

**Supplementary report in Response to the 6th Periodic Report of Norway to the UN Committee on Economic, Social and Cultural Rights at its 67th session, hearing of Norway 25-26 February 2020**

Submitted by the Norwegian Red Cross Society

January 24th 2020

1. **Introduction**

The Norwegian Red Cross Society (hereafter NorCross) is the national branch of the Red Cross and Red Crescent Movement. The movement work according to seven fundamental principles; humanity, independence, impartiality, neutrality, unity, universality and voluntary service.

National Red Cross and Red Crescent Societies have a special role as auxiliaries to their governments. In Norway we work through 150 000 members and 43 000 active volunteers who provide activities in their local communities. Our main humanitarian activities in Norway are care for elder people, activities for young people, prisoners’ visits and outdoor rescue.

NorCross welcome the opportunity to comment upon the Norwegian State’s fulfilment of its human rights obligations and address important human rights issues in the economic, social and cultural sphere. Our comments are based on experiences from our humanitarian work in Norwegian communities and will be limited to fields where we have activities.

1. **Comments on “Implementation of the Covenant”**

**Unaccompanied asylum-seeking minors**

In the list of issues, paragraph 15 b, the State is requested to provide information about the situation for asylum seekers, more specifically to provide information on the steps taken, or envisaged, to ensure that the protection and care of all unaccompanied asylum-seeking children are provided for by the Child Welfare Service. The Norwegian authorities has responded to this request in paragraph 97-99 in their report.

In our view, the Norwegian authorities has not given an adequate description of the actual situation of unaccompanied asylum-seeking children aged 15 to 18.

NorCross has several activities where we encounter asylum-seeking children living in reception centers, including unaccompanied asylum-seeking children aged 15 to 18. These children face several challenges and our volunteers report that the overall situation has deteriorated in recent years. In this regard we refer to that our volunteers regularly receive reports about self-harm, suicidal thoughts, depression and disappearances among the unaccompanied minors. For many the significant waiting period before a final decision is made on the immigration status, during which their life is on hold and their future unclear, is especially challenging. Furthermore, for those that are granted a permit, many only receive a temporary permit until they reach 18, which sustains their sense of insecurity. Given the aforementioned, NorCross believes that there is a need for additional pedagogical competence, more social workers and increased resources in order to ensure that these children are engaged in meaningful activities and receive sufficient and holistic care. In our view, there is also a need for additional measures to ensure that the mental health needs of unaccompanied children in reception centers are met.

None of these concerns are acknowledged or addressed in the State’s report. This is a vulnerable group of children, many with specific needs, and in our view, they are not afforded an adequate standard of care nor sufficient protection. We also note that the State has not made any steps to transfer the responsibility of unaccompanied asylum-seekers aged 15 to18 to the Child Welfare Service, but rather, on the contrary, has proposed new legislation whereby the responsibility for these children remain with the Immigration Authorities.

**Suggested recommendation:**

* The State Party should give unaccompanied asylum-seeking minors aged 15 to 18 the same level of care and protection as other children under the responsibility of the Child Welfare Services

**Children living in families with persistently low income**

The committee has previously asked the Norwegian authorities to develop and implement a strategy to combat child poverty (paragraph 14 of the 2013 conclusions), and in the List of issues, see paragraph 25, the authorities have been requested to provide information on to what extent the implemented measures have addressed the previous recommendations from the committee. The State has reported on this in paragraphs 190-191 of their report.

NorCross notes with concern that the number of children growing up in low-income families has increased significantly in the reporting period. In 2017 a total of 105 538 children lived in poverty nationwide according to Bufdir (the Norwegian Directorate for Children, Youth and Family Affairs), which equals 10,7 percent of all children in Norway.

