



NORWEGIAN MINISTRIES

Action Plan

In Service for Norway

The Government's plan of action to care for personnel before, during and after serving abroad



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FOREWORD

On behalf of the Government, we would like to thank both those who have been, and those who are going, abroad in the service of Norway

Norway believes it should assume responsibilities beyond its own national interests. We pursue an active foreign policy aimed at promoting peace, conflict resolution, humanitarian work and a more just world. This is also expressed through the efforts of Norwegian men and women in international operations in many different countries and areas of conflict. The contributions made by Norwegian personnel are vital with regard to addressing our foreign and security policy interests and obligations.

Norwegians have often served in demanding, dangerous situations. They should receive the recognition they deserve for the job they have done. Therefore, on behalf of the Government, we would like to thank both those who have been, and those who are going, abroad in the service of Norway.

The vast majority return with valuable knowledge about countries, conflicts, situations and cultures, and unique personal experiences from their service. Norwegians who have served abroad thus represent an important resource for Norwegian society and employers.

Some may suffer either physical or psychological injuries due to their service. In the worst case scenario, such service can result in a loss of life. We have a clear and distinct responsibility to look after injured personnel, regardless of the kind of injury and when it becomes apparent. This responsibility spans a number of sectors and actors. Work on reducing the risk of injuries must be continued, and the injured and their families must receive the follow-up they need. The Government now intends to reinforce this effort.

The 'In Service for Norway' action plan is intended to ensure a high degree of recognition and that personnel are properly looked after before, during and after serving. We want to clearly recognise the contributions of Norwegian men and women, independent of any public debate about the actual mission. This plan is a follow-up to Report No. 34 (2008-2009) to the Norwegian parliament: 'From Conscript to Veteran'.

The action plan contains initiatives that will be implemented between 2011 and 2013. Many of them will last for well beyond this period and therefore provide a basis for good continuity in future work.



Grete Faremo



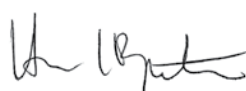
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INTRODUCTION

This action plan is intended to reinforce society's recognition and care for personnel who serve in international operations. As far as the foreign service and justice sectors are concerned, the plan also includes other personnel who serve abroad on behalf of the Norwegian state



I know that you return home with valuable and positive experiences, as well as knowledge few people possess

Grete Faremo

Background

The Government's 'In Service for Norway' action plan is a follow-up to Report No. 34 (2008–2009) to the Norwegian parliament: *"From Conscript to Veteran". Concerning the case of personnel before, during and after participation in foreign operations* (hereafter referred to as the *'Veterans Report'*). The plan follows up the ambitions presented in the report concerning further strengthening and developing the care provided to personnel and their families.

The action plan covers personnel who serve in international operations. As far as the foreign service and justice sectors are concerned, the plan also includes other personnel who serve abroad on behalf of the Norwegian state. Meanwhile, the plan will contribute to a general improvement in competence that will also benefit other groups.

The plan encompasses, but is not restricted to, the 23 focus areas in the Veterans Report. Initiatives have been implemented continuously during the work on the action plan, and the plan describes both initiatives that have already been implemented and future initiatives, most of which will have consequences beyond the period the action plan covers.

In Service for Norway was produced through an interdisciplinary collaboration between the ministries involved: the Ministry of Defence (MOD), the Ministry of Justice and the Police (MOJ), the Ministry of Foreign Affairs (MFA), the

Ministry of Health and Care Services (MHCS), the Ministry of Labour (ML) and the Ministry of Children, Equality and Social Inclusion (MCESI), hereafter called the *Interministerial Working Group*. The initiatives listed in this plan were partly derived at as a result of this collaboration, and partly through a collaboration between the MOD, the Norwegian Armed Forces, and veterans and employee organisations.

The Government would especially like to thank the veterans and employee organisations for their contributions to the action plan.

PRIMARY OBJECTIVES

The objective of the action plan is to improve society's recognition of, and provision of care for, the personnel covered by the action plan. They do an important job for Norway, often in dangerous conditions.

Those deployed abroad are first and foremost an important resource for society because of the unique experiences they have gained and the increased competence they have acquired. Most return home stronger, but those who might need follow-up after serving should be met by a competent system that is as coordinated and seamless as possible. The families have to be looked after. This is a shared social responsibility that requires shared obligations and cooperation across social sectors.



The Interministerial Working Group will remain in place to ensure the action plan is implemented, evaluated and developed further.

AREAS COVERED BY THE ACTION PLAN

The personnel should feel that society appreciates and recognises the job they have done. There will always be a level of risk associated with such service. A risk of contracting diseases, being wounded in combat, injured physically or psychologically, or, in the worst case scenario, of being killed.

The action plan contains initiatives intended to both reduce the risk of injuries in general and help ensure that psychological injuries are caught and recognised so that treatment can be started as soon as possible. The treatment and any rehabilitation of injured personnel should, insofar as it is possible, result in recovery and a return to working life, or alternatively to as normal a life as possible.

The initiatives are intended to ensure better follow-up and information for families and next of kin. This includes offers of support and help with family challenges before, during and after serving. The initiatives include relationship enrichment measures, information about and preparation for relationship-related challenges, and help with re-establishing family life and managing the particular challenges associated with problems such as combat injuries and trauma. Such follow-up is particularly important for the families of personnel who are injured or killed.

The action plan lays the groundwork for a greater focus on research and surveys of personnel in international operations. Together with a focus on international cooperation and information sharing, this will provide a basis for further initiatives in the future.

The plan contains initiatives which will result in greater transparency surrounding Norwegian participation in international operations, without this being at the expense of the security of the operation and personnel. The objective is to improve the understanding and recognition of the contributions Norwegian men and women are making abroad, independent of any debate about the mission as such.

One of the action plan's overarching principles is that injured personnel shall be followed up by society's ordinary health and care services and social functions. This will make great demands of these services in relation to their flexibility, advice, counselling, and, not least, training. The action plan contains a number of initiatives intended to help ensure these demands can be met.

Norway has good health and care services, and a good welfare system. Nonetheless, more knowledge about the individual veteran's particular situation is needed, and coordination of the existing provision could be improved. If someone is injured in the service of Norway, they should feel sure that they will be looked after, both medically and financially, and that they will be offered follow-up with regard to work or education tailored



to their situation. Society is responsible for this follow-up, and this responsibility lasts a lifetime.

The support system must be coordinated better to achieve the aforementioned objective. This coordination covers both the sectors that deploy personnel, typically the defence sector, justice sector and foreign service, and the sectors providing the services, primarily the health service, the Norwegian Labour and Welfare Administration (NAV), the Norwegian Public Service Pension Fund, and Bufetat. As part of the work

done on developing the action plan, the Government has established an intersectoral pilot project aimed at helping the Armed Forces' veterans in two local authorities which are home to a high number of service personnel. The results of this pilot project will have a transfer value for the other sectors that deploy personnel into conflict areas.

The initiatives in the action plan are based on the 23 focus areas in the *Veterans Report*, but are divided up by topic. The plan also contains a collated overview of all the initiatives.



THE NORWEGIAN ARMED FORCES' VETERANS

Serving in international operations forms a natural part of service in the Armed Forces, and being a veteran will therefore be the rule rather than the exception for military personnel



Unique to the Armed Forces' veterans

Many of the issues that affect the Armed Forces' veterans will also be of relevance to personnel from other sectors that are deployed into conflict areas in the service of the state. However, what is unique about the Armed Forces' veterans is that the mission of military combat units involves seeking out danger and defeating an adversary, and in extreme situations taking life and putting one's own life on the line. This service is fundamentally different to other service abroad in which personnel are normally evacuated or take cover if they are attacked.

Another distinctive feature is that the Armed Forces' personnel can be ordered to serve in international operations. Such service now forms a natural part of service in the Armed Forces, and being a veteran will therefore be the rule rather than the exception for these personnel.

WE NEED A GOOD VETERANS POLICY THAT COVERS THE ARMED FORCES' PERSONNEL BEFORE, DURING AND AFTER SERVING IN INTERNATIONAL OPERATIONS

One prerequisite for a good veterans policy is that basic factors such as the mandate, mission and rules of engagement are as understandable, practical and clear as possible.

A good veterans policy ensures units are well prepared for the conditions they will be operating in, such that as few as possible lose their lives or are injured physically or psychologically.

A good veterans policy ensures personnel are not subjected to greater stress than is advisable. There must be adequate periods of rest and recuperation between missions.

A good veterans policy ensures personnel are well drilled in how injuries can be avoided, both physical and psychological. Military commanders must be aware of which situations represent risks and how risk reducing initiatives should be implemented.

A good veterans policy ensures injured personnel are well looked after and receive qualified help as soon as possible. The certainty of this is vital for the units' morale.

A good veterans policy ensures personnel who are physically or psychologically injured receive tailored follow-up aimed at returning them to working life or as close as possible to the situation before the injury occurred. Seriously injured veterans and their families shall receive support so that they do not experience bureaucracy and mountains of forms as an extra burden.

A good veterans policy takes care of soldiers after the mission ends as well. Those who experience problems have to know that they can always turn to the Armed Forces for advice and counselling. This must be the case even if any subsequent treatment or follow-up is actually provided by the civilian health service, NAV and the Norwegian Public Service Pension Fund.

A good veterans policy has an adequate compensation scheme for those who cannot be fully rehabilitated so they are able to maintain a dignified life.



Decorations and medals are a symbol of society's recognition of outstanding contributions in war and demanding operations on behalf of Norway

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- The War Cross with Sword is the nation's highest decoration. It is awarded for personal bravery and leadership abilities in battle. The Government has amended the statutes so that the medal can now also be awarded for incidents in armed conflicts that Norway is, or becomes, engaged in.

A good veterans policy ensures research and surveys are conducted to improve knowledge about the situations of veterans.

A good veterans policy takes care of the veterans' families, both by supporting the families of those who are deployed and by looking after the families of the injured and fallen.

A good veterans policy gives veterans a chance to maintain old friendships and share experiences. This also applies after serving, and not least to those who are no longer employed by the Armed Forces.

The preventive initiatives that provide the foundation for a good veterans policy must form an integral part of service abroad. The operational authority must take responsibility for integrating these initiatives into operation-specific training, service abroad, the returning home phase, and, not least, with a view to surveys and documentation. This also means the associated costs must be included in ordinary budget processes as operational costs. The allocation of responsibilities between those responsible for producing the armed forces and the operational authority must be clear, and the required interaction processes must function optimally to prevent personnel 'falling through the cracks'.

Veterans and their families should feel society recognises the contributions they have made

Veterans have carried out important missions in demanding and dangerous situations on behalf of the nation. A visible thank you for their contributions from their surroundings and

society as a whole is of great importance for their identity, motivation and pride. The action plan contains a broad range of initiatives that incorporate an element of recognition. The Government has wanted to make this recognition visible by maintaining a higher profile at various events, which is intended to improve the recognition of veterans and their families.

SPECIAL DAYS, CEREMONIES AND MEDALS ARE INTENDED TO BE VISIBLE STATEMENTS OF SOCIETY'S RECOGNITION OF THE CONTRIBUTIONS OF VETERANS

Liberation Day, 8 May, is also **National Veterans Day**. The Government plays the role of host during the marking of this day with the participation of the Prime Minister, Minister of Defence and members of the Norwegian parliament, the Storting.

The first Sunday in November is **Armed Forces Remembrance Day**. Personnel who have fallen in service are honoured and commemorated at a national event in Akershus Fortress. The Norwegian royal family is normally represented and the Chief of Defence is the host. The Government and the Storting are represented.

The Government is represented at a number of **medal presentations**. Both the Storting and the Government are represented when **coffins return to Norway**.

Decorations and medals are an important part of the recognition of outstanding contributions in combat and demanding operations on behalf of Norway. At the same time, the awarding of such decorations underscores the legitimacy of the mission or incident, which is essential for all those who participated in its execution.



The Government has amended the statutes for the *War Cross with Sword* meaning it can now be awarded for incidents that take place not just in traditional war as defined by international law, but also in armed conflicts in which Norway is or will be engaged. The same has been done in relation to the *St. Olavs medal with Oak Branch and War Medal*. The Government has thus established a comprehensive decorations system that also recognises service in international operations.

The new decorations system is more flexible and enables the decoration of veterans who are not being awarded the *War Cross with Sword*, but who have made a great contribution to their country. The MOD has established a decorations board tasked with providing advice both in individual cases and in connection with the historic review of decoration questions linked to World War II and international operations.

INITIATIVES

● INITIATIVE 1

The Armed Forces will, together with the MOD, review current memorials and consider a single memorial for personnel who have served in international operations.

● INITIATIVE 2

The Armed Forces will open a permanent exhibition about personnel in international operations.

● INITIATIVE 3

The Armed Forces will develop a comprehensive procedure for handling deaths in international operations.

● INITIATIVE 4

The Armed Forces will afford substantial weight to service in international operations when assigning personnel to other posts.

● INITIATIVE 5

The MOD will continue to support the 'Support our Soldiers' campaign with a donation of NOK 150,000 in 2011.

THE ARMED FORCES VETERANS CENTRE IN BÆREIA REPRESENTS RECOGNITION IN PRACTICE: BEFORE, DURING AND AFTER SERVING

The Armed Forces' Veterans Centre in Bæreia (FVS) is a welfare and recreational service for veterans and their families. The Veterans Centre functions as a meeting place for reunions, recreation and family support. It is also used for courses and seminars given to and by veterans.

The centre is to undergo development that will enable it to reach even more users. More services will be offered to personnel and their families, including before and during international operations. Therefore, one important initiative will be to create a communications plan for the centre so that even more personnel become aware of the provision than are today.

- The Armed Forces' Veterans Centre in Bæreia (FVS) is a welfare and recreational service for veterans and their families.



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The Armed Forces' Veterans Centre is currently undergoing a rehabilitation process aimed at upgrading its buildings. The MOD recently allocated NOK 43 million for this purpose.

INITIATIVES

● INITIATIVE 6

Denmark has decided to award decorations awarded to those who are injured in combat to those who sustain psychological injuries as well. The Armed Forces will consider means of recognising those who have sustained psychological injuries, based in part on the Danish experience.

● INITIATIVE 7

The Armed Forces will draw up a communications plan to ensure all target groups learn about the services provided by the Armed Forces via the Armed Forces' Veterans Administration (FVA), the Armed Forces' Veterans Centre (FVS) and the Office for Psychiatry and Mastering Stress (KPS).

