

NOU 2026: 2 Policy for new generations

Causes, consequences and measures related to low birth rates

English summary of the final report from the Birth rate Committee

The Birth rate committee was appointed by Royal Decree on 9 August 2024. The committee has examined the causes of the decline in birth rates over the past 15 years and outlines the consequences of low birth rates for society and for individuals. On this basis, the committee has assessed and proposes measures that may increase birth rates.

Key messages

The decline in birth rates in Norway over the past 15 years has been particularly pronounced among young adults in their twenties. The average age at first birth has increased from 28 to 30 for women and from 31 to 32 for men. Survey evidence suggests that the age at which most people would *like* to have their first child is significantly lower than this. An increasing share also end up having fewer children than they originally desired.

The committee highlights five societal developments that have contributed to falling birth rates:

1. **Socioeconomic marginalisation:** Individuals with low levels of education, poor health, low income, and weak attachment to the labour market are increasingly likely to remain childless.
2. **Delayed family formation:** Young adults spend more time completing their education, gaining a foothold in the labour market, establishing stable relationships, and securing family-friendly housing, and therefore have children later. At the same time, more effective contraception results in fewer unplanned pregnancies.
3. **Norms and competing life projects:** Changing norms and priorities among young couples—combined with a perception of increasing demands associated with parenting—may contribute to couples postponing childbearing and having fewer children.

4. **Time constraints among parents of young children:** The combination of paid work and time-intensive parenting leaves little time to spare, which may lead more people to delay parenthood and to opt for smaller families.
5. **A vulnerable start for new parents:** Higher ages at childbirth, a growing prevalence of physical and mental health problems among those giving birth, and increased strain on the health-care services can lead to negative experiences during pregnancy and delivery. This may give new families a more difficult start and reduce the desire to have additional children.

An individual's decision to have children has consequences for society as a whole: Very low birth rates and large fluctuations in cohort sizes can have a range of negative effects. In the short term—within the span of a single demographic generation—fewer children imply lower public expenditure, as fewer will attend childcare and school. However, small cohorts reduce the basis for services offered to children and young people, which may lead to fewer options for extracurricular activities and educational opportunities in local communities. At the same time, population ageing generates strong and lasting growth in the demand for health and care services. Together, these developments place municipalities and other public institutions under significant pressure to adapt. Institutions must shift from supporting families with children to caring for older people, which may result in today's institutional support for families becoming more fragmented. To avoid these negative consequences, it can be justified to facilitate childbearing for those who wish to have children. For society as a whole, and when assessed over a long time horizon, there may be substantial benefits from policies that support the formation of new generations and thereby stable cohort sizes. The committee considers it an important objective of Norwegian family policy that people are able to realise their childbearing intentions.

Having children is a choice that affects all aspects of life. Institutional support for (prospective) parents therefore spans many policy areas. The committee's main proposals are as follows:

- 1. Reducing social and economic exclusion** by preventing health problems, supporting completion of upper secondary education, and promoting inclusion in the labour market can help lower childlessness, particularly among men.
- 2. A faster transition into adulthood** makes it easier to have children at a younger age. Possible measures include a smoother transition between compulsory military

service and education, and making vocational education more attractive and accessible. Shortening the compulsory school pathway could also contribute in the same direction.

3. Increased financial support for parents under the age of 30 would make it easier for those who wish to have children early to do so (eleven of twelve committee members propose this).

4. Improving the housing market for families with children by increasing housing supply and considering measures to curb housing price growth, such as taxation of homeownership. Earlier entry into the housing market makes it easier to have children earlier in life. Rapid growth in housing prices relative to incomes may, over time, become a barrier for individuals with low incomes who do not receive financial assistance from their parents when purchasing a home.

5. Improved health services for future and new parents can support a smoother transition into parenthood and strengthen the desire to have additional children. Knowledge about fecundity (the ability to conceive) may contribute to a lower age at first birth, and for some, assisted reproduction is a prerequisite for having children.

