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Follow-up of the examination of the sixth periodic report of Norway on the implementation of the UN Covenant on civil and political rights – additional information

1. Introduction

Reference is made to special rapporteur Fabián Omar Salviolis letter 1 December 2014 and the decisions of the Human Rights Committee at its 110th session. The letter of 1 December 2014 refers to an earlier request for additional information, which unfortunately was never received by the relevant ministries. We apologise for the delay in providing the information.

2. The National institution for human rights

Regarding the status of the establishment of a new human rights institution, Norway would like to provide the following information:

As a result of the consultation process carried out by the Ministry of Foreign Affairs the government and Parliament agreed to establish a new independent national institution for human rights directly linked to the Parliament. The Parliament decided on 19 June 2014 to establish a new national institution administratively organised under the Parliament. A draft act regulating the mandate, tasks and management of the institution is currently being considered in Parliament. The Parliament's Presidium held a public hearing on the draft act on 6 January this year. It is expected that the act will be adopted during the spring session so that the new institution could become effective from July 2015.

Norway

3. The use of coercion in mental health care

Concerning the use of coercion in mental health care, the Committee requested additional information on four issues, listed and answered in the following.

a) The impact of the national strategy to end unjustified use of coercive force and restraint of psychiatric patients

2015 is the last year of the national strategy for increased voluntariness in mental health care. On commission from The Ministry of Health and Care Services The Directorate of Health will give an assessment of the strategy and its impact by the end of the year, including a consideration of the need for further measures as well as recommendations regarding the overall follow-up in the coming years.

On the basis of the Directorate's assessment and recommendations, The Ministry will consider relevant steps to approach the overall national goal of minimizing the use of coercion in mental health care.

b) The measures foreseen in the national strategy to strengthen the monitoring and reporting system in mental health care institutions and its impact

As indicated under subsection a) it is still early to adequately assess to which degree the strategy has already lead to better monitoring and strengthening of the reporting system. Improved statistics and reporting of data on coercion from the health enterprises to the national patient register, and implementation of a system to measure the experiences of patients, are some of the specific measures included in the national strategy. A dedicated work group has been established to explore and suggest ways to improve data quality. One of the challenges when it comes to ensuring correct and consistent reporting is the regional and local variations between the data programs used. The Ministry has given priority to the process of establishing a more efficient and unified digital data structure for the health and care system in Norway.

c) The procedure preceding the use of coercive force and restraint and steps taken to ensure that such decisions are based on a thorough and professional medical assessment

The Mental Health Care Act sets out strict criteria as to when coercive measures may be used, and contains important procedural safeguards. In the opinion of the Norwegian government, the Mental Health Care Act is in line with our international human rights obligations. However, the documented differences in the amounts of used coercion both between and within health regions, indicates that there is still a potential for further reduction of coercion. The Government is aware of these variations and will continue its efforts to reduce the use of coercion. As a central element in the national strategy for increased voluntariness in mental health care, The Directorate of Health is currently preparing national guidelines for the prevention and reduction of coercion in mental health care. The guidelines will be addressed to personnel in both the municipal and specialist health care sector, and are expected to be adopted by the end of the year.

d) The progress on the implementation of the national professional guidelines for the use of electroconvulsive treatment and the establishment of a register for such use The drafting of national professional guidelines for the use of electroconvulsive treatment (ECT) has unfortunately been delayed, and the guidelines are expected to be finished in 2015. The establishment of a register on the use of ECT is one of the questions addressed as part of the work with the guidelines.

Yours sincerely

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