Personnel in international operations must be as well prepared as possible

How the Armed Forces' veterans are received and recognised by society at large depends on a number of factors, not least how the service is prepared and the legal authority on which the operation is based.

MANDATES AND THE RULES OF ENGAGEMENT MUST BE CLEAR, UNDERSTANDABLE AND FIRMLY ANCHORED IN INTERNATIONAL LAW

A clear mandate supported by international law is very important, both with regard to how the mission is going to be executed and the support it – and the personnel who are going to execute it – receive from the general public.

The term *mandates* is usually understood to mean a mandate established by the UN Security Council. This is generally interpreted and broken down into parts, e.g. when the mandate is operationalised and incorporated into NATO's plans for operations and orders. The mandates clearness and basis will be a fundamental criterion for whether or not Norway will undertake to contribute forces to an international operation.

Military operations have rules concerning how the operations will be executed and the power and authority the forces have been given: the rules of engagement (ROE). These are usually drawn up by NATO, the UN, or the EU, or in some other form of bilateral or multilateral cooperation. Participating nations can greatly influence these rules, both during their drawing up and during the approval process. It is primarily a military responsibility to ensure that the ROE are formulated in such a way that they can be understood and applied at the lowest military level.

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- Norwegian soldiers on deployment in Operation Odyssey Dawn, March 2011.







INITIATIVES

● INITIATIVE 8

A clear mandate, authorised by international law and with clear and understandable rules concerning the use of military force, including the rules of engagement (ROE), shall be an absolute condition for Norwegian participation in international operations.

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● INITIATIVE 9

Ownership of the terms legality and legitimacy, and their meaning with regard to the execution of a mission and taking care of individuals, shall be established through training programmes for the Armed Forces' leaders at all levels.

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● INITIATIVE 10

The Armed Forces shall through the development of orders and planning processes ensure that the mandate and rules concerning the use of military force in international operations, including the ROE, are usable and understandable down to the lowest level. The Armed Forces' military lawyers shall assist with this process.

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● INITIATIVE 11

The Armed Forces shall further develop the 'Soldier Card' as a practical and usable legal guide for personnel in international operations.

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WE MUST AIM FOR A REASONABLE AND MORE EVEN DIVISION OF SERVICE IN INTERNATIONAL OPERATIONS

Serving in international operations provides important competence, and many posts also receive a large number of applicants. However, this has resulted in great stress in the form of frequent periods of service for some categories of personnel with special skills. This is not just a burden for the individual soldier serving abroad, but also for units at home that have to function despite long-lasting vacancies. Not least, this type of stress impacts the soldiers' families.

The Armed Forces have now intensified the building up of resource centres and are also continuously working to prioritise posts in operational units. The structures of ranks are being harmonised in order to get more available personnel to those levels where the demand for foreign postings is greatest.

As far as possible, Norwegian contributions to international operations shall be based on the use of existing units, which results in even and predictable loads. Continuous strains on units that are simultaneously deployed on domestic missions shall be avoided. During the planning of future international operations significant weight shall be afforded to analyses of the available personnel resources before decisions about participation, and about the length of participation, are made.

The principle that personnel should spend twice as long time at home as they spent on deployment abroad before they can be posted abroad again, must only be departed from if there are special grounds for doing so. The personnel must also give their consent. Such exceptions will in the future be subject to

- Special forces (on the left) and sappers (on the right) are in-demand resources.



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a specific assessment of the relevant need versus the stress on the individual.

For planning purposes, the normal ratio between being serving at home and abroad should be 5:1. Individual assessments must also be made based on the individual and the nature of the mission.

INITIATIVES

● INITIATIVE 12

The Armed Forces base their planning for international operations with regard to dimensioning, duration and build up of capacities on capacity analyses of the relevant categories of personnel.

● INITIATIVE 13

The Armed Forces shall as far as possible tailor force contributions to international operations to the domestic defence structure.

● INITIATIVE 14

The Armed Forces shall study how further use of the reserve forces can help to increase recruitment and qualify more personnel for service abroad.

● INITIATIVE 15

The Armed Forces shall establish a working group that will look at greater differentiation of the criteria stipulated for the various posts so that more personnel can qualify to serve in international operations. This review shall look at factors such as greater flexibility in medical classification.

● INITIATIVE 16

The Armed Forces shall conduct an international comparative study of the requirements concerning the frequency of contributions and time spent at home.

● INITIATIVE 17

The Armed Forces shall establish special procedures for those cases where one must depart from the principle that personnel should spend twice as long on rest and recuperation periods at home as on deployment in international operations.

PERSONNEL ON INTERNATIONAL OPERATIONS SHALL UNDERGO A SELECTION PROCESS TO ENSURE THEY ARE CUT OUT TO MEET THE REQUIREMENTS OF SUCH SERVICE

The Armed Forces shall recruit personnel with a broad diversity of competence and backgrounds to ensure the robustness and suitability necessary to prepare for, execute and complete the mission. The objectives include developing an appropriate method for screening that helps to prevent illness and injury. Furthermore, the screening data must be able to be used for analysis to uncover trends that require further initiatives.

- The Telemark Battalion on patrol in Kosovo.



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INITIATIVES

● INITIATIVE 18

The Armed Forces shall improve and implement comprehensive screening criteria for selection for service abroad, tailored to the relevant operation and category of personnel.

● INITIATIVE 19

The Armed Forces shall develop and implement comprehensive screening criteria for analysing healthrelated psychological and physical development before, during and after serving.

PERSONNEL SHALL RECEIVE RELEVANT TRAINING AND INSTRUCTION TAILORED TO THE CHALLENGES THEY WILL MEET DURING THE OPERATION, WITH MASTERING STRESS AS AN IMPORTANT ELEMENT

All personnel will be provided with good, relevant training and instruction. This must be tailored to the mission the personnel are being sent on, the role they will play, and the situations they may encounter in the relevant conflict area.

Psychological reactions to war trauma are a natural part of the defence mechanism of a person who is exposed to extreme experiences. Therefore, a key element of all military training and instruction is developing and training the ability to return to normality. Such training should be systematically and routinely carried out, including during operations.

Research shows that units that have been well trained together have a better basis for tackling extreme situations. Therefore, mission-specific training is especially important for units that have been brought together for just a single mission. Training that involves awareness of mastering stress, natural psychological reactions, techniques for mastering these, and the potential consequences for those who do not master these reactions is also important military training. The aim of this is to minimise psychological disorders by preparing the personnel and units well, and by using individual and group mastering stress techniques in the unit. The unit commander must be able to draw on expert knowledge as needed.

It is important that symptoms of psychological trauma injuries are discovered quickly so that treatment can be started. Personnel who have developed post-traumatic stress disorder (PTSD) have good prospects of a full recovery if they receive quick and adequate treatment.

The stigma traditionally associated with psychological injuries must be significantly reduced in order to ensure good interaction between unit commanders and experts. The clear objective is to ensure that personnel with psychological stress injuries are treated as quickly as possible and returned to duty in their unit. A focus on mental health must form a natural part of the unit's health care, and the relationship with the relevant qualified personnel must be made as routine as possible. This will be achieved by ensuring, insofar as possible, that the same mastering stress team supports a unit during all phases.

Particular weight shall be afforded to individual follow-up of risk groups: personnel who have been through particularly



Psychological reactions are a natural part of the defence mechanism of a person who is exposed to extreme experiences





traumatising experiences, the physically injured, and personnel who are repatriated (sent home) against their will.

A clear understanding of what the missions consists of, the overall objective it is intended to support, and one's own role in this are important factors in any unit's morale. A failure to communicate such information could easily have a negative impact on the personnel's ability to maintain good mental health.

INITIATIVES

● INITIATIVE 20

The Armed Forces shall ensure personnel receive good information about the mission and their role in it, and ensure they receive continuous updates.

● INITIATIVE 21

The Armed Forces shall ensure good training in the use of military force by updating the minimum requirements and stipulating requirements for practical training in the use of force for personnel who are being deployed in international operations.

● INITIATIVE 22

The Armed Forces shall continuously quality assure the build up period and other preparatory courses to identify development opportunities. Mastering stress, media training, dilemma training, culture, attitudes, ethics and leadership shall be included in the preparations:

- The skills of commanding officers and leaders in relation to mastering stress, preventing psychological combat reactions, and managing potentially traumatic incidents at their level shall be improved.

- Competence in mastering stress and psychological combat reactions shall be improved, especially with regard to chaplains and medical personnel.
- Civilian personnel on shorter missions in the area of operations must be adequately prepared.
- Information must be developed continuously, including through sharing lessons that have been learned in follow-up programmes after returning home, ref. initiative 48. The sharing of such experience must also address deployed individuals.

● INITIATIVE 23

The Armed Forces shall review, adapt and possibly expand training in mastering stress and psychological combat reactions.

● INITIATIVE 24

The Armed Forces shall improve its competence in, and have clear routines and a system for, self-help, buddy and unit support, as well as specialist help in the area of operations including with regard to mastering stress.

● INITIATIVE 25

The Armed Forces will attempt to make all relevant types of materiel that will be used in international operations available to the unit responsible for organisation and equipment from day one.

● INITIATIVE 26

The Armed Forces will further develop the content of basic training with a view to the basic knowledge of personnel who are recruited to units that contribute to international operations.



The support you families give our soldiers while they are deployed abroad cannot be expressed in words

Grete Faremo



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PERSONNEL WHO ARE DEPLOYED ABROAD AND THEIR FAMILIES SHALL RECEIVE ADEQUATE INFORMATION AND GUIDANCE

The relationship with the soldier's family is a fundamental element of the Armed Forces' personnel policy. Good information about the content of the military operation, how families can stay informed while soldiers are deployed abroad, their opportunities and rights, and the consequences the service could have in the worst case scenario, are key elements of this important involvement.

The Armed Forces' family directive was reviewed in 2009 and focuses on the family policy initiatives intended to support all serving personnel. Service personnel must be able to combine a career with a good family life. It is important that this directive is afforded the same weight as other directives issued by the Chief of Defence, and that local unit commanders budget for the costs this involves. In addition to the initiatives in the family directive, a number of family initiatives have been introduced in connection with the deployment of personnel in international operations, including a separate tax-free family supplement of NOK 6,000 per month (2011) in the special agreement for such service.

During 2011, the Norwegian Veterans Association for International Operations (NVIO) will, along the same lines as the buddy support scheme, establish nationwide provision for everyone with family members in international operations. The aim is for the provision to be available at all of NVIO's 50 local associations.

Bufetat and the local family welfare centres can offer advice and counselling for couples and families, as well as help with managing relationship-related challenges. For more information see the section 'The role of Bufetat's', as well as initiatives 105–107 and 111–116.

INITIATIVES

● INITIATIVE 27

The Armed Forces will produce an information pack that provides information about the various services relating to rights, follow-up, support and activities for personnel before, during and after international operations. The organisations' roles will be explained.

● INITIATIVE 28

The Armed Forces will expand its offer of courses on relationships so that they are available before and after serving in international operations.

● INITIATIVE 29

The Armed Forces will evaluate earlier initiatives and draw up further initiatives aimed at children and young people. The MOD has supported the publication of a book for families with children.

● INITIATIVE 30

The Armed Forces will, in close consultation with NVIO, lay the groundwork for nationwide provision for families based on the model used in the buddy support scheme. The MOD is providing NVIO with NOK 108,000 in support for initiatives aimed at families on a local level in 2011.

● INITIATIVE 31

The Armed Forces will offer psychological/psychiatric follow-up for the families of the injured and fallen in the period immediately after the incident. An individual assessment will have to be made as to whether the health service or the Armed Forces will best be able to provide the services.



- In Service for Norway /// The Norwegian armed forces' veterans



THE ARMED FORCES HAVE INITIATED A NUMBER OF INITIATIVES AIMED AT INCREASING UNDERSTANDING AND KNOWLEDGE ABOUT WHAT INTERNATIONAL OPERATIONS INVOLVE

Transparency and communication are important factors in relation to society's recognition of the service performed in international operations. It is also important that the soldiers' families can be kept up-to-date.

The Armed Forces tries to ensure the media receives the necessary information about the content and execution of international operations. It does this in a number of ways, including through a more proactive information strategy, by enabling journalists to embed with the forces, and through the active use of websites tailored to the target groups.

Specifically, this objective of increasing the understanding and knowledge of what international operations involves has resulted in the following initiatives:

- The Armed Forces will further improve its practices in relation to embedding journalists with Norwegian forces in missions carried out as part of international operations.
- The Armed Forces have established a project aimed at making better use of social media as a dialogue-based communications arena for the Armed Forces and the general public.
- The Armed Forces' new website, www.forsvaret.no, was launched on 6 January 2011. Rather than being a channel for general information, the new website is designed with the needs of the most important target groups in mind.

- The Armed Forces have opened up access to its media archive. This means everyone has free access to several thousand photos and film clips from the Armed Forces' activities at home and abroad.

The following TV and documentary teams are among those The Armed Forces have assisted:

- Documentary (independent) about a unit from the armoured regiment from their insertion to serving in Afghanistan, focusing on how soldiers are trained for international operations
- Documentary from PRT in Afghanistan in which NRK (Norwegian Broadcasting Corporation) has been embedded with a contingent
- TV2 is making a report/documentary entitled 'Afghanistan – ten years later'

A soldier's service should be meaningful with as little risk of injury as possible and they should be confident they will be looked after

Follow-up in the mission area will be improved and a mid-evaluation has been initiated which will primarily focus on the psychosocial working environment. This evaluation will be developed to also include other aspects within health, safety and the environment tailored to the relevant service. The mid-evaluation will be important for guiding and supporting the leadership and units in the area of operations, while ensuring we learn well from experience in the future.

- NORBATT patrol in the village of Chebaa in southern Lebanon.



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As part of strengthening the work in the mission area, the MOD has signed an agreement with MHCS concerning the Norwegian Board of Health Supervision supervising the Armed Forces' health services for Norwegian personnel deployed on military operations abroad for a period of three years.

Military commanders have extensive responsibilities in international operations and often operate under extreme pressure. They should receive the necessary support, including during operations.

INITIATIVES

● INITIATIVE 43

The Armed Forces shall further develop its work on attitudes, ethics and leadership specially related to service in international operations. The MOD is establishing an ethics committee.

● INITIATIVE 44

The Armed Forces shall introduce a commander support network by establishing a partner and mentor scheme for commanders in international operations.