6. An efficient and flexible transition from parental benefit to the start of kindergarten can both reduce the number of unwanted unpaid leave periods and provide more family time during the toddler years for those who want it. The committee proposes that all children be offered a kindergarten place from the age of one, while also allowing parents up to 70 weeks of parental benefits at 70 percent compensation.

7. A better balance between working time and family time among parents with young children may make it easier to have more than two children. Eleven of twelve committee members propose a trial scheme with reduced working hours for parents of young children. The committee as a whole proposes the following concrete measures: reviewing the parental leave regulations and improving information about parents' rights in working life, strengthening activity programmes in after-school programmes (SFO), and assessing the possibility of providing practical help in the home.

Chapter 1 – introduction

Over the past 15 years, birth rates have declined substantially in many parts of the world. If this trend continues, it will have major implications for the size and composition of the population. Population change occurs slowly, but it reshapes society. In the short term—within the span of a demographic generation—fewer children mean reduced public expenditure, as fewer will attend childcare and school. However, small cohorts also weaken the foundation for services aimed at children and young people, potentially resulting in fewer options for extracurricular activities and educational programmes in local communities. At the same time, population ageing leads to strong and persistent growth in the need for health and care services. Taken together, these developments place municipalities and other public institutions under significant pressure to adapt. Institutions must shift from supporting families with children to caring for older people, which may cause today's support for families to become more fragmented.

When today's young children reach adulthood, the current decline in birth rates will result in fewer and older people in employment and a smaller population. This will further reinforce the shift in institutional support towards older rather than younger people. An ageing and shrinking population may also weaken productivity and innovation, although this can be counteracted by investments in skills and technology.

An individual's decision to have children has consequences for society as a whole: very low birth rates and large fluctuations in cohort sizes can have a range of negative effects. To avoid these consequences, it can be justified to make it easier for those who wish to have children to do so. For society as a whole, and when assessed over a long time horizon, there may be substantial benefits from policies that support the formation of new generations.

Survey evidence shows that a large majority of young men and women in Norway want children of their own. Parents spend considerable time with their children and view parenting as a source of meaning. For couples and women who do not succeed with assisted reproduction, not having children can be a profound sorrow that they live with for a long time. We discuss the consequences of low birth rates in more detail in Part III.

The decline in birth rates in Norway over the past 15 years has been particularly pronounced among young adults in their twenties. The average age at first birth has increased from 28 to 30 for women and from 31 to 32 for men. Survey evidence indicates that the age at which most people would like to have their first child is considerably lower than this. An increasing share also end up having fewer children than

they originally intended. Cohort fertility—measured as completed fertility at age 45—has so far declined less, but there has been a clear drop in the proportion having more than two children. We do not yet know how many children today's 29-year-olds will eventually have, but several factors suggest that the sharp fall in fertility rates among people in their twenties reflects not only postponed childbearing but is also likely to result in fewer children over the life course.

Over the past 30 years, there have been substantial developments in policies targeting families with children, especially in the first part of the period. Norway and the other Nordic countries are among the OECD members that allocate the most public resources to family benefits. The Nordic model is characterised by strong institutional support for families with children, particularly through parental benefits and universal access to early childhood education and care. Together with statutory rights related to parental leave and caregiving, these arrangements enable both mothers and fathers to participate in paid work and in caregiving. In the Nordic countries, fathers have also devoted increasing amounts of time to caregiving. The fact that many people choose to have children has traditionally been seen as a sign of a secure and stable society. Over the past 15 years, however, fertility has fallen sharply across the Nordic region, and Norway's current total fertility rate is 1.44. Whether the decline would have been even larger without this institutional support is unknown.

The rapid decline nevertheless provides clear grounds for reviewing whether the current institutional support for families with children is sufficient, and whether it is organised appropriately. We examine the design and effects of family policy in more detail in Part IV.

Causes of the decline in birth rates

The committee has undertaken a comprehensive assessment of the causes of the decline in birth rates in Norway in Part II. The main reasons for the decline are summarised in Chapter 4. The committee finds that individual life choices and preferences play a role—particularly through competing life projects that contribute to postponing plans and desires for children. At the same time, major societal changes have altered the conditions under which individuals make decisions about having children.

