

Occupational Safety and Health in Norway Revisited

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In 2011, I had the honour to write an editorial in the first issue of IJOSH.¹ I underlined the importance of research and publication to develop our field of Occupational Health. The following years have seen two issues of the journal per year, covering most aspects of occupational medicine, from psychosocial working environment and mental health, via ergonomics to safety and chemical/physical exposures. In the same editorial, I compared the historic development of Norway to Nepal. In the same issue, Sunil Kumar Joshi wrote an editorial on occupational safety and health in Nepal.²

His overview of the situation for occupation health in Nepal was followed up in 2018.³ The latter editorial clearly shows the fast development of the regulations for occupational health in Nepal. So, I decided to bring you an analysis of what is happening in Norway as well. At first glance, this might not look especially relevant to Nepal, since Norway is a country where oil production and fishing are among the largest sectors. However, we share some common working environments, like energy production based on waterfalls and the tourist sector in towns and mountain areas. Nowadays most countries have large service sectors including health care and transport. The waste handling industry is growing fast. In addition, digitalisation gets more and more important internationally.

Norway has an agreement with the European Union (EU), called the European Economic Area which allows free movement of goods, capital, services and people between the EU and EEA member states.⁴ This implies that almost all EU regulations within the field of occupational health get implemented as lawful regulations also in Norway. Of course, this usually does not prohibit stronger regulations than in the European Union, unless this can be regarded as undermining of the free movement of goods and workers across borders.

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The last major change of the Working Environment Act of Norway took place in 2005.⁵ Recently the law underwent a minor revision, so that temporary employment became more feasible.

In Norway, Occupational Health Services (OHS) are regulated by provision of law. Last year an expert group led by the Director of the National Institute of Occupational Health evaluated the OHS system. The main advice to the Government was that the OHSs should focus on primary prevention of occupational diseases and injuries. Fewer resources should be used on non-selective health examinations, sick leave follow up and health promotion via workplace fitness programs and advice on nutrition.

Norway also has regional hospital based Departments of Occupation Medicine, in all there are five departments, each with a staff of 20-50 employees. The National Institute of Occupational Health (STAMI) in Oslo has a 100 plus staff, including ca 15 medical doctors. This year STAMI received extra governmental funding to allow for literature reviews and preventive measures related adjustment of work in order to reduce the need for sick leave and to alleviate return to work after sick leave in different sectors.

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