● INITIATIVE 45

The Armed Forces can via separate agreements offer personnel from other sectors in the same area of operations support from the Armed Forces mastering stress team.

● INITIATIVE 46

The agreement between the MOD and MHCS concerning supervising the Armed Forces' health services for Norwegian personnel deployed on military operations abroad will be evaluated.

The Armed Forces shall follow-up veterans after they return home. Injured veterans shall receive the best possible treatment and experience the transition from the Armed Forces' care to the civilian support system as comprehensive and seamless.

Even through the vast majority return home in good health after deployment in international operations, some will need special follow-up. Some may have been wounded in combat or injured in some other manner, others may have contracted what Norwegians would consider rare diseases, and some may need help coping with traumatic experiences. Some veterans who are only temporarily employed by the Armed Forces may need help and guidance in relation to studying or finding a civilian job.

THE ARMED FORCES' ONE-YEAR PROGRAMME IS INTENDED TO LIMIT AND DISCOVER POTENTIAL INJURIES

The Armed Forces' specialists are able to help veterans in a more tailored manner than the civilian health service. Because of this, the right to one year's psychiatric and psychological follow-up by the Armed Forces became a statutory right on 1 January 2010.

The Armed Forces shall continue its individual follow-up in the first year after returning home so that late manifesting needs are also caught. The regulations relating to the Armed Forces Personnel Act refer to this as a "health check, report and follow-up".



The Armed Forces' one-year programme provides all veterans with active, personal and tailored follow-up after returning home. The programme is intended to prevent, survey and discover injuries, and clarify any need for support with returning to working life

In addition, "a deadline shall be set for when professional judgement requires that a person entitled to such help must have received such health-related help". A special programme designed to address this responsibility will be drawn up.

The objective of this programme will be to limit the number of injured, while laying the groundwork that ensures they receive treatment as soon as possible. The purpose of the treatment – and insofar as it is possible – is to return personnel to their units. In those cases where this is not possible, a rehabilitation programme shall be established that takes account of the personnel's wishes and future opportunities.

Such individual, active follow-up must take into account the fact that not everyone returns home as part of a larger contingent. The system must also take into account the fact that not everyone has the same employment relationship with the Armed Forces.

The programme must also address the large majority who are not injured in any way. This category of personnel also needs information, the opportunity to maintain friendships from international operations, and in some cases support with finding a job or studying.

INITIATIVES

● INITIATIVE 47

The Armed Forces will offer psychological/psychiatric evaluation and referrals to the civilian health service regardless of how long has passed since someone's service ended.

.....

● INITIATIVE 48

The Armed Forces shall establish a programme for the active, personal, and tailored follow-up of the individual veteran during the first year after returning home. The programme is intended to prevent, survey and discover injuries, and clarify any need for support with returning to working life. This initiative must be seen in connection with other initiatives such as selection, build up, and mid-evaluations. Consideration must be given to the extent to which the one-year follow-up programme will become a mutually binding part of service. Concrete programme initiatives will include:

- Each individual shall, no later than upon their return to Norway, fill in a form designed to clarify individual follow-up needs.
- The Armed Forces shall further develop its pilot project in which contingents are shielded at stopovers before arriving in Norway in order to give them time to adjust from the norms, rules and behaviour that apply in the area of operations to those that apply at home. An arena for sharing experiences in a safe, relaxed environment without outside influences shall be created in which the Armed Forces' mastering stress team, and others, will participate.
- Upon arrival in Norway, veterans will be cleared through the AFA, which will include a chat with a doctor. Representatives from NAV and Bufetat will be available to provide information and advice.
- 3-6 months after returning home the Armed Forces shall write to veterans, enclosing a standardised questionnaire, and provide information about the follow-up service and encourage them to get in touch if the need special follow-up or counselling. Special attention will be paid to those who do not respond to the contact.
- The Armed Forces shall aim to arrange reunions for veterans 9-12 months after they return home. NAV and Bufetat will be available with information and advice.

- The NAD (Norwegian Aeromedical Detachment) is a much in demand capacity and an important factor in ensuring wounded soldiers can be evacuated safely.



- The Armed Forces shall ensure comprehensive and long-term rehabilitation, counselling, and appropriate retraining and employment for personnel who return home with impaired functional abilities as a result of serving in international operations.
- The Armed Forces shall establish a system that during the first year after returning home ensures routine debriefings and experience transfer, with active, personal follow-up especially designed for commanders.
- In those cases where veterans have not been part of a larger contingent, the programme will be tailored to the veteran in order to ensure they are properly surveyed and receive active, personal and tailored follow-up.
- Debriefing and experience transfer for personnel deployed individually, e.g. UN observers, shall be addressed in the follow-up programme. This entails the establishment of routines that enable any lessons learned to be incorporated into preparatory courses and exercises. Experience transfer shall encompass security factors, HSE and required knowledge about the organisation personnel are going to work in.

● INITIATIVE 49

The Armed Forces shall continue the work it has started on establishing good overviews of previous and current operations. The Armed Forces will establish a separate overview of all personnel who have served in international operations.

INJURED VETERANS SHALL RECEIVE THE NECESSARY ASSISTANCE

Seriously injured veterans will be evacuated in line with the Armed Forces' procedures. Injured personnel will require immediate treatment in the civilian health service upon arrival in Norway. They may subsequently also require assistance from the Norwegian Labour and Welfare Administration (NAV) and be entitled to benefits from the Norwegian Public Service Pension Fund. In such cases the Armed Forces shall put in place a support system to help ensure the personnel's needs are addressed as best as possible and that the support is coordinated and accommodating. The Armed Forces shall provide assistance to minimise any extra burden the injured personnel may feel from what may be perceived as burdensome bureaucratic routines. The normal employer responsibilities borne by the Armed Forces include ensuring that injuries are properly reported and documented. This is done partly using



Stopovers and shielding provide soldiers on their way home from international operations with time to adjust from crises, war-like conditions and conflicts to a Norway very much at peace

a number of different systems and partly for different purposes. Nevertheless, collated, good documentation is very important, including when it is needed to support claims for benefits from NAV and the Norwegian Public Service Pension Fund. It is also very important from a preventive HSE perspective and with regard to maintaining good overviews and statistics that can also be used for research purposes. The Working Environment Act does not apply to international operations, but the service should nonetheless comply as closely with the HSE provisions as conditions permit.

INITIATIVES

● INITIATIVE 50

The Armed Forces shall follow-up injured personnel during their treatment or rehabilitation after serving until both parties agree that the contact can be ended.

● INITIATIVE 51

The Armed Forces will if necessary provide up to one year's temporary employment to personnel who are seriously injured as a result of serving.

● INITIATIVE 52

The Armed Forces shall ensure the necessary registration and reporting, and establish systems that can generate good quality data for health-related follow-up, documentation, preventive HSE, statistics, overviews and research.

● INITIATIVE 53

The Armed Forces shall ensure the good, reliable and relevant transfer of health information for use by the civilian health service. Any transfer of information assumes consent pursuant to the current legislation at any given time.

● INITIATIVE 54

The Armed Forces will increase its openness about psychological stress injuries as part of its work on attitudes, ethics and leadership. This should contribute to increasing understanding, lowering the threshold for seeking help and reducing prejudice with the aim of being able to retain personnel in, and return them to, their posts.



THE ARMED FORCES WILL ALWAYS PROVIDE ADVICE AND GUIDANCE TO VETERANS – ONE DOOR IN

The Armed Forces Veterans Administration (FVA) was established in 2006 and is the Chief of Defence's advisory body for all issues relating to veterans. The FVA is tasked with addressing and coordinating initiatives that affect veterans and issues relating to veterans. The FVA has to date provided advice and guidance to several hundred veterans.

The Office for Psychiatry and Mastering Stress (KPS) in the Norwegian Joint Medical Service (NOJMS) possesses cutting edge competence in psychological reactions to war trauma. KPS has been reinforced in recent years. KPS will always respond to enquiries made by veterans and offer veterans who need it consultations, regardless of how long has passed since their service ended.

Other units in the Armed Forces such as the Armed Forces' Veterans Centre, the Armed Forces' Health Register in NOJMS and the AFA also play important roles in following up veterans.

The Armed Forces' units that currently serve personnel who have completed international operations have developed in an uncoordinated manner and have no joint plan. At the same time the Armed Forces have, e.g. through the Veterans Report, Proposition No. 67 to the Storting (2008–2009) *Strengthening the rights of veterans after international operations* and pertinent regulations, assumed a special responsibility for follow-up.

The veterans system in the Armed Forces must be capable of ensuring that the *one-year programme* works and is systematised. It must be capable of ensuring good, systematic surveys of personnel deployed abroad, both for research and personal follow-up purposes. Not least, the system must ensure that injured veterans are spared the feeling of encountering an adversarial state bureaucracy, and veterans who contact the Armed Forces should experience that there is just '*one door in*'. In other words, those who need follow-up must have only a single point of contact to deal with.

The Armed Forces is not going to establish its own health service, NAV or Norwegian Public Service Pension Fund, rather it is going to facilitate and provide advice to veterans when they need support from these agencies. The focus will be on the personnel's individual needs, and therefore the system must have the ability to adjust to these. Veterans should meet a competent and coordinated system in the Armed Forces. The system will be headed by a high ranking person who is high up in the organisation and has good access to those in charge of the Armed Forces.

Those functions in the Armed Forces tasked with following up veterans will be strengthened and better coordinated. Therefore, an evaluation of the current system is underway with the objective of ensuring that the Armed Forces concentrates its resources in a better manner.



Those who need follow-up must have only a single point of contact - *'one door in'*.

INITIATIVES

● INITIATIVE 55

The Armed Forces is evaluating those parts of its organisation that carry out veterans-related tasks. The objective is to establish an efficient, competent system for taking care of both serving veterans and veterans who have ended their employee relationship with the Armed Forces. The system must be flexible enough to cope with extraordinary needs, e.g. when seriously injured personnel return home. The organisation must lie high up in the Armed Forces' structure, have good access to those in charge of the Armed Forces, and be led by a high ranking person. Veterans who seek help must have a single point of contact, which will then guide onwards them as needed.

● INITIATIVE 56

The Armed Forces shall prepare a special proof of competence after serving in international operations. This proof of competence could, for example, increase an individual's opportunities when transitioning to the civilian job market.

● INITIATIVE 57

The Government will further develop an internet portal that encompasses all the services and care society offers to personnel in international operations. The Armed Forces will consider developing platforms that enable veterans, families and society as a whole to communicate with the Armed Forces.

● INITIATIVE 58

The Armed Forces will further develop the social media skills of its press and media personnel who are deployed with units. The Armed Forces have initiated a project aimed at better utilising social media as a dialogue-based communications arena for the Armed Forces and the general public.

● INITIATIVE 59

The Armed Forces will in collaboration with one or more organisations examine opportunities for involving business with regard to specific framework agreements concerning the employment of veterans.



THE RULES CONCERNING OBJECTIVE LIABILITY AND THE COMPENSATION SCHEME

In addition to the rules concerning the statutory follow-up of veterans, a new basis of liability was established on 1 January 2010 – objective compensation liability – in the event of personal injuries in international operations. Simply put this means that the state, regardless of blame, shall provide compensation for losses incurred by military and civilian personnel in the Armed Forces due to physical or psychological injury that occurs due to serving in an international operation.

A special compensation scheme has been introduced for service personnel who suffered psychological stress injuries in international operations in the period 1978 up to 1 January 2010. Initiatives to clarify and simplify dealing with cases have been introduced. Work is continuing on developing the scheme.

INITIATIVES

● INITIATIVE 60

The MOD will establish an appeals board for the special compensation scheme and evaluate it after two years.

● INITIATIVE 61

The Government is working on developing the special compensation scheme.

The collaboration with the organisations which emphasises low threshold schemes and local meeting places will be developed further

The veterans and employee organisations have been important partners in the drawing up of the action plan. The organisations complement each other and are crucial partners in the work on veterans' issues. They also possess valuable knowledge, not least from their direct contact with individuals.

Veterans policy is also personnel policy, and the vast majority of the Armed Forces' employees will over time acquire experience from multiple international operations. Therefore, the collaboration with the employee organisations is a prerequisite for the further development of the Armed Forces' personnel policy.

The MOD wants to develop this good collaboration within the area of veterans with the organisations further. New initiatives intended to develop this collaboration include the introduction of annual veterans conferences in which the organisations play a natural role and quarterly meetings between the ministry and the organisations. The Armed Forces will collaborate with the organisations on the production of information packs for returning veterans. The MOD recognises the organisations' competence and importance, which is reflected by the increase in annual operating support provided by the ministry to veterans organisations. This has increased from NOK 6.4 million to NOK 11.1 million in the period from 2005 to 2011.

INITIATIVES

● INITIATIVE 62

The MOD shall, in collaboration with the Armed Forces, arrange annual veterans conferences.

● INITIATIVE 63

The MOD shall hold quarterly meetings with the organisations on issues relating to personnel before, during and after serving in international operations, in addition to the organisation and activities associated with this. These meetings will particularly focus on continued follow-up, evaluation and further developing the action plan.

● INITIATIVE 64

The veterans organisations will be invited to participate with one representative in the MOD's programme committee when it comes to research concerning service in international operations.

● INITIATIVE 65

The MOD will, in collaboration with the Armed Forces and the organisations, offer training for individuals and leaders in the organisations and the Armed Forces within contracts and legislation, and routines for knowledge enhancement and a common understanding of this field.

● INITIATIVE 66

The Armed Forces shall, in collaboration with NVIO, further develop the system of local monthly veterans meetings. The existing scheme covers 46 meeting places. The Armed Forces will support initiatives that provide further opportunities for veterans to meet on a regular basis as is currently done with the established buddy support system.

● INITIATIVE 67

The MOD will provide financial support for initiatives that help to continue and develop information work for improving competence in, and understanding of, the injured veterans' situations in the civilian support system and in society in general. In 2011, the MOD has provided financial support amounting to NOK 300,000 to the veterans association SLOPS for its 'All the way home' project.

● INITIATIVE 68

The Armed Forces shall, in consultation with the employee organisations, examine how the service's occupational health service can better contribute to active processes relating to reports affirming personnel are no longer ill. Furthermore, consideration shall be given to whether or not the Armed Forces can better ensure adaptation and activation for people whose service has resulted in permanently or temporarily reduced capacity.