The fall in the total fertility rate is primarily driven by young adults in their twenties having significantly fewer children—and, to some extent, by a decline in third births. Most young people today still envision a life with children, and most report an ideal age at first birth that is lower than today's average age at first birth. At the same time,

concrete plans for having children have increasingly been deferred to a later stage of life. Parents want stable circumstances to ensure good living conditions for their children, and they devote substantial resources to their children once they have them.

There are many factors that young adults believe should be in place before they wish to have children: completing education, a stable relationship, secure employment, and financial stability, including suitable housing. Higher expectations—both individually and societally—regarding what should be in place before becoming a parent, combined with changing opportunities to achieve these conditions, contribute to young adults postponing parenthood. Longer periods spent in education, a labour market and family policy that encourage establishing a solid foothold at work before having children, and housing prices that have grown faster than incomes all pull more people towards delaying the transition to parenthood. Young adults enter relationships somewhat later, and relationships are less stable. At the same time, increased use of long-acting contraception means that having a child has become an increasingly planned event.

At the same time, opportunities for leisure activities have expanded and become relatively cheaper. For young couples, life without children now offers more possibilities, while life with children involves higher demands. One response to this may be having children later. This creates an early phase of adulthood devoted to leisure and career. The vast majority of young adults still expect this phase to be followed by a new life stage as parents, where raising children provides both meaning and requires time.

Family policy has made it easier to combine full-time employment with family life. At the same time, parents are spending increasing amounts of active time with their children. The total workload of families with young children—combining paid and unpaid work—has therefore grown over time, and many experience a persistent time squeeze. The fact that parents spend more time following up each child may contribute to more families stopping at two children. Survey evidence shows that many cite lack of energy and the need to take care of the children they already have as important reasons for not having more children. Families in which the mother works part-time are somewhat more likely to have a third child, but this pattern is less common than it used to be.

The ability to have children gradually declines with age, increasing the risk of not succeeding in having children. For those who wish to have more children, having the first child late can make it more difficult to have additional children later. Late parenthood is also associated with more complicated pregnancies and births. Pregnancy, childbirth, and the postpartum period are formative phases for the woman, the child, and the new family. The physical strain of pregnancy and childbirth is cited in surveys as an important reason for not having more children. Negative experiences and

a lack of support before, during, and after birth can contribute to some having fewer children than they otherwise would have.

For some groups, establishing a family has become particularly challenging. A growing share of young people experience mental health problems. The Norwegian labour market has high requirements for skills and productivity, and individuals with low education combined with mental health challenges find it more difficult to achieve stable attachment to the labour market. People outside the labour market have fewer children and are more likely to remain childless, and the decline in birth rates has been strongest among men and women without higher education and among those with lower incomes. Exclusion from working life is increasingly linked to exclusion from family life. There has been a marked increase in childlessness among men and women with only compulsory education, especially compared with women with higher education.

The committee highlights five societal developments that have contributed to falling birth rates:

1. Socioeconomic marginalisation: Individuals with low levels of education, poor health, low income, and weak attachment to the labour market are increasingly likely to remain childless.

2. Delayed family formation: Young adults spend more time completing their education, gaining a foothold in the labour market, establishing stable relationships, and securing family-friendly housing, and therefore have children later. At the same time, more effective contraception results in fewer unplanned pregnancies.

3. Norms and competing life projects: Changing norms and priorities among young couples, combined with a perception of increasing demands associated with parenting, may contribute to couples postponing childbearing and having fewer children.

4. Time squeeze among parents of young children: The combination of paid work and time-intensive parenting leaves little time to spare, which may lead more people to delay parenthood and to opt for smaller families.

5. A vulnerable start for new parents: Higher ages at childbirth, a growing prevalence of physical and mental health problems among those giving birth, and increased strain on the health-care services can lead to negative experiences during pregnancy and childbirth. This may give new families a more difficult start and reduce the desire to have additional children.