NorCross is also concerned about the fact that the Norwegian authorities, in its report, fails to acknowledge the root causes of poverty, including the structural issue of increasing inequality in Norwegian society. Given that there is an actual increase in the number of children living in poverty, it is essential that the underlying causes of this is acknowledged and addressed. However, the state report primary focus is on alleviating the consequences of poverty which, in our view, will not alone create long-term effect. Consequently, we are of the view that the measures mentioned in the state report are not sufficient to remedy the increasing inequalities and creating a long term impact on the number of children growing up in low-income families. Research clearly indicates that the most accurate measure is an annual increase of the child benefit.

**Suggested recommendation:**

* The State Party must annually increase the child benefit

**Access to health for irregular migrants**

In the List of issues, see paragraph 27, the committee requests information in the impact of the steps taken to ensure effective access to all necessary health-care services by all irregular migrants. The State has provided a response to this in paragraph 197 in its report.

In the report, the authorities merely refers to wording in the relevant legislation, but they fail to give a proper description of the actual situation of access to health services for irregular migrants and the effects of the legislation in place. Since their access to healthcare services is limited to emergency aid and healthcare that cannot be postponed without the risk of imminent death, permanent severe disability or injury, or severe pain, non-governmental organizations in Norway have found it necessary to establish alternative health services to ensure that irregular migrants receive necessary health services. NorCross, together with Church City Mission, have operated a health center for irregular migrants in Oslo since 2009. We also run a similar center in the city of Bergen. The health center in Oslo has approximately 800 patients every year and it is run by health professionals working on a voluntary basis.[[1]](#footnote-1)

In our experience, the limited access to health care provided for by the Norwegian authorities raises several problems. First and foremost, the legislation is discriminatory because it limits access to health care based on immigration status. In our experience, the fact that irregular migrants have to pay for basic health services, is an effective impediment to real access to such services. As irregular migrants do not have the rights to work or earn a living, they are greatly marginalized in society and have very limited financial resources. When they must pay for health care, in many cases this entails that they cannot access the service despite having a legal right to it.

The legislation also poses challenges for health personnel. The legislation states that irregular migrants are entitled to emergency aid and health care that “cannot be postponed”, but in our experience, it can be difficult for health personnel to draw the line between what can actually be postponed and not. An illustrative example is a chronical disease, like diabetes, where there is no need for emergency aid and only if treatment is not given it will become acute. In this situation should health personnel wait until the persons condition has reached the threshold of acute or give preventive treatment? This decision should not be placed on the individual health personnel on a case to case basis as this can risk that access and denial of health services becomes arbitrary since health personnel may assess the situation differently.

In the past few years we have seen an increase in patients from Europe, of which Romanians are the largest patient group at the health center for irregular migrants in Oslo. Persons who hold an European Health Insurance Card have access to different health care services in Norway, while those who do not have such a card have limited access to health care services and some are therefore in need of using the service at our health center. This group is different from the irregular migrants since they have the opportunity to travel to their country of origin, but while they are here they still have very limited access to health care.

In our opinion, to secure access to health care, medical treatment must be based on need, not on immigration status.

**Suggested recommendation:**

* The State must ensure that irregular migrants have access to all the necessary health-care services

**Access to health care for mentally ill inmates**

The State has in the List of issues, paragraph 29, been asked to provide information about the extent to which the measures taken to ensure that prisoners with mental health problems receive adequate mental health-care services has had any effect. The State has provided information on this in its report, paragraphs 208-209.

NorCross is present in all the prisons in Norway through our Visitor Program, where approximately 500 volunteers meet prisoners on a regular basis, and our comments on this topic is based on our experience in running this programme for the past 60 years.

NorCross is gravely concerned about the situation of prisoners with mental challenges. A report from *Kompetansesenter for sikkerhets-, fengsels- og rettspsykiatri Helseregion Sør-Øst* (2014)[[2]](#footnote-2) shows that 92 per cent of inmates in Norwegian prisons have some kind of mental challenge, and some of the inmates have serious problems. The Parliamentary ombudsman (Sivilombudsmannen) published a report in June 2019,[[3]](#footnote-3) which highlights the significant challenges seen in this field.