- KNM Fridtjof Nansen during Operation ATALANTA, Gulf of Aden.



Research and surveys shall generate knowledge that provides a basis for future preventive initiatives and treatment

Better knowledge about the effects, stresses and general situations of serving personnel and their families is crucial when it comes to improving the care of personnel in international operations. Research into psychological stress injuries will receive special priority.

THE MINISTRY OF DEFENCE SUPPORTS A NUMBER OF RESEARCH PROJECTS

The MOD has introduced a programme area that will yield knowledge about veterans' health and life situations, as well as what works with regard to injury prevention. In 2010, the ministry commissioned the Norwegian Centre for Violence and Traumatic Stress Studies (NKVTS) to produce an overview of veterans research. This report forms part of the basis for establishing projects within the veterans research programme area.

In 2010, the ministry allocated NOK 600,000 to NOJMS to fund a follow-up study of soldiers who have served in Lebanon, Iraq, the Balkans, Somalia and Afghanistan, and

NOK 100,000 to a project linked to the mid-evaluations regularly carried for larger contingents.

The MOD gave a grant of NOK 125,000 to NKVTS for the completion of a doctorate on surviving relatives after the Vassdalen accident.

PROGRAMME AREA FOR VETERANS - BACKGROUND

Research into veterans must be supplemented with more social science perspectives in addition to the medical ones. This entails a need for greater knowledge about the larger social context veterans are part of, both with regard to work and privately, as well as the significance of serving abroad in such a context. International operations can place great stress on family life and many reports state that thinking about family causes the greatest stress. More knowledge about the life situations and living conditions of veterans after their service ends is also needed. The organisations will be important partners in this work.

INITIATIVES

● INITIATIVE 69

Current research in the MOD's programme area for veterans:

- The MOD will allocate NOK 700,000 in 2011 to continuing the follow-up study by NOJMS.
- The Armed Forces will implement a project aimed at improving methods and the selection and screening system.
- The Armed Forces will conduct a forward looking study that will follow soldiers over time: from insertion, selection and before, during and after serving in international operations (prospective study).
- Research into working environments, mastering and occupational health among veterans.
- Research into work and the family.

● INITIATIVE 70

The MOD will further develop a knowledge base based on existing research.

● INITIATIVE 71

The Armed Forces' health register shall play a central role in R&D linked to veterans:

- The Armed Forces have procured and introduced a new technical solution for its health register which ensures better functionality.
- The Armed Forces have inspected the quality of the health register to come up with initiatives for data quality and resources aimed at maintaining a good overview of its personnel's health status.
- The Armed Forces' health register will improve the scope and quality of relevant data via specific partnerships contracts with other national health registers.

● INITIATIVE 72

The Armed Forces will follow-up the report on Gulf veterans.

● INITIATIVE 73

The MOD, MOJ, MHCS and ML will conduct a joint living conditions survey to gain an overview of the life situations of veterans and others deployed abroad for further follow-up. The results of this survey will also provide parameters for future research and information that could provide a basis for more interministerial initiatives.



The MOD, MOJ, MHCS and ML will conduct a joint living conditions survey. The survey is an important initiative with regard to providing greater insight into the health and life situations of personnel



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International cooperation shall contribute to the sharing of experience and knowledge in the area of veterans

The field of veterans work is continuously developing, including internationally, and the mutual sharing of experience and knowledge between nations is important. The Nordic cooperation has in particular put veterans work on the agenda. However, we are now seeing a trend towards greater cooperation in this area in NATO as well.

NORDIC COOPERATION

The area of veterans is embedded as a focus area at all levels of the Nordic Defence Cooperation (NORDEFECO). In addition to the general exchange of ideas and experience, collaboration within veterans research and taking care of personnel before, during and after serving in international operations is being looked at, with a particular emphasis on the returning home phase.

Given that Sweden is chairing NORDEFECO in 2011, the Swedish Ministry of Defence has initiated the *Identify Common Areas for Nordic Cooperation on Veteran Issues* survey. The plan is for the report to be considered by NORDEFECO's meeting of defence ministers in November 2011.

THE DANISH INITIATIVE IN NATO

As a follow-up to the declaration by the top level meeting in Lisbon in November 2010 within the area of veterans, Denmark has advanced an initiative that aims to establish a framework and arena for cooperation in NATO. The areas mentioned include national approaches, available treatment alternatives, best practices, and the exchange of new ideas. The Government supports the Danish initiative.

COOPERATION WITH OTHER COUNTRIES

The MOD has initiated contact with countries outside the Nordic region that have made significant progress in the field of veterans follow-up. So far the UK stands out as an especially interesting model and partner country. Other nations of interest include Australia, Canada, the Netherlands, Germany and the USA.



INITIATIVES

● INITIATIVE 74

The Government will, through NORDEFCO, consider collaboration on veterans research and taking care of personnel before, during and after serving in international operations, with a particular focus on the returning home phase.

● INITIATIVE 75

The MOD will take the initiative and bring up stress issues in the Nordic Defence Cooperation.

● INITIATIVE 76

NORDEFCO is planning to hold a Nordic veterans conference in 2012.

● INITIATIVE 77

The Armed Forces will continuously assess international cooperation projects and contractual collaboration with allied countries with regard to the recruitment of military medical specialists.

● INITIATIVE 78

The MOD and Armed Forces will further develop the dialogue on veterans issues with relevant partner countries.

● INITIATIVE 79

The Government will through NORDEFCO emphasise greater cooperation with Estonia, Latvia and Lithuania in the area of veterans.

● INITIATIVE 80

The Government will, in line with the declaration from the NATO meeting in Lisbon in 2010, help to ensure that veterans issues are put on NATO's agenda and follow-up the Danish initiative by helping to ensure NATO becomes more fundamentally involved in the area of veterans.





We shall remember with pride
and honour those who fell in the
service of our country

Grete Faremo





THE FOREIGN SERVICE

The MFA will ensure the good selection, training and follow-up of staff and those accompanying them who are posted to stations with an elevated health risk



Norway's foreign policy tasks span a broad spectrum, and foreign service takes our staff into both areas of conflict and many other types of places it is demanding to work in. This continuously makes new demands on the MFA as an employer

Jonas Gahr Støre

The staff of the Ministry of Foreign Affairs and their families that accompany them must be well cared for before, during and after foreign service

An increasing number of civil servants are serving in places that are high risk due to war or war-like conditions, criminality, serious pollution, or other threats to mental or physical health, as well as combinations of these.

The degree of psychological stress experienced by personnel who are exposed to high risk over a longer period is normally elevated. This can manifest itself in sleep disorders, heightened physiological alertness, fear reactions, concentration difficulties, and cooperation problems, and can have cumulative effect on other types of experienced stress.

Psychosocial care requires initiatives and organising that covers the entire timeline of the foreign posting. This runs from recruitment via preparations for departure and follow-up during the posting, to reception upon their return home and support readjusting to life in Norway. This 'chain of initiatives' requires coordinated routines and procedures.

The MFA will, in collaboration with the MOD, the MFA's provider of health checks and other actors, ensure good selection, training and follow-up processes for staff and those accompanying them to postings with elevated health risks. The ministry will also draw on the experience of the Armed Forces in relation to this.

Good routines for the selection and preparation of staff shall ensure they are able to perform their duties

The staff of particularly exposed stations shall undergo thorough physical and mental health checks before, during and after their service. These will also be offered to those accompanying them.

The training programme, which is aimed at team building and creating a good working environment by improving crisis management skills and mutual trust between the station and the support system in Norway, is very important. The ministry will collaborate with the MOD and others on suitable training initiatives.

INITIATIVES

● INITIATIVE 81

The MFA will introduce an assessment tool for use in the selection of personnel in collaboration with the Armed Forces, and involve specialist expertise in its recruitment process.

● INITIATIVE 82

The MFA will introduce mandatory mental and physical health checks for the most exposed stations, before, during and after serving, including debriefings. Those accompanying staff abroad will also be offered these.



An increasing number of personnel are serving in places with an elevated health risk due to war, conflicts, criminality, serious pollution or other threats to mental and physical health

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- Strict security at Norway's embassy in Islamabad.



Debriefings in the wake of critical incidents for personnel at particularly exposed stations will be mandatory

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Existing initiatives will be developed to ensure staff are well looked after during and after their service

The consequences of poor working environments combined with a high level of preparedness and risk can have a negative impact of the personnel's mental health. Initiatives relating to the stations must be designed to cope with both acute and more long-term follow-up needs.

The colleague support function shall provide front line help in the form of simple psychological crisis intervention after traumatic incidents or in situations involving prolonged, serious stress, and shall act as a support person for all personnel at the station and their families.

The "**Rest and recuperation**" scheme entitles personnel to special leave. Assessments of need will be made regularly. Evaluations indicate that all stations regard this as valuable. It has a great effect on motivation and performance, and helps recruitment to the stations.

Regular health checks are an important scheme for staff posted abroad and those accompanying them. The idea is to be a step ahead. The prognosis for newer problems is far better than for those that have been experienced for some time.

Mastering stress seminars and debriefings will be arranged after critical incidents and routinely for personnel at the most exposed stations. The collaboration with the Norwegian Joint

Medical Service commenced in 2010. The content of the meetings will be tailored to the participants' situation and experiences. The MFA's personnel department will get in touch after all major incidents in which staff are directly or indirectly involved and offer chats. Support visits will also be made to various stations.

INITIATIVES

● INITIATIVE 83

The MFA will further develop the training in team building linked to service at especially exposed stations.

● INITIATIVE 84

The MFA will inform families that stay at home of the conditions associated with serving, including their rights.

● INITIATIVE 85

The MFA will reinforce the colleague support function. The colleagues support function will play a role in critical incidents and in the event of serious stress. All embassies have at least one trained colleague support person.

● INITIATIVE 86

The MFA will arrange mastering stress seminars for personnel at the stations during service and after critical incidents.



Norway is a key development policy player in a number of conflict filled regions. Our staff must be well taken care of regardless of where they are stationed

Erik Solheim

The provision available to staff and their families after serving will be improved

The Ministry of Foreign Affairs arranges regular gatherings for the children of staff upon their return home. These can be particularly important for children who have been involved in demanding situations over time. Staff who have served abroad and their families may also need debriefing upon their return home. All of those who serve abroad at the most exposed stations shall undergo debriefings upon their return home.

INITIATIVES

● INITIATIVE 87

The MFA will consider how recognition of the conclusion of service at the most exposed stations can best be marked.

● INITIATIVE 88

The MFA will reinforce its work on events that are currently arranged for the children of staff who have just returned home from serving abroad.

- Following the attack on the Serena Hotel in Kabul in 2008, security at the embassy has been significantly reinforced.





THE JUSTICE SECTOR

Personnel from the justice sector provide wide-ranging and varied assistance in conflict and catastrophe areas over large parts of the world



The service of the personnel should be meaningful. They should be confident that they will be looked after and face as little risk of injury as possible

The Ministry of Justice and the Police deploy a number of types of personnel on international service

DSB PERSONNEL

Personnel from the Directorate for Civil Protection and Emergency Planning (DSB) provide support to international organisations such as the UN, NATO and the EU in the form of both individual experts and support teams. A number of professional categories are represented and external personnel are employed by the DSB while they serve.

PERSONNEL FROM THE NORWEGIAN RULE OF LAW POOL

The Norwegian Rule of Law Pool consists of judges, public prosecutors, military prosecutors, defence lawyers, police prosecutors and probation officers. It has around 100 members who can at short notice provide assistance with the development of democracy and the rule of law in countries that have experienced war or internal conflict, in countries that are in a transition phase from a totalitarian regime, or in countries with weak democracies.

NORWEGIAN POLICE PERSONNEL PARTICIPATE IN THE UNITED NATIONS POLICE (UNPOL)

They are primarily tasked with acting as advisers to and mentors for the local police after a conflict. This involves living and serving closely with the local population with the challenges this entails with regard to logistics and safety.

Personnel who are going to participate in international operations must be as well prepared as possible

POLICE PERSONNEL

Police officers must have three years' service after completing the Norwegian Police University College before they can apply for international service. Relevant applicants complete the Norwegian Police University College's UN basic course and are assessed in relation to the relevant operations. Based on an overall assessment, individuals are offered contracts of 6 or 12 months, depending on the operation. During their service abroad, the head of the contingent carries out performance assessment interviews; the main impressions from which are reported back to the National Police Directorate.

DSB-PERSONELL

All personnel are recruited on the basis of defined competence criteria set on the basis of the lessons learned from earlier missions, in consultation with the international organisations, and in consultation with sister organisations in other countries.

All recruited personnel should basically receive the same basic training. Deployment routines may vary from mission to mission, but the personnel should basically undergo a checking out and preparatory programme tailored to the specific mission. Regardless of the nature of the mission,



- UNPOL at work in Liberia. <<
- ANP soldier Laili is presented with an award by her Norwegian police mentor for being the best female shot. >>

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a contract of employment is signed with each individual for each mission, based on a *general* contract for serving abroad.

All the personnel documentation required to work for the relevant organisation must be quality assured and sent to the organisation in accordance with the signed agreements. The personnel may also be asked to sign ethics and other guidelines concerning their conduct.

PERSONNEL FROM THE NORWEGIAN RULE OF LAW POOL

Personnel recruited to the pool must have a minimum of four years' practice in the field. New members of the Norwegian Rule of Law Pool must participate in a week long mandatory preparatory course.

The selection of personnel for a mission is based on assessments of the competence needed for the position, gender, place of work versus previous workloads or position. One-year contracts are normally signed.

A newsletter is sent to all members to ensure they have access to information and to keep people motivated while they wait for an assignment.

Preparation and taking care of personnel before, during and after missions depends on factors such as the security situation and the humanitarian conditions in the mission country

CONCRETE FOLLOW-UP PRIOR TO A MISSION

A health check must be carried out before personnel are sent out. Personnel sent to conflict areas are briefed in various ways: by personnel who have returned home from the mission area, through training and joint training meetings with other personnel going on missions in equivalent areas such as police, Armed Forces or MFA personnel, and through contact with their team leader.

At the start of new missions in conflict areas the relevant team must be gathered for a one to two day pre-departure briefing with speakers on various topics such as: risk/security issues, health, psychology, researchers with political and social knowledge about the region/country, as well as country info from the MFA. The MOJ, as the employer, shall make the travel arrangements: including sorting out service passes, visas, travel out, and ensuring personnel are met upon arrival in the mission country.