The committee does not put forward proposals aimed at directly influencing individual life choices or priorities. However, the committee notes that better structural conditions

for family formation may help shape preferences and choices—particularly among those who already wish to have children. When societal and institutional changes influence birth rates, this largely occurs through an interaction with individual preferences. For example, today's parents are more likely than ever before to combine full-time employment with time-intensive parenting. Institutional changes can help make this combination easier, enabling more of those who initially wished to do so to have a third child. This understanding of the interaction between structural factors and individual choices has been an important foundation for the committee's policy recommendations.

The committee's mandate and composition

The committee's interpretation and delimitation of the mandate

The purpose of the committee is to assess the causes of the decline in birth rates over the past 15 years, outline the consequences of low birth rates for society and for individuals, and consider measures that may increase birth rates.

The committee does not consider measures that would restrict reproductive freedom, such as limiting access to contraception or abortion. The committee interprets this delimitation as consistent with the mandate's emphasis on facilitating "that individuals may have the children they desire." Changes in reproductive health, contraception, and abortion are nonetheless discussed as possible explanations for the decline in birth rates.

The mandate highlights that being able to have as many children as one wishes is positive for individuals, while childbearing also has benefits for society as a whole. The committee is asked to assess measures that may increase birth rates. The committee interprets this as meaning that such measures should enable those who wish to have children to do so. Demographer Trude Lappégård, drawing on Tage Erlander, describes this policy approach as creating the conditions for choice: "[...] to build a dance floor that people can dance on, so that each individual may dance their life as they wish."¹ Facilitating childbearing also means that the desire for children—rather than an economic incentive—should be the main driver behind decisions to have children. It is therefore important, as a matter of principle and not only economics, that total support

¹ Lappégård, T. (2007). Sosiologiske forklaringer på fruktbarhetsendring i Norge i nyere tid. *Sosiologisk tidsskrift*, 15(1), 55–71. <https://doi.org/10.18261/ISSN1504-2928-2007-01-03>

to (prospective) parents does not exceed the overall cost of raising children. At the same time, it is desirable that the proposed measures reinforce other policy goals (synergies) rather than work against them (trade-offs).

The Committee on Birth Rates further takes as a premise that policies intended to increase birth rates must also ensure good conditions for children's upbringing. The mandate describes this as the state "supporting parents so that they can care for their children in a good way." It is therefore essential that measures and policies targeting families promote good health for children and their parents.

Composition of the committee

The committee consisted of the following members:

- **Rannveig Kaldager Hart (Chair)**, Associate Professor and Senior Researcher, Bærum
- **Sara Cools**, Senior Researcher I, Oslo
- **Heidi Tiller**, Chief Physician and Professor, Tromsø
- **Sylo Taraku**, Adviser, Drammen
- **Vegard Fykse Skirbekk**, Professor and Research Director, Oslo
- **Kristoffer Chelsom Vogt**, Professor and Vice-Rector, Bergen
- **Kari Løvendahl Mogstad**, Physician and Author, Trondheim
- **Katrine Vellesen Løken**, Professor and Pro-Rector, Bergen
- **Alexander Berg Erichsen**, Economist at the Norwegian Union of Municipal and General Employees (Fagforbundet) and University College Lecturer, Eidskog
- **Victoria Sparrman**, PhD, Economist at the Confederation of Norwegian Enterprise (NHO), Oslo
- **Erlend Sæther**, Student, Alstahaug
- **Maiken Køien Andersen**, Student Representative, Engerdal.

