer for å reversere dagens nedadgående trend m.o.t. deltagelse på arbeidsmarkedet.

Både livsløpsperspektivet og de ulike kontekstene bedriftene befinner seg innenfor (jf. tabellene ovenfor) fremhever viktigheten av tidsperspektivet og hvordan ulike tidshorisonter kan eksistere både mellom ulike bedrifter innenfor nasjonale økonomier (for eksempel ulike sektorer av økonomien) og også mellom ulike arbeids- og velferdsregimer. Gitt slike ulike tidsperspektiv innenfor ulike politiske økonomier, så må evaluering av suksess historier innenfor aktiv aldring ta hensyn til dette tidsperspektivet. Det betyr at mens noen politiske tiltak krever store investeringer som vil gi avkastning først på lengre sikt, så kan andre involvere små umiddelbare kostnader og med raske resultater, men de kan involvere en akkumulasjon av kostnader på lengre sikt. Med andre ord, hvordan det aktive aldringsregnskapet blir satt opp i ulike land vil være avgjørende for hvilke utfall som regnes for suksess eller fiasko. Og på samme måte vil barrierer i noen kontekster være muligheter i andre.

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