The service of the personnel should be meaningful. They should be confident that they will be looked after and face as little risk of injury as possible

POLICE PERSONNEL

Police personnel are equipped with a full set of personal protective equipment and satellite communications. Where the situation requires it, police personnel will be armed and use armoured vehicles. The National Police Directorate maintains a 24 hour standby service that also includes medical evacuation and support for police personnel in international operations.

DSB PERSONNEL

The personnel's families and employers are provided with information about the mission upon and during deployment. Arrangements (routines and technical communications solutions) must always be in place that allow personnel to contact staff back in Norway at any time. Procedures for the *evacuation* of personnel if needed and responsibility for security in the mission location must have been clarified.

PERSONNEL FROM THE NORWEGIAN RULE OF LAW POOL

Missions in countries which are experiencing war-like conditions or an unstable security situation make demands concerning:

- Equipment and personal protective equipment

- Satellite communications, armoured vehicles and possible escorts
- Following up participants during and after missions

During missions personnel shall receive assistance with issues associated with being on a mission, security issues, factors associated with the engagement, family or welfare issues. The Ministry of Justice, in collaboration with the National Police Directorate and Norwegian emergency medical unit, is available 24 hours a day.

Personnel can be offered a **free home travel scheme** during the contract period for rest and recuperation purposes and to alleviate their missing their families.

Personnel who have experienced traumatic events will be offered psychological follow-up.

The employer shall follow-up personnel after they return home – they shall receive the best possible treatment and the transition from serving shall be as seamless and comprehensive as possible

Personnel and their families shall feel society recognises the contributions they have made through all personnel being recognised for their efforts after the end of their mission. This



- Norwegian police advisers working with the local police in a conflict area (UNTAES). <<
- End of mission dinner in the women's prison in Meymaneh. >>

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includes any presentation of medals in accordance with the applicable rules.

POLICE PERSONNEL

Police personnel who return home after the end of their service abroad are met at Gardermoen by representatives of the National Police Directorate. Demobilisation takes place after a thorough health check. The place where the personnel normally serves will have received information about the details of personnel's return home and their obligations with regard to looking after the returned personnel.

The personnel will be called in for a one to two day debriefing to discuss challenges, possibly with their partner. After serving in international operations, the personnel are subject to a quarantine period in relation to equivalent missions that lasts twice the length of the time they served abroad.

Special recognition is afforded police personnel after the end of their service abroad in their own police district with the chief of police presenting them with medals.

DSB PERSONNEL

Upon their return home, personnel returning alone or in groups shall be debriefed by their own organisation before demobilisation. They shall also be offered psychological or medical assistance. The contributions of the personnel shall be recognised after the end of their missions. This includes any presentation of medals in accordance with the applicable

rules. DSB personnel who have served abroad for more than 6 months in total can be awarded the Norwegian Civil Defence's medal for international service.

The work shall be documented and testimonials issued. This will be done in joint meetings for everyone who has participated in a mission.

PERSONNEL FROM THE NORWEGIAN RULE OF LAW POOL

After the end of a mission personnel will be invited to a final interview and end of mission dinner. Final interviews shall be conducted around twice a year for the bilateral projects. Personnel who complete a mission with an international organisation will be invited to a final interview when this is practically possible for the person concerned. After a mission with the Norwegian Rule of Law Pool a detailed confirmation of the work done in the completed mission will be issued.

The Ministry of Justice shall be available to personnel who have been on missions in conflict areas for an unlimited time.

INITIATIVES

● INITIATIVE 89

The DSB shall improve the current scheme for medically preparing personnel (vaccines, health checks, etc) through a collaboration with other agencies that deploy personnel abroad.



● INITIATIVE 90

The DSB shall improve the current scheme for the procurement of medicines and medical equipment through a collaboration with other agencies that deploy personnel abroad.

● INITIATIVE 91

The DSB shall improve the current scheme for debriefing personnel after returning home and follow-up medical checks, including following up over time, through a collaboration with other agencies that deploy personnel abroad.

● INITIATIVE 92

The DSB will review the routines for catching individual needs over time since the personnel come from a number of different public and private organisations.

● INITIATIVE 93

The DSB shall draw up routines that enable individuals to handle media contact, e.g. through a short media management course before or after a mission.

● INITIATIVE 94

The MOJ shall consider improvement initiatives for the Norwegian Rule of Law Pool linked to preparatory schemes at home and in mission locations.

● INITIATIVE 95

The MOJ shall draw up routines for the Norwegian Rule of Law Pool that enable individuals to handle media contact.

● INITIATIVE 96

The National Police Directorate will facilitate an increase in the proportion of women in Norwegian contingents.

● INITIATIVE 97

The National Police Directorate will make better arrangements for returning personnel with regard to the utilisation of their competence in their wider careers in the police district.

● INITIATIVE 98

The National Police Directorate will develop the leadership skills of experienced personnel for future managerial positions in international operations.

International cooperation shall contribute to the sharing of experience and knowledge in the field

The National Police Directorate is part of a close Nordic collaboration involving the exchange of participants and instructors for UN and EU basic and leadership courses. The National Police Directorate is part of a close collaboration with educational institutions in a number of African countries through the Training for Peace (TFP) programme.



COOPERATION AND FOLLOW-UP

The follow-up of personnel for whom a number of sectors are responsible shall be perceived as good, professional and as seamless as possible



Personnel from the Armed Forces, the foreign service and the police often work closely together before and during international operations

Cooperation during operations

The MAF and MOD work in the same areas in peacekeeping operations, such as in ISAF (Afghanistan) and KFOR (Kosovo). The Norwegian military base in Meymaneh also houses MFA personnel and personnel from the justice sector.

An agreement was signed in 2010 between the MOD and MFA concerning increased cooperation on the training of deployed personnel, as well as preparations for handling incidents in conflict and crises affected regions.

One example of intersectoral collaboration between the police and Armed Forces is the operational concept in Afghanistan in which police advisers work together with the military police in a *Police Mentoring Team* (PMT). There is and has been close intersectoral collaboration between the police and Armed Forces in most international operations. This was

particularly apparent in Kosovo between the *UNMIK Police* and *KFOR*.

It is important that the police and Armed Forces train together prior to deployment in the same operational area.

INITIATIVES

● INITIATIVE 99

Interministerial agreements concerning increased cooperation on training deployed personnel, as well as contingency plans for handling incidents in conflict and crises affected areas will be developed further. This type of agreement was signed in 2010 between the MOD and MFA.

- Head of mission, Britt Brestrup, in the *Temporary International Presence in the city of Hebron (TIPH)* operation on patrol with a Norwegian police officer and an Arabist. Brestrup was seconded to the MFA from the Armed Forces in 2009–2010 to head this international observer force, which with authorisation in the Oslo Agreement is tasked with observing and reporting breaches of human rights, international humanitarian law and the Hebron Protocol of 1997.







The goal is for each and every veteran to be helped in a good, competent manner where he or she lives

Hanne Bjurstrøm

The role of the Norwegian Labour and Welfare Administration

The Norwegian Labour and Welfare Administration administers services and benefits of major welfare importance to individuals, and the schemes constitute key parts of public welfare provision. The Norwegian Labour and Welfare Administration consists of the Norwegian Labour and Welfare Agency and a collaboration with local authorities concerning common local NAV offices, which in addition to state benefits also administer financial social help and qualification programmes. Several of the services and benefits NAV administers are of particular relevance for personnel who have served abroad. These include work advice and placements, labour market initiatives, occupational injury cover, and income protection schemes such as unemployment benefit and sickness benefit.

Failures have been pointed out in NAV's handling of personnel who have participated in international operations through

individual cases that have been reported in the media and experiences reported by veterans organisations. The criticism of the way in which cases are dealt with has particularly focused on long processing times, overly extensive documentation requirements and a lack of internal coordination. It has also been pointed out that it is difficult to contact caseworkers and that NAV's competence in relation to the situation of Armed Forces' veterans in particular is inadequate.

A number of the problems described are also reported by other users of the service. Therefore, two plans for better veterans follow-up are being worked on. The first and most important measure is to implement initiatives aimed at improving NAV's general target attainment. The second is to implement specific initiatives with regard to personnel who have served abroad.

In 2009 and 2010, NAV was allocated significantly greater operating funding, internal procedures were reviewed and improved, and the quality of casework was improved through



the implementation of key controls. The initiatives have resulted in clear improvements and the backlog of cases has decreased significantly since spring 2009.

A number of initiatives have also been implemented to improve internal interaction, availability and user follow-up in the service. These improvements will benefit all users, including veterans. The service has also implemented initiatives especially targeted at personnel who have served in international operations. This particularly applies to initiatives linked to improving competence and the Østerdalen pilot project. These are described in more detail later in this chapter.

INITIATIVES

● INITIATIVE 100

NAV has in collaboration with RVTs Øst designed a course for the staff of NAV's employment advice section and NAV's consulting chief physicians. The course is based on a training package developed by RVTs Øst. The intention is to create continuity in the transfer of competence from RVTs centres to NAV.

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● INITIATIVE 101

NAV will facilitate collaboration that enables NAV to draw on RVTs's expertise in its day-to-day work with individual users. This includes making external and internal competence in the field known in the service.

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● INITIATIVE 102

NAV has met with veterans organisations and will continue this dialogue as needed.

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All personnel deployed abroad should feel confident that they will be taken care of, both medically and financially. This also applies when symptoms first show up later

The role of the Norwegian Public Service Pension Fund

The Norwegian Public Service Pension Fund administers various compensation schemes that can provide Armed Forces' personnel who serve abroad with financial compensation in the event of injury/illness, including:

- The Act relating to industrial injury insurance
- The state Basic Collective Agreement, sections 23 and 24
- The protocol of 16 May 2000 (the INTOPS agreement)
- The compensation scheme for late manifesting psychological injuries from serving in the period (1978–2009)
- Regulations relating to ex gratia payments for late manifesting psychological injuries
- The Armed Forces Personnel Act (in force from 1 January 2010)

Compensation from these schemes can be very important for individuals who have been injured or have contracted illnesses. The Norwegian Public Service Pension Fund therefore bears a considerable responsibility as an administrator of regulations.

There has been some criticism in the media of the way in which the Norwegian Public Service Pension Fund has handled claims for financial compensation due to injury or illness related to international operations. The media has pointed out that processing times have been too long. The Norwegian Public Service Pension Fund indisputably administers a complicated set of regulations and it can be difficult for people to understand their rights. One of the bottlenecks the Norwegian Public Service Pension Fund encounters is a lack of available specialist capacity. Waiting times for consultations are often very long, and many specialists also take a long time to write reports. It is also difficult to find specialists with competence in this field.

It is important that those who are entitled to compensation receive it as soon as possible. People must also receive good information about their rights underway. Therefore, the



Norwegian Public Service Pension Fund has reviewed its processing routines and implemented a number of initiatives intended to reduce processing times and improve user follow-up. The concrete initiatives include:

- Taking the initiative with regard to the Ministry of Defence (MOD) in connection with the procurement of specialist reports. (Formally the regulations require the procurement of a specialist report pursuant to a specific mandate. However, the Norwegian Public Service Pension Fund has, in cooperation with the MOD, chosen to waive this requirement in cases that are already well documented and in which the claimant does not himself or herself request a specialist report.)
- Giving the cases the highest priority. No budget constraints being set for casework capacity in this area.
- Holding meetings with veterans organisations and collaboration on producing information materials.
- Creating information brochures with simplified application forms to simplify applications for compensation for late manifesting psychological injuries.

The Norwegian Public Service Pension Fund will continue to give a high priority to veterans issues in the future as well. Initiatives that can further improve information, consistency and service for this user group will be considered on an ongoing basis. Legal aid costs are paid for cases relating to the special compensation scheme. The Armed Forces' Veterans Administration also provides general legal advice on compensation and social security.

INITIATIVES

● INITIATIVE 103

NAV, the Norwegian Public Service Pension Fund and the Armed Forces will draw up procedures for coordinated specialist consultations. A comprehensive, consistent process between the Armed Forces and NAV/Norwegian Public Service Pension Fund will be established for handling compensation claims. As part of this initiative, possible solutions for shortening waiting times at relevant specialists will be looked at in consultation with the health service and the Norwegian Joint Medical Service.



The goal is to ensure *everyone* experiences accommodating, competent and comprehensive health service provision

The role of the health service

Both personnel who have served abroad and their families should feel confident that they will receive the follow-up they need. The civilian health service is responsible for providing services to this group on a par with the rest of the population.

The civilian health services and the Armed Forces bear an overlapping responsibility for following up personnel covered by the provisions of the Armed Forces Personnel Act and its rule concerning one year's follow-up by the Armed Forces. It is important that the health provision of the civilian health service and Armed Forces is coordinated.

The vast majority of personnel who have served abroad return home without physical injuries and in good mental health. However, personnel who have been subjected to immense stress during their service may experience stress disorders. Symptoms of stress most often develop at the same time as the stress is experienced, but can also appear later. Most people's reactions to stress gradually diminish and disappear after a short time. However, some people are affected for longer and can develop psychological disorders. The most common are post-traumatic stress disorder (PTSD) and depression. Personnel who are physically injured are at an increased risk of developing mental health problems. Service abroad also cause personnel's family members greater psychosocial stress and subsequent psychological problems.

The Government has strengthened its focus on mental health services through *the National Escalation Plan for Mental Health*. This has helped to improve competence and capacity, both in the specialist health service and in local authority health services. In the last part of the period covered by the plan the focus was particularly on violence and traumatic stress. However, the civilian health service has limited experience with people who have participated in international operations. Diagnosis can in particular entail difficult assessments in relation to cause.

The Norwegian Joint Medical Service (NOJMS) possesses cutting edge competence within catastrophe psychiatry and specialist knowledge about, and experience in, dealing with personnel who have been subjected to strong sense impressions and traumatic experiences, and will therefore offer psychological/psychiatric consultations and referrals to the civilian health service no matter how long has passed since a person served. This collaboration between NOJMS and the civilian health service will help to ensure important competence is shared, which in turn will ensure that the personnel's special needs are understood and addressed.

A central objective within mental health care throughout the entire escalation plan has been to decentralise treatment provision and to move the provision away from admission to outpatient follow-up. Therefore, the focus has been on strengthening local authority provision such as district psychiatric centres. The reason for this is that it is important for patients with psychological disorders to live as normal a life as



possible throughout the course of their treatment. Another goal of the new interaction reform is to ensure that patients receive good, professional provision as close to home as possible.