The committee's assessment of the objectives of family policy

The committee was tasked with describing how the measures discussed and proposed align with other objectives of family policy. The committee considers that Norwegian family policy should aim to enable people to realise their desires to have children. In addition, the committee has formulated five further objectives, based on previous documents and practices as well as its own assessments. Together, the committee

proposes six objectives for Norwegian family policy, with the aim of contributing to and supporting:

- good conditions for children's upbringing
- an acceptable distribution of economic resources
- parents' labour supply
- good health among parents and children
- gender equality
- that individuals are able to realise their desires to have children

Given the significant decline in birth rates and the potential negative consequences at both the individual and societal levels, the committee considers that the objective of enabling individuals to realise their childbearing desires should be given somewhat greater weight. Overall, the committee considers that a good direction for family policy going forward is not to carve out isolated measures solely aimed at facilitating childbearing, but rather to integrate this as one of several guiding objectives when reforms are made to Norwegian family policy.

The committee's main proposals

Having children is a choice that affects all aspects of life. Institutional support for (prospective) parents therefore spans many policy areas. Facilitating young adults' completion of education, entry into the labour market, and ability to afford family-friendly housing can help more people have their first child earlier. For parents to realise the desire to have additional children, their experiences during pregnancy, childbirth, and the postpartum period, as well as their ability to balance work and parenthood, are crucial. Health services, family policy, and labour market policy all play important roles in creating the best possible conditions for these experiences.

Today's young adults are themselves products of Norwegian family policy: they have grown up with extensive kindergarten provision, parents who shared parental benefits, and a well-developed after-school programme. Having experienced the Norwegian model from a child's perspective may shape expectations in adulthood—both that strong support schemes should continue, and that aspects that are scarce or difficult to make work should be adjusted. For today's young adults, gender equality forms an unquestioned part of everyday life. At the same time, they live in a world with greater challenges and risks, as well as more choices, than previous generations.

The title of the report also reflects the committee's ambition to develop policies that support the childbearing wishes of today's young adults—a policy for new generations of parents. Developing such a policy involves adapting and adjusting the institutional

support provided to parents in Norway. At the same time, it requires recognising that the foundations for good parenthood are laid long before family policy comes into play: in completing education, entering employment, and securing housing. The conditions for family formation among young adults therefore lie to a large extent within policy areas other than family policy.

Reducing exclusion

For some groups, establishing a family has become particularly challenging. The Norwegian labour market has high requirements for skills and productivity, and an increasing share of young people experience mental health problems. The committee considers that growing exclusion linked to low education, health challenges, and weak labour market attachment among young adults has also contributed to greater exclusion from family life and parenthood. This is particularly pronounced among men and has now become more visible among women as well. The committee considers that the most important measure to counter exclusion from family life is to prevent exclusion in education and working life, which is partly caused by and partly gives rise to poor health. The committee therefore supports measures that view competence, health, and labour market participation in conjunction and reduce exclusion.

A faster transition to adulthood

Desires for financial security and career development may contribute to the rising age at first birth. Most people earn more in their thirties than in their twenties, and having children later is also associated with better career trajectories. Norwegian family policy also creates incentives to postpone having children: 40 percent of young men and more than 60 percent of young women pursue higher education, and they will receive substantially better compensated parental leave if they wait to have children until they have completed their studies and entered the labour market. At the same time, waiting a long time to start a family can have negative health consequences for both mother and child: the risk of a number of health challenges for mother and child increases with parental age. For those who want several children, having the first child late can make it more difficult to have additional children later.

We also examine how policy can better enable those who wish to complete a long education and gain work experience before having children to still have as many children as they desire within what is biologically possible. The committee has assessed solutions that make it easier for young adults to have children somewhat earlier while preserving the positive outcomes that family policy has contributed to, including gender equality in the labour market.

The committee therefore considers that measures that remove barriers in the transition to adulthood and help young adults establish themselves in working life more quickly may make it easier to have children earlier. Specifically, the committee proposes considering a smoother transition between compulsory military service and education, making vocational education more attractive and accessible, and reducing the extent of temporary employment. The committee further notes that if the length of compulsory schooling is reduced—a choice determined by other primary considerations—one may expect this to contribute to a somewhat lower age at first birth.