NorCross’ assessment is that the Norwegian authorities have not put in place sufficient measures to address the challenges encountered in this field and that the health-care provided for prisoners with mental health problems, is not adequate. The measures presented in the State report illustrates this. The State points to that it has prepared a report on the follow-up on this issue and proposed measures to strengthen the services provided to inmates with mental health problems. There is thus a great need for more concrete measures, in particular to put more resources in place, including personnel in the prisons, to make sure that prisoners with mental health problems have an opportunity to have meaningful contact with other people on a regular basis. The challenges concerning prisoners with mental health problems must also be seen in conjunction with the practice of extensive use of isolation in Norwegian prisons. We know that isolation affect the mental and physical health, and that inmates who are already mentally ill, becomes worse when they are isolated.

**Suggested recommendation:**

* The State Party must ensure that mentally ill inmates get adequate health care

**Bullying in school**

The Committee has in paragraph 30 e in List of issues, requested statistical data on bullying in schools, disaggregated by ethnic group, and information on measures taken to combat bullying in schools and their impact. The State has provided information on this in paragraphs 230-233 of its report.

NorCross would like to comment on the enactment of two legal provisions that have been implemented in the reporting period. Firstly, an enactment that has made it possible to appeal cases of bullying directly to the County Governor (Fylkesmannen), which has increased the number of cases appealed. NorCross considers this to be a positive development, highlighting that this does not necessarily entail that there are more cases of bullying, but rather, that more cases are appealed and thoroughly assessed. Secondly, the schools have been given an extended opportunity to evict or move the person conducting the bullying to another school. NorCross believes that this can be potentially be problematic as it can lead to excessive focus on “pursuing” the person who is bullying and thereby stigmatizing that person or group. This is worrying as many in the bullying group often have similar vulnerabilities to those in the group that is exposed to bullying. In fact, those who bully have, on an average, even more dysfunctional relationships with home and family. Increased use if measures such as ejecting or moving persons that bullies can diminish the focus from providing support to those who bully in order to address underlying problems and change behavior. Instead focus will be on how to remove unwanted persons from the classroom.

Digital bullying and the school’s responsibility in that context should also have been addressed in the State report given the significant part of bullying that occurs digitally. A study conducted by Norcross and Telenor showed that teachers feel insecure about how to deal with digital bullying.[[4]](#footnote-4)

**Suggested recommendation:**

* The State Party must ensure that all measures taken regarding school bullying must be in accordance to the principle of the best interest of all involved children

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In case of questions, please contact senior legal adviser Inga Laupstad at [inga.laupstad@redcross.no](mailto:inga.laupstad@redcross.no)

Best regards

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1. Annual report 2018: *Årsmelding 2018 Helsesenteret for papirløse migranter*. Available from: https://kirkensbymisjon.no/content/uploads/2018/06/Årsmelding-Helsesenteret-2018.pdf [↑](#footnote-ref-1)
2. Cramer, V. (2014) *Forekomst av psykiske lidelser hos domfelte i norske fengsler*, Kompetansesenter for sikkerhets-, fengsels- og rettspsykiatri Helseregion Sør-Øst, Oslo. Available from: <https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=2ahUKEwijgI7s4pvnAhVuo4sKHSKuAtIQFjAAegQIBhAB&url=http%3A%2F%2Fkriminalomsorgen.custompublish.com%2Fgetfile.php%2F2777715.823.fcpatebqqs%2FEndelig%2Brapport%2Bpsykiske%2Blidelser.pdf&usg=AOvVaw1Q1F3sryoSLcULC85oXDrY> [↑](#footnote-ref-2)
3. Sivilombudsmannen (2019) *Særskilt melding til Stortinget om isolasjon og mangel på menneskelig kontakt i norske fengsler* Available from: <https://www.sivilombudsmannen.no/wp-content/uploads/2019/06/SOM_Særskilt-melding_WEB.pdf> [↑](#footnote-ref-3)
4. Article available in Norwegian at: <https://www.rodekors.no/aktuelt/advarer-mot-nettmobbing/> [↑](#footnote-ref-4)