In many cases it will be family doctors who come into contact with the personnel covered by this action plan. Family doctors play a central role in discovering, for example, psychological disorders at an early stage and coordinating the medical follow-up. If required, family doctors can refer patients for consultations and treatment in the specialist health service. People who require long-term, coordinated health and/or social services are entitled to have a tailored plan drawn up. This can also apply to some veterans. Such a plan will help to ensure the various actors work together and that the care provided is comprehensive and coordinated.

The National Military Outpatient Clinic (NMP) is the point of contact for the Armed Forces' injured veterans. It is primarily tasked with ensuring the transfer of the patient from the Armed Forces to the civilian health service takes place in a proper manner from a professional medical perspective.

The Norwegian Directorate of Health is reviewing the links of the chain from when military personnel are injured in international operations up to when personnel return home for treatment, further examination and rehabilitation in the health service in Norway. The aim is to uncover possible weaknesses and suggest any improvements. The review is being carried out in partnership with relevant parts of the

Armed Forces and health service. The Norwegian Directorate of Health will also inform the health service about the field of veterans in various forums such as larger conferences that bring together wide-ranging groups from the various government departments and meetings with professional associations, etc.

Models for following up military personnel that will be useful for health personnel throughout the country will be tested in the Østerdalen pilot project.

Research into traumatic stress holds a special position with regard to understanding traumatic reactions during, immediately after, and sometime after a stressful incident/period. The Norwegian Centre for Violence and Traumatic Stress Studies (NKVTS) was established as an interministerial initiative in 2004. The centre plays an important role in generating and disseminating new knowledge about trauma-related topics, including the consequences of stress that follows from serving in international operations. Other parts of the centre's research activities will also be relevant for the area of veterans. An example of this is the extensive Tsunami research for which NKVTS has been responsible. A newer and very important research topic is resilience. In 2010, the centre was commissioned to establish a project on post-traumatic growth. In the long-term this project is expected to help improve our understanding of the factors that prevent traumatised and may contribute to faster rehabilitation after traumatic incidents. Work is also taking



Comprehensive personnel care must include follow-up and offers of help with family life challenges before, during and after operational service

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place on a number of training initiatives for the health service, see initiatives 117 onwards, page 68.

The goal is to ensure everyone experiences accommodating, competent and comprehensive health service provision. To achieve this health personnel must also possess the necessary knowledge about this group's particular situation and know the opportunities that exist with regard to advice, counselling and help with reports, as well as relevant training courses.

INITIATIVES

● INITIATIVE 104

The MHCS will, in collaboration with the MOD, ML, and MCESI, send a letter to all of the country's local authorities and regional health trusts containing information about the veterans' special situation, their opportunities for receiving advice, counselling, and training.

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The role of Bufetat

Bufetat responsibilities include the operation and administration of the country's family counselling agencies.

The Family Counselling Service is a state funded, low threshold service that specialises in family-related problems. Family counselling agencies are the natural place to turn to for help with family difficulties. The Family Counselling Service is the only part of the support system whose primary field is the family and whose speciality is couples counselling.

The service also forms the foundation of the help on offer to families with regard to problems related to living together and conflicts in relationships and families. The unique aspect of the service is that it is a free, public, low threshold service even though the offices are staffed with specialists who cover a range of disciplines. A doctor's referral is not required.

There are family counselling agencies in every county, with a total of 54 on a national scale.

Family counselling agencies offer treatment and counselling in situations where there are difficulties, disputes or crises in the family. The family counselling service also provides mediation in accordance with the Marriage Act and Children Act in the event of a separation or a legal dispute about parental responsibilities, time spent with a child, or with whom a child will live permanently.

Most family counselling agencies also offer courses and group activities relating to relevant family and relationship topics. The provision includes courses on relationships, groups for children and adults following the breakdown of a relationship, and when violence is a problem in the family. The Family Counselling Service provides information and training in the area of families and relationships. Relevant target groups include the general public, selected population groups, the media, nursery schools, schools and other professional groups. Family counselling agencies advise experts and work with those who work with families, childhood issues and relationship issues.

Personnel who are going on, are in, or have been on missions abroad may encounter various family-related challenges. Prior to deployment personnel and any partners and children will



have to prepare themselves for important changes to the family's structure and their day-to-day lives. The relationship between parents and other family members may also be affected. It is important that both the personnel and other family members are informed about common challenges that arise in such situations and where they can turn to for help and advice should they need it.

While the mission lasts, a partner or children and other family members may feel insecure and anxious about the personnel's safety. This is often heightened by media coverage, etc. Good contact with a partner and children ought to be ensured during deployment.

Challenges associated with re-establishing family life can also arise after returning home. We know that the divorce rate is higher, and breakdowns in relationships more common, among veterans than the average for the population. The help on offer with regard to resolving challenges arising from living together must be widely known about and easily accessible in order to protect stable and robust relationships.

These factors indicate that comprehensive veterans care must also include follow-up and offers of help with family life challenges before, during and after operational service.

INITIATIVES

● INITIATIVE 105

Bufetat will help to ensure that veterans and their families are properly followed up by providing information, both during the build up period and after personnel return home, about family and relationship challenges, and about the preventive initiatives and the help on offer.

● INITIATIVE 106

Bufetat will, via its family counselling agencies, offer advice to families and next of kin while a mission is ongoing, and to veterans and their families after personnel return home, with a view to coping with relationship and family-related challenges.

● INITIATIVE 107

Bufetat can offer relationship enrichment measures following agreement with the Armed Forces.

Pilot project: an intersectoral collaboration project for personnel in international operations

The Government has commenced the Østerdalen pilot project. The primary objective of the project is to ensure veterans and their families experience society's follow-up to be as coordinated, seamless and competent as possible. This is crucial in ensuring that society is able to take care of personnel in as good and deserving a manner as possible before, during and after serving. The project involves the municipalities of Elverum and Åmot, the county council and the state.

The Østerdalen pilot project shall develop and test models for:

- Cooperation between the Armed Forces and local authorities such that individual veterans are offered the health help they need, that this help is comprehensive and knowledge based, and that the right level of care is provided.
- Following up veterans' immediate family through cooperation agreements between the Armed Forces,



local authorities' support systems, and regional support systems such as family counselling agencies.

- A collaboration between the Armed Forces, local authorities and NAV aimed at providing tailored and adapted assistance and follow-up with the aim of finding work.

The project is based on three fields, which are followed up by the MHCS, MCESI and ML respectively. The Interministerial Working Group is the steering group for the project. The Armed Forces is represented in all subprojects and by a brigadier in the management group. The Armed Forces' role is to contribute relevant staff to the subgroups in the work groups.

One objective is to ensure that personnel who have served in international operations are provided with good, professional follow-up that can meet the individual's needs. To achieve this, all service providers must be familiar with the special problems these personnel and their immediate families can experience. Another objective is to ensure that all service providers are familiar with the external expertise they can draw on when helping veterans and/or their families.

The primary objective of the pilot project is to develop cooperation models that can be transferred to other local authorities/parts of the country. The lessons learned will also be useful when helping people other than the Armed Forces' veterans.

INITIATIVES

● INITIATIVE 108

The MOD, MHCS, ML, MCESI, Armed Forces, Bufetat, NAV and municipalities of Elverum and Åmot have together established a pilot project in Østerdalen. The goal is to develop good models for intersectoral cooperation that ensure the coordinated and effective follow-up of individual veterans. The project was established in January 2011 and will last for 2-3 years. It has been expanded in relation to the original ambitions in that it will now not only cover cooperation between the Armed Forces and family doctors, but also between Bufetat and NAV as well.

● INITIATIVE 109

NAV is establishing an expert group for veterans issues at NAV Elverum. The office will possess special competence in service areas that are of particular relevance to personnel who have served in international operations, and also play an information and advisory role with regard to the Armed Forces and other departments in NAV. It will also be tasked with drawing up good procedures (best practice) that can be transferred to other parts of the service.

● INITIATIVE 110

NKVTS will be asked to assist the Østerdalen pilot project by quality assuring and evaluating the health sector's role in the project from a professional perspective.

● INITIATIVE 111

Bufetat will help to ensure knowledge is shared between the various actors in the pilot project, and will offer training to family coordinators, new arrival coordinators and family liaisons on family and relationship challenges, with a special focus on the situation of children.



One objective is to ensure that personnel who have served in international operations are provided with good, professional follow-up that can meet the individual's needs

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● INITIATIVE 112

Hamar family counselling agency will participate in the necessary cooperation forums during the project period.

● INITIATIVE 113

The family counselling agency can help with information for personnel and their families during the build up period about relationship challenges, the help on offer and preventive measures.

● INITIATIVE 114

The family counselling agency can offer advice and counselling to families during the period of the mission, and, possibly in collaboration with the family/new arrival coordinator, assist with the planning or implementation of support groups, etc, including clarifying the expectations and challenges associated with returning home.

● INITIATIVE 115

The family counselling agency can offer advice and counselling after returning home to help re-establish family life and deal with the relationship challenges associated with deployment.

● INITIATIVE 116

The Interministerial Working Group for veterans issues will be maintained and act as the steering group for the Østerdalen pilot project.

Training is needed to achieve the goal of a competent support system

One of the Government's primary objectives is to ensure good training in the civilian support system. NOJMS possesses unique competence through its Office for Psychiatry and Mastering Stress which should be made use of.

Five regional resource centres for violence, traumatic stress and suicide prevention (RVTS centres) were established in the period 2006 to 2008 to help improve competence in the relevant fields in the various sections of the service. The resource centres are steered via an annual mission letter from the Norwegian Directorate of Health. The centres offer consultation, guidance and training for all sectors, and are an important tool for the implementation of new knowledge, national guidelines and instructions, etc. The mission letter for the RVTS centres in 2010 contained an expectation that the centres would develop knowledge about the area of veterans, and funds were allocated for this purpose.

A military psychiatry training package has been produced for doctors and psychologists by NOJMS and RVTS Øst in line with the Veterans Report. The aim is to ensure that this group is offered good, professional psychological health help, both in the local authorities and the specialist health service after returning home. The training package was piloted in October 2010 and will be implemented in all of the country's regions in a collaboration between NOJMS and RVTS. The package contains an introduction to the reality of military life, the particular challenges associated with this, and an introduction into relevant trauma treatment. The goal is for the specialist content to satisfy the criteria for the approval of specialisation



- A joint project has been established by the heads of department in the Armed Forces, NAV, Norwegian Public Service Pension Fund and Norwegian Directorate of Health concerning the follow-up of veterans.

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and maintaining specialisation courses for the relevant professions. In the mission documents for 2011, the regional health trusts were instructed to ensure the training is implemented.

RVTS Øst also runs an extensive training programme entitled 'More confident trauma therapists'. The programme has been implemented in four health trusts so far. RVTS Øst has also developed a special advanced module for the expert group which deals with strengthening the provision for UN/NATO veterans. NOJMS will be responsible for parts of this programme. The veterans perspective will be actively applied. The target group is primarily doctors and psychologists in the specialist health service. This will produce a network of specially competent doctors and psychologists in the eastern region of southern Norway.

The Norwegian Directorate of Health has also tasked all five RVTS centres with establishing partnerships with the regional mastering stress teams in the Armed Forces so they can share their competence and establish joint projects.

Another, important example of sharing competence and training is the joint project that has been established between the heads of department in the Armed Forces, NAV, Norwegian Public Service Pension Fund, and Norwegian Directorate of Health concerning the follow-up of veterans. This partnership will be developed further.

Research and surveys are required to develop the competence necessary to design the correct initiatives. A living conditions survey will provide greater insight into the personnel's health, financial and social situation. It would also be desirable to know more about who the veterans are and how their needs match the various sectors' provision. Therefore, the MOD, MOJ, ML and MHCS will commence a separate and independent living conditions survey in 2011, ref. initiative 73.

INITIATIVES

● INITIATIVE 117

The health service and Armed Forces will together produce a 'map' of existing services and responsibilities/role allocation between the Armed Forces and the civilian health service, and within the various services in the Armed Forces and civilian health service.

● INITIATIVE 118

The Armed Forces will, with the support of the health service, produce a military psychiatry guide.

● INITIATIVE 119

The Armed Forces have together with RVTS Øst developed a military psychiatry training package for doctors and psychologists. The training package will be implemented in all regions through a partnership between RVTS centres and the Armed Forces' regional mastering stress teams.



- A medically orderly visiting an Iraqi family.

● INITIATIVE 120

RVTS and NOJMS will work to ensure the training package is regarded as a qualifying course for doctors and psychologists.

● INITIATIVE 121

NKVTS will assist RVTS with the implementation of the military psychiatry training package for doctors and psychologists through professional follow-up following agreement with the Norwegian Directorate of Health.

● INITIATIVE 122

NAV has, in collaboration with RVTS Øst, designed specially tailored courses for the staff of NAV. The courses will be offered to the service's consulting doctors and key personnel in NAV's employment advice section. A two day conference was held in the spring of 2011. This will be followed up by a further two day conference in the autumn of 2011.

● INITIATIVE 123

The RVTS's mission letter for 2010 asked the regional centres to establish a partnership with the Norwegian Joint Medical Service, more specifically the mastering stress team in their region, on sharing competence and joint projects following agreement with the Norwegian Directorate of Health. The MHCS will, in collaboration with the MOD, encourage the introduction of placement schemes between the RVTS centres and the Armed Forces' mastering stress teams.

● INITIATIVE 124

NKVTS will assess the need for resources for future research concerning personnel who have served in international operations.

● INITIATIVE 125

NKVTS will be tasked with surveying a sample of veterans' experiences of their encounters with the health service (the initiative will be coordinated with the living conditions survey).

● INITIATIVE 126

The heads of department in the Armed Forces, NAV, Norwegian Public Service Pension Fund and Norwegian Directorate of Health will meet regularly to discuss issues linked to following up veterans. In the event of serious injury or death, a resource group will be established with members from the Armed Forces, Norwegian Public Service Pension Fund and NAV to look after the need for special follow-up of the injured individual and his or her family.

OVERVIEW OF THE INITIATIVES

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● INITIATIVE 1

The Armed Forces will, together with the MOD, review current memorials and consider a single memorial for personnel who have served in international operations.

Implementation: 2011

Responsibility: MOD

Ref. Report No. 34 (2008–2009):
to the Storting: Section 8.1

● INITIATIVE 2

The Armed Forces will open a permanent exhibition about personnel in international operations.