Increased financial support for parents under the age of 30

In the interim report, we emphasised measures that remove obstacles for those who wish to have children during their studies or early in life. For young adults who want to have children, finances can be a major challenge. Studies of cash transfers show that these are effective in influencing the age at first birth. A majority of the committee (eleven of twelve members; see dissenting opinion in Chapter 21.3) maintains the proposal from the April 2025 interim report to increase financial support for parents under 30 by providing an additional child benefit. Furthermore, the majority upholds the proposal to increase the parental grant (foreldrestipend) by NOK 25,000 and to forgive NOK 25,000 of student loans for individuals under 30 who have a child while studying. The committee majority also notes that this measure aligns well with the distributional objective, as those who have children early in life on average receive significantly lower compensation through the parental benefit scheme and are more likely to have weak finances.

There is limited evidence that cash transfers are effective in increasing completed fertility beyond the effects that stem from having the first child earlier. The committee has therefore placed greater emphasis on institutional support rather than increased transfers in its further policy proposals.

A better housing market for families with children

The cost of a larger home is, for most people, the single largest expense associated with having (more) children. Housing prices have increased significantly faster than real wage growth. Higher child benefits and reduced parental fees in kindergarten and after-school care cannot fully compensate for this. The relationship between housing prices and birth rates is unevenly distributed: for homeowners, higher housing prices increase housing wealth, and several studies show a positive association between rising house prices and birth rates in this group. For renters, however, higher housing prices are negatively associated with birth rates. Young adults as a group hold substantially less wealth than middle-aged and older adults, and an increasing share receive financial

assistance from their parents when purchasing their first home. In this way, developments in the housing market reinforce young adults' financial dependence on their parents. Not everyone has parents who can assist with home purchases, and higher housing prices mean that exclusion from the housing market is increasingly transmitted across generations. Young adults who lack both high incomes and parental support are particularly disadvantaged. The fact that it takes a long time to afford a family-friendly home may contribute to delayed childbearing.

Parents who can afford to buy a home also tend to have higher debt relative to income than before. In principle, debt burdens can be smoothed over time—for example through longer repayment periods or refinancing—so that housing expenses are more evenly distributed. However, this is not always possible or sufficient, especially during periods of high interest rates. In such circumstances, housing costs can become substantial and reduce the real ability to make use of rights such as reduced working hours.

The committee considers that future housing policy must be viewed in conjunction with both family policy and tax policy. The committee believes that measures that help young people enter the housing market more easily may increase birth rates. Therefore, the committee finds that the recommendations of the Torvik Commission on housing taxation should be considered. In addition, the committee believes there are grounds to promote measures that increase the supply of housing in the market.

Improved health services for future and new parents

Health and health services play an important role in the transition to becoming a parent in many ways, and the committee presents concrete proposals for how the health services can help more people realise their desire to have children. Studies indicate that young adults lack knowledge about how the ability to conceive declines with age, and for some, health services related to assisted reproduction are crucial for being able to have children. Most people experience having a child as a great joy, but the transition can also be demanding. Some mothers suffer temporary or long-lasting health problems after pregnancy and childbirth, and both mothers and fathers may face psychological strain in the transition to becoming (multiple-child) parents. Good care and health during a child's first year of life provide an important foundation for good health and quality of life later on.

The committee emphasises the need to strengthen knowledge about fecundity and how fertility is affected by age and lifestyle, so that young adults can make more informed choices. Assisted reproduction is crucial for some couples and single women in fulfilling

their desire for a child, and the committee believes that this service should more closely resemble ordinary health services in terms of user fees, and that increasing capacity should be considered.

The committee also notes that some people cite health challenges as an important reason for not having more children, and that the health services have a central role in alleviating such challenges. Therefore, the committee proposes measures to strengthen pregnancy, childbirth and postnatal care. This includes better staffing and more efficient use of existing resources, improved follow-up of pregnant women and new parents with physical and mental health challenges, for example by involving general practitioners more in pregnancy and postnatal care, better information to pregnant women about childbirth and the postnatal period, and strengthened autonomy for women giving birth. Finally, the committee emphasises that postnatal care must be improved, and that this should to some extent be achievable through reallocations within the existing resource framework.