Implementation: 2011–2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 3

The Armed Forces will develop a comprehensive procedure for handling deaths in international operations.

Implementation: 2011

Responsibility: MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 4

The Armed Forces will afford substantial weight to service in international operations when assigning personnel to other posts.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 5

The MOD will continue to support the 'Support our Soldiers' campaign with a donation of NOK 150,000 in 2011.

Implementation: 2011

Responsibility: MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 6

Denmark has decided to award decorations awarded to those who are injured in combat to those who sustain psychological injuries as well. The Armed Forces will consider means of recognising those who have sustained psychological injuries, based in part on the Danish experience.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009):
to the Storting: Section 8.1

● INITIATIVE 7

The Armed Forces will draw up a communications plan to ensure all target groups learn about the services provided by the Armed Forces via the Armed Forces' Veterans Administration (FVA), the Armed Forces' Veterans Centre (FVS) and the Office for Psychiatry and Mastering Stress (KPS).

Implementation: 2011

Responsibility: MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 8

A clear mandate, authorised by international law and with clear and understandable rules concerning the use of military force, including the rules of engagement (ROE), shall be an absolute condition for Norwegian participation in international operations.

Implementation: 2011–2013

Responsibility: MFA, MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 9

Ownership of the terms legality and legitimacy, and their meaning with regard to the execution of a mission and taking care of individuals, shall be established through training programmes for the Armed Forces' leaders at all levels.

Implementation: 2012–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 10

The Armed Forces shall through the development of orders and planning processes ensure that the mandate and rules concerning the use of military force in international operations, including the ROE, are usable and understandable down to the lowest level. The Armed Forces' military lawyers shall assist with this process.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the
Storting: Section 8.1

● INITIATIVE 11

The Armed Forces shall further develop the 'Soldier Card' as a practical and usable legal guide for personnel in international operations.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 12

The Armed Forces base their planning for international operations with regard to dimensioning, duration and build up of capacities on capacity analyses of the relevant categories of personnel.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 13

The Armed Forces shall as far as possible tailor force contributions to international operations to the domestic defence structure.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 14

The Armed Forces shall study how further use of the reserve forces can help to increase recruitment and qualify more personnel for service abroad.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting; Section 8.1

● INITIATIVE 15

The Armed Forces shall establish a working group that will look at greater differentiation of the criteria stipulated for the various posts so that more personnel can qualify to serve in international operations. This review shall look at factors such as greater flexibility in medical classification.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting; Section 8.1

● INITIATIVE 16

The Armed Forces shall conduct an international comparative study of the requirements concerning the frequency of contributions and time spent at home.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting; Section 8.1

● INITIATIVE 17

The Armed Forces shall establish special procedures for those cases where one must depart from the principle that personnel should spend twice as long on rest and recuperation periods at home as on deployment in international operations.

Implementation: 2011

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting; Section 8.1

● INITIATIVE 18

The Armed Forces shall improve and implement comprehensive screening criteria for selection for service abroad, tailored to the relevant operation and category of personnel.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting; Section 8.1

● INITIATIVE 19

The Armed Forces shall develop and implement comprehensive screening criteria for analysing health-related psychological and physical development before, during and after serving.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting; Section 8.1

● INITIATIVE 20

The Armed Forces shall ensure personnel receive good information about the mission and their role in it, and ensure they receive continuous updates.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting; Section 8.1

● INITIATIVE 21

The Armed Forces shall ensure good training in the use of military force by updating the minimum requirements and stipulating requirements for practical training in the use of force for personnel who are being deployed in international operations.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting; Section 8.1

● INITIATIVE 22

The Armed Forces shall continuously quality assure the build up period and other preparatory courses to identify development opportunities. Mastering stress, media training, dilemma training, culture, attitudes, ethics and leadership shall be included in the preparations:

- The skills of commanding officers and leaders in relation to mastering stress, preventing psychological combat reactions, and managing potentially traumatic incidents at their level shall be improved.
- Competence in mastering stress and psychological combat reactions shall be improved, especially with regard to chaplains and medical personnel.
- Civilian personnel on shorter missions in the area of operations must be adequately prepared.
- Information must be developed continuously, including through sharing lessons that have been learned in follow-up programmes after returning home, ref. initiative 48. The sharing of such experience must also address deployed individuals.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting; Section 8.1

● INITIATIVE 23

The Armed Forces shall review, adapt and possibly expand training in mastering stress and psychological combat reactions.

Implementation: 2012–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting; Section 8.1

● INITIATIVE 24

The Armed Forces shall improve its competence in, and have clear routines and a system for, self-help, buddy and unit support, as well as specialist help in the area of operations including with regard to mastering stress.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 25

The Armed Forces will attempt to make all relevant types of materiel that will be used in international operations available to the unit responsible for organisation and equipment from day one.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 26

The Armed Forces will further develop the content of basic training with a view to the basic knowledge of personnel who are recruited to units that contribute to international operations.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 27

The Armed Forces will produce an information pack that provides information about the various services relating to rights, follow-up, support and activities for personnel before, during and after international operations. The organisations' roles will be explained.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 28

The Armed Forces will expand its offer of courses on relationships so that they are available before and after serving in international operations.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 29

The Armed Forces will evaluate earlier initiatives and draw up further initiatives aimed at children and young people. The MOD has supported the publication of a book for families with children.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 30

The Armed Forces will, in close consultation with NVIO, lay the groundwork for nationwide provision for families based on the model used in the buddy support scheme. The MOD is providing NVIO with NOK 108,000 in support for initiatives aimed at families on a local level in 2011.

Implementation: 2011

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 31

The Armed Forces will offer psychological/psychiatric follow-up for the families of the injured and fallen in the period immediately after the incident. An individual assessment will have to be made as to whether the health service or the Armed Forces will best be able to provide the services.

Implementation: 2011

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 32

The Armed Forces will together with the immediate family carry out an individual assessment of the need for follow-up after serious incidents with a view to time, scope and who needs help.

Implementation: 2011

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 33

The Armed Forces shall provide tailored information to families with an injured veteran in the family.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 34

Families and next of kin shall in connection with meetings organised by the Armed Forces receive information about the risk of psychological injuries and the importance of early follow-up and treatment.

Implementation: 2011

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 35

The Armed Forces shall review the family liaison scheme and routines to ensure sufficient capacity and competence that meets the needs and guidelines.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 36

The Armed Forces will hold family meetings in connection with the build up period and in connection with permanent demobilisation/ medal presentation ceremonies. The Armed Forces can pay families' travel and accommodation expenses. The aim is to ensure the future scheme covers all personnel who have been deployed in international operations, including those deployed individually.

Implementation: 2012
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 37

The Armed Forces will facilitate the arrangement of regional meetings for the spouses/partners and children of deployed personnel, and will establish a project pilot in relation to this.

Implementation: 2012
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 38

The Armed Forces will prioritise the family coordinators' role regionally and locally so that all families are properly cared for.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 39

The Armed Forces will further develop the current scheme with a joint training programme and the certification of all family coordinators.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 40

The Armed Forces will regularly send the families of deployed personnel information about the situation in the area of operations.

Implementation: 2011
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 41

The families of the seriously injured or fallen will, if necessary, be offered advice on handling the media.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 42

The Armed Forces will establish a contemporary and realistic, mobile information roadshow. The long-term aim is for this to tour nationwide to market the contributions made by veterans and the Armed Forces abroad.

Implementation: 2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 43

The Armed Forces shall further develop its work on attitudes, ethics and leadership specially related to service in international operations. The MOD is establishing an ethics committee.

Implementation: 2012
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 44

The Armed Forces shall introduce a commander support network by establishing a partner and mentor scheme for commanders in international operations.

Implementation: 2012–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.1

● INITIATIVE 45

The Armed Forces can via separate agreements offer personnel from other sectors in the same area of operations support from the Armed Forces mastering stress team.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 46

The agreement between the MOD and MHCS concerning supervising the Armed Forces' health services for Norwegian personnel deployed on military operations abroad will be evaluated.

Implementation: 2012
Responsibility: MOD, MHCS
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 47

The Armed Forces will offer psychological/psychiatric evaluation and referrals to the civilian health service regardless of how long has passed since someone's service ended.

Implementation: 2011
Responsibility: MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 48

The Armed Forces shall establish a programme for the active, personal, and tailored follow-up of the individual veteran during the first year after returning home. The programme is intended to prevent, survey and discover injuries, and clarify any need for support with returning to working life. This initiative must be seen in connection with other initiatives such as selection, build up, and mid-evaluations. Consideration must be given to the extent to which the one-year follow-up programme will become a mutually binding part of service. Concrete programme initiatives will include:

- Each individual shall, no later than upon their return to Norway, fill in a form designed to clarify individual follow-up needs.
- The Armed Forces shall further develop its pilot project in which contingents are shielded at stopovers before arriving in Norway in order to give them time to adjust from the norms, rules and behaviour that apply in the area of operations to those that apply at home. An arena for sharing experiences in a safe, relaxed environment without outside influences shall be created in which the Armed Forces' mastering stress team, and others, will participate.
- Upon arrival in Norway, veterans will be cleared through the AFA office, which will include a chat with a doctor. Representatives from NAV and Bufetat will be available to provide information and advice.
- 3–6 months after returning home the Armed Forces shall write to veterans, enclosing a standardised questionnaire, and provide information about the follow-up service and encourage them to get in touch if the need special follow-up or counselling. Special attention will be paid to those who do not respond to the contact.
- The Armed Forces shall aim to arrange reunions for veterans 9–12 months after they return home. NAV and Bufetat will be available with information and advice.
- The Armed Forces shall ensure comprehensive and long-term rehabilitation, counselling, and appropriate retraining and employment for personnel who return home with impaired functional abilities as a result of serving in international operations.
- The Armed Forces shall establish a system that during the first year after returning home ensures routine debriefings and experience transfer, with active, personal follow-up especially designed for commanders.
- In those cases where veterans have not been part of a larger contingent, the programme will be tailored to the veteran in order to ensure they are properly surveyed

and receive active, personal and tailored follow-up.

- Debriefing and experience transfer for personnel deployed individually, e.g. UN observers, shall be addressed in the follow-up programme. This entails the establishment of routines that enable any lessons learned to be incorporated into preparatory courses and exercises. Experience transfer shall encompass security factors, HSE and required knowledge about the organisation personnel are going to work in.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009)

to the Storting: Section 8.1

● INITIATIVE 49

The Armed Forces shall continue the work it has started on establishing good overviews of previous and current operations. The Armed Forces will establish a separate overview of all personnel who have served in international operations.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009)

to the Storting: Section 8.1

● INITIATIVE 50

The Armed Forces shall follow-up injured personnel during their treatment or rehabilitation after serving until both parties agree that the contact can be ended.

Implementation: 2011

Responsibility: MOD

Ref. Report No. 34 (2008–2009)

to the Storting: Section 8.1

● INITIATIVE 51

The Armed Forces will if necessary provide up to one year's temporary employment to personnel who are seriously injured as a result of serving.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009)

to the Storting: Section 8.1

● INITIATIVE 52

The Armed Forces shall ensure the necessary registration and reporting, and establish systems that can generate good quality data for health-related follow-up, documentation, preventive HSE, statistics, overviews and research.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009)

to the Storting: Section 8.1

● INITIATIVE 53

The Armed Forces shall ensure the good, reliable and relevant transfer of health information for use by the civilian health service. Any transfer of information assumes consent pursuant to the current legislation at any given time.

Implementation: 2012

Responsibility: MOD

Ref. Report No. 34 (2008–2009)

to the Storting: Section 8.2

● INITIATIVE 54

The Armed Forces will increase its openness about psychological stress injuries as part of its work on attitudes, ethics and leadership. This should contribute to increasing understanding, lowering the threshold for seeking help and reducing prejudice with the aim of being able to retain personnel in, and return them to, their posts.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009)

to the Storting: Section 8.1

● INITIATIVE 55

The Armed Forces is evaluating those parts of its organisation that carry out veterans-related tasks. The objective is to establish an efficient, competent system for taking care of both serving veterans and veterans who have ended their employee relationship with the Armed Forces. The system must be flexible enough to cope with extraordinary needs, e.g. when seriously injured personnel return home. The

organisation must lie high up in the Armed Forces' structure, have good access to those in charge of the Armed Forces, and be led by a high ranking person. Veterans who seek help must have a single point of contact, which will then guide onwards them as needed.

Implementation: 2011
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 56

The Armed Forces shall prepare a special proof of competence after serving in international operations. This proof of competence could, for example, increase an individual's opportunities when transitioning to the civilian job market.

Implementation: 2012
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 57

The Government will further develop an internet portal that encompasses all the services and care society offers to personnel in international operations. The Armed Forces will consider developing platforms that enable veterans, families and society as a whole to communicate with the Armed Forces.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 58

The Armed Forces will further develop the social media skills of its press and media personnel who are deployed with units. The Armed Forces have initiated a project aimed at better utilising social media as a dialogue-based communications arena for the Armed Forces and the general public.

Implementation: 2012
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 59

The Armed Forces will in collaboration with one or more organisations examine opportunities for involving business with regard to specific framework agreements concerning the employment of veterans.

Implementation: 2012
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 60

The MOD will establish an appeals board for the special compensation scheme and evaluate it after two years.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 61

The Government is working on developing the special compensation scheme.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 62

The MOD shall, in collaboration with the Armed Forces, arrange annual veterans conferences.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 63

The MOD shall hold quarterly meetings with the organisations on issues relating to personnel before, during and after serving in international operations, in addition to the organisation and activities associated with this. These meetings will particularly focus on continued follow-up, evaluation and further developing the action plan.

Implementation: 2011–2013
Responsibility: MOD

Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 64

The veterans organisations will be invited to participate with one representative in the MOD's programme committee when it comes to research concerning service in international operations.

Implementation: 2011
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 65

The MOD will, in collaboration with the Armed Forces and the organisations, offer training for individuals and leaders in the organisations and the Armed Forces within contracts and legislation, and routines for knowledge enhancement and a common understanding of this field.

Implementation: 2012
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 66

The Armed Forces shall, in collaboration with NVIO, further develop the system of local monthly veterans meetings. The existing scheme covers 46 meeting places. The Armed Forces will support initiatives that provide further opportunities for veterans to meet on a regular basis as is currently done with the established buddy support system.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 67

The MOD will provide financial support for initiatives that help to continue and develop information work for improving competence in, and understanding of, the injured veterans' situations in the civilian support system and in society in

general. In 2011, the MOD has provided financial support amounting to NOK 300,000 to the veterans association SIOPS for its 'All the way home' project.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 68

The Armed Forces shall, in consultation with the employee organisations, examine how the service's occupational health service can better contribute to active processes relating to reports affirming personnel are no longer ill. Furthermore, consideration shall be given to whether or not the Armed Forces can better ensure adaptation and activation for people whose service has resulted in permanently or temporarily reduced capacity.

Implementation: 2012
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 69

Current research in the MOD's programme area for veterans:

- The MOD will allocate NOK 700,000 in 2011 to continuing the follow-up study by NOJMS.
- The Armed Forces will implement a project aimed at improving metMHCSs and the selection and screening system.
- The Armed Forces will conduct a forward looking study that will follow soldiers over time: from insertion, selection and before, during and after serving in international operations (prospective study).
- Research into working environments, mastering and occupational health among veterans.
- Research into work and the family.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 70

The MOD will further develop a knowledge base based on existing research.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 71

The Armed Forces' health register shall play a central role in R&D linked to veterans:

- The Armed Forces have procured and introduced a new technical solution for its health register which ensures better functionality.
- The Armed Forces have inspected the quality of the health register to come up with initiatives for data quality and resources aimed at maintaining a good overview of its personnel's health status.
- The Armed Forces' health register will improve the scope and quality of relevant data via specific partnership contracts with other national health registers.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 72

The Armed Forces will follow-up the report on Gulf veterans.

Implementation: 2011
Responsibility: MOD
Ref. Report No. 34 (2008–2009): Pkt. 8.1

● INITIATIVE 73

The MOD, MOJ, MHCS and ML will conduct a joint living conditions survey to gain an overview of the life situations of veterans and others deployed abroad for further follow-up. The results of this survey will also provide parameters for future research and information that could provide a basis for more interministerial initiatives.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.1

● INITIATIVE 74

The Government will, through NORDEFCO, consider collaboration on veterans research and taking care of personnel before, during and after serving in international operations, with a particular focus on the returning home phase.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.3

● INITIATIVE 75

The MOD will take the initiative and bring up stress issues in the Nordic Defence Cooperation.

Implementation: 2011
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.3

● INITIATIVE 76

NORDEFCO is planning to hold a Nordic veterans conference in 2012.

Implementation: 2012
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.3

● INITIATIVE 77

The Armed Forces will continuously assess international cooperation projects and contractual collaboration with allied countries with regard to the recruitment of military medical specialists.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.3

● INITIATIVE 78

The MOD and Armed Forces will further develop the dialogue on veterans issues with relevant partner countries.

Implementation: 2011–2013
Responsibility: MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.3

● INITIATIVE 79

The Government will through NORDEFECO emphasise greater cooperation with Estonia, Latvia and Lithuania in the area of veterans.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.3

● INITIATIVE 80

The Government will, in line with the declaration from the NATO meeting in Lisbon in 2010, help to ensure that veterans issues are put on NATO's agenda and follow-up the Danish initiative by helping to ensure NATO becomes more fundamentally involved in the area of veterans.

Implementation: 2011–2013

Responsibility: MOD

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.3

● INITIATIVE 81

The MFA will introduce an assessment tool for use in the selection of personnel in collaboration with the Armed Forces, and involve specialist expertise in its recruitment process.

Implementation: 2011

Responsibility: MFA

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 82

The MFA will introduce mandatory mental and physical health checks for the most exposed stations, before, during and after serving, including debriefings. Those accompanying staff abroad will also be offered these.

Implementation: 2011

Responsibility: MFA

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 83

The MFA will further develop the training in team building linked to service at especially exposed stations.

Implementation: 2011–2013

Responsibility: MFA

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 84

The MFA will inform families that stay at home of the conditions associated with serving, including their rights.

Implementation: 2011–2013

Responsibility: MFA

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 85

The MFA will reinforce the colleague support function. The colleagues support function will play a role in critical incidents and in the event of serious stress. All embassies have at least one trained colleague support person.

Implementation: 2011

Responsibility: MFA

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 86

The MFA will arrange mastering stress seminars for personnel at the stations during service and after critical incidents.

Implementation: 2011

Responsibility: MFA

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 87

The MFA will consider how recognition of the conclusion of service at the most exposed stations can best be marked.

Implementation: 2011–2013

Responsibility: MFA

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 88

The MFA will reinforce its work on events that are currently arranged for the children of staff who have just returned home from serving abroad.

Implementation: 2011

Responsibility: MFA

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 89

The DSB shall improve the current scheme for medically preparing personnel (vaccines, health checks, etc) through a collaboration with other agencies that deploy personnel abroad.

Implementation: 2011–2013

Responsibility: MOJ

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 90

The DSB shall improve the current scheme for the procurement of medicines and medical equipment through a collaboration with other agencies that deploy personnel abroad.

Implementation: 2011–2013

Responsibility: MOJ

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 91

The DSB shall improve the current scheme for debriefing personnel after returning home and follow-up medical checks, including following up over time, through a collaboration with other agencies that deploy personnel abroad.

Implementation: 2011–2013

Responsibility: MOJ

Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 92

The DSB will review the routines for catching individual needs over time since the personnel come from a number of different public and private organisations.

Implementation: 2012
Responsibility: MOJ
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 93

The DSB shall draw up routines that enable individuals to handle media contact, e.g. through a short media management course before or after a mission.

Implementation: 2012
Responsibility: MOJ
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 94

The MOJ shall consider improvement initiatives for the Norwegian Rule of Law Pool linked to preparatory schemes at home and in mission locations.

Implementation: 2012
Responsibility: MOJ
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 95

The MOJ shall draw up routines for the Norwegian Rule of Law Pool that enable individuals to handle media contact.

Implementation: 2012
Responsibility: MOJ
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 96

The National Police Directorate will facilitate an increase in the proportion of women in Norwegian contingents.

Implementation: 2012
Responsibility: MOJ
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 97

The National Police Directorate will make better arrangements for returning personnel with regard to the utilisation of their competence in their wider careers in the police district.

Implementation: 2011–2013
Responsibility: MOJ
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 98

The National Police Directorate will develop the leadership skills of experienced personnel for future managerial positions in international operations.

Implementation: 2011–2013
Responsibility: MOJ
Ref. Report No. 34 (2008–2009): Pkt. 8.2

● INITIATIVE 99

Interministerial agreements concerning increased cooperation on training deployed personnel, as well as contingency plans for handling incidents in conflict and crises affected areas will be developed further. This type of agreement was signed in 2010 between the MOD and MFA.

Implementation: 2011–2013
Responsibility: MFA, MOJ, MOD
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 100

NAV has in collaboration with RVTS Øst designed a course for the staff of NAV's employment advice section and NAV's consulting chief physicians. The course is based on a training package developed by RVTS Øst. The intention is to create continuity in the transfer of competence from RVTS centres to NAV.

Implementation: 2011–2013
Responsibility: ML, MHCS
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 101

NAV will facilitate collaboration that enables NAV to draw on RVTS's expertise in its day-to-day work with individual users. This includes making external and internal competence in the field known in the service.

Implementation: 2011–2013
Responsibility: ML, MHCS
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 102

NAV has met with veterans organisations and will continue this dialogue as needed.

Implementation: 2011–2013
Responsibility: ML
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 103

NAV, the Norwegian Public Service Pension Fund and the Armed Forces will draw up procedures for coordinated specialist consultations. A comprehensive, consistent process between the Armed Forces and NAV/ Norwegian Public Service Pension Fund will be established for handling compensation claims. As part of this initiative, possible solutions for shortening waiting times at relevant specialists will be looked at in consultation with the health service and the Norwegian Joint Medical Service.

Implementation: 2011–2013
Responsibility: ML
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 104

The MHCS will, in collaboration with the MOD, ML, and MCESI, send a letter to all of the country's local authorities and regional health trusts containing information about the veterans' special situation, their opportunities for receiving advice, counselling, and training.

Implementation: 2011
Responsibility: MHCS
Ref. Report No. 34 (2008–2009)
to the Storting: Section 8.2

● INITIATIVE 105

Bufetat will help to ensure that veterans and their families are properly followed up by providing information, both during the build up period and after personnel return home, about family and relationship challenges, and about the preventive initiatives and the help on offer.

Implementation: 2011–2013
Responsibility: MCESI
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 106

Bufetat will, via its family welfare centres, offer advice to families and next of kin while a mission is ongoing, and to veterans and their families after personnel return home, with a view to coping with relationship and family-related challenges.

Implementation: 2011–2013
Responsibility: MCESI
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 107

Bufetat can offer relationship enrichment measures following agreement with the Armed Forces.

Implementation: 2011–2013
Responsibility: MCESI
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 108

The MOD, MHCS, ML, MCESI, Armed Forces, Bufetat, NAV and municipalities of Elverum and Åmot have together established a pilot project in Østerdalen. The goal is to develop good models for intersectoral cooperation that ensure the coordinated and effective follow-up of individual veterans. The project was established in January 2011 and will last for 2–3 years. It has been expanded in relation to the original ambitions in that it will now not only cover cooperation between the Armed Forces and family doctors, but also between Bufetat and NAV as well.

Implementation: 2011–2013
Responsibility: MOD, ML, MHCS, MCESI
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 109

NAV is establishing an expert group for veterans issues at NAV Elverum. The office will possess special competence in service areas that are of particular relevance to personnel who have served in international operations, and also play an information and advisory role with regard to the Armed Forces and other departments in NAV. It will also be tasked with drawing up good procedures (best practice) that can be transferred to other parts of the service.

Implementation: 2011–2013
Responsibility: ML
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 110

NKVTS will be asked to assist the Østerdalen pilot project by quality assuring and evaluating the health sector's role in the project from a professional perspective.

Implementation: 2011–2013
Responsibility: MHCS
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 111

Bufetat will help to ensure knowledge is shared between the various actors in the pilot project, and will offer training to family coordinators, new arrival coordinators and family liaisons on family and relationship challenges, with a special focus on the situation of children.

Implementation: 2011–2013
Responsibility: MCESI
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 112

Hamar family welfare centre will participate in the necessary cooperation forums during the project period.

Implementation: 2011–2013
Responsibility: MCESI
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 113

The family welfare centre can help with information for personnel and their families during the build up period about relationship challenges, the help on offer and preventive measures.

Implementation: 2011–2013
Responsibility: MCESI
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 114

The family welfare centre can offer advice and counselling to families during the period of the mission, and, possibly in collaboration with the family/new arrival coordinator, assist with the planning or implementation of support groups, etc, including clarifying the expectations and challenges associated with returning home.

Implementation: 2011–2013
Responsibility: MCESI
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 115

The family welfare centre can offer advice and counselling after returning home to help re-establish family life and deal with the relationship challenges associated with deployment.

Implementation: 2011–2013
Responsibility: MCESI
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 116

The Interministerial Working Group for veterans issues will be maintained and act as the steering group for the Østerdalen pilot project.

Implementation: 2011–2013
Responsibility: MOD, MHCS, ML, MCES, UD, MOJ
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 117

The health service and Armed Forces will together produce a 'map' of existing services and responsibilities/role allocation between the Armed Forces and the civilian health service, and within the various services in the Armed Forces and civilian health service.

Implementation: 2011
Responsibility: MHCS, MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 118

The Armed Forces will, with the support of the health service, produce a military psychiatry guide.

Implementation: 2012–2013
Responsibility: MHCS, MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 119

The Armed Forces have together with RVTS Øst developed a military psychiatry training package for doctors and psychologists. The training package will be implemented in all regions through a partnership between RVTS centres and the Armed Forces' regional mastering stress teams.

Implementation: 2011–2012
Responsibility: MHCS
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 120

RVTS and NOJMS will work to ensure the training package is regarded as a qualifying course for doctors and psychologists.

Implementation: 2011–2012
Responsibility: MHCS, MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 121

NKVTS will assist RVTS with the implementation of the military psychiatry training package for doctors and psychologists through professional follow-up following agreement with the Norwegian Directorate of Health.

Implementation: 2011–2012
Responsibility: MHCS
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 122

NAV has, in collaboration with RVTS Øst, designed specially tailored courses for the staff of NAV. The courses will be offered to the service's consulting doctors and key personnel in NAV's employment advice section. A two day conference was held in the spring of 2011. This will be followed up by a further two day conference in the autumn of 2011.

Implementation: 2011–2013
Responsibility: ML, MHCS
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 123

The RVTS's mission letter for 2010 asked the regional centres to establish a partnership with the Norwegian Joint Medical Service, more specifically the mastering stress team in their region, on sharing competence and joint projects following agreement with the Norwegian Directorate of Health. The MHCS will, in collaboration with the MOD, encourage the introduction of placement schemes between the RVTS centres and the Armed Forces' mastering stress teams.

Implementation: 2011–2013
Responsibility: MHCS, MOD
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 124

NKVTS will assess the need for resources for future research concerning personnel who have served in international operations.

Implementation: 2011–2013
Responsibility: MHCS
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 125

NKVTS will be tasked with surveying a sample of veterans' experiences of their encounters with the health service (the initiative will be coordinated with the living conditions survey).

Implementation: 2012
Responsibility: MHCS
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

● INITIATIVE 126

The heads of department in the Armed Forces, NAV, Norwegian Public Service Pension Fund and Norwegian Directorate of Health will meet regularly to discuss issues linked to following up veterans. In the event of serious injury or death, a resource group will be established with members from the Armed Forces, Norwegian Public Service Pension Fund and NAV to look after the need for special follow-up of the injured individual and his or her family.

Implementation: 2011–2013
Responsibility: MOD, ML, MHCS
Ref. Report No. 34 (2008–2009) to the Storting: Section 8.2

IMPLEMENTATION AND FOLLOW-UP

Individual sectors are responsible for implementing the initiatives in this action plan within their respective areas. The Interministerial Working Group will also continue its work. This will include the group evaluating the action plan and acting as the reference group for the Østerdalen pilot project



PHOTOS

- Pages 9 and 44: Jan Aarvold • Page 45: Marta Birgitte Haga • Page 47: Bjørn Klouman Bekken
- Page 48: Svein Wærenskjold • Page 50: Dag Roger Dahlen • Page 51: Arvid Utkvitne
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