An efficient and flexible transition from parental benefits to kindergarten

The development toward greater gender equality, both in the labour market and in the home, is beneficial, and institutional changes must aim to support this. As fathers have increased their involvement at home and mothers have increased their participation in paid work, the overall contribution of parents of young children to society has grown. Both mothers and fathers make a substantial total effort during this relatively short life phase, and this may contribute to some having fewer children than they desire. The committee considers that more flexible arrangements and better institutional support can help simplify this busiest phase of life and may enable more parents to realise their desire for additional children.

Survey evidence shows that especially parents of young children cite more time as crucial for the possibility of having more children. Arrangements that free up time are costly, both in terms of the state budget and the loss of labour input. The committee therefore considers it natural to take the parental benefit scheme as a starting point and examine adjustments that can give parents of young children more time, within the scheme's existing budgetary framework. The Norwegian parental benefit system is generous compared with many other countries when considering total payments received by each parent.

In the current system, there is substantial variation in the age at which a child becomes entitled to a kindergarten place, depending on the child's month of birth. This creates uncertainty for families and is a key reason why mothers take unpaid leave, with

negative effects on gender equality and labour supply. The design of the parental benefit scheme, in interaction with the rules for kindergarten entitlement, creates strong incentives to take parental benefits in one continuous period during the first year. Once kindergarten begins, families enter a daily routine in which they are pressed for time as they combine intensive parenting with full-time employment.

The committee proposes a package that makes the transition between the parental benefit period and kindergarten start more seamless. Another goal is to make the scheme more flexible to suit different needs across families, without compromising gender equality in work and family life. The committee proposes year-round kindergarten admissions, meaning that all children have a legal right to a kindergarten place at the age of one, regardless of their month of birth. This would eliminate involuntary unpaid leave for parents of children born in December or early in the year. The committee also proposes increasing flexibility in the use of parental benefits by allowing parents to choose 70 weeks of parental benefits at 70 percent compensation. The combined effect of these measures provides greater flexibility, which can be used in two ways:

- (1) a slightly postponed kindergarten start without the need for unpaid leave for parents who prefer this
- (2) combining parental benefits with paid work during the child's first year in kindergarten

If all children have a right to a kindergarten place from the age of one, parents who choose 70 percent compensation for 70 weeks will be able to use the time-account component of the parental benefit scheme to reduce their working hours during the child's first year in kindergarten. The committee considers that the combination of year-round kindergarten admissions and the option of a longer parental benefit period will make the cash-for-care benefit redundant, which would reduce state budget costs and promote more equal outcomes in the labour market.

Better balance between working time and family time for parents with young children

Parents have strong rights to parental leave and to various adjustments in working life. However, in several respects the regulatory framework appears complicated and not well known. The committee believes there is a need to review the rules for parental leave and parental benefit, in order to make them easier for parents and employers to understand and apply, and to allow for greater flexibility suited to a modern working and family life. The committee also believes that better information about rights in

working life (including the right to accommodation) may be useful for both employees and employers.

As stated in the interim report, the entire committee believes that there is a need to review the current situation for students with children. The committee proposes that the review should include an assessment of whether the Universities and University Colleges Act and the Vocational College Act provide too little scope to accommodate parents in education and/or whether compliance with the regulations is inadequate.

A majority of the committee (eleven of twelve members; see the dissenting opinion in Section 25.2.7) proposes piloting reduced working hours for parents of young children, targeted at occupational groups with little flexibility in working time, high requirements for physical presence, and lower or middle income levels. These are groups in which many have traditionally worked part-time, where many previously chose to have a third child, and where birth rates have fallen significantly. A trial of reduced working hours during the early years of parenthood should be evaluated against several objectives: Less stress in this vulnerable early phase may be beneficial for children's living conditions, attachment and development, and the measure may have the potential to reduce sickness absence in a group and life stage where stress levels are already high. In this way, the measure may strengthen parents' health and capacity to remain in long-term employment.

The committee unanimously proposes strengthening the provision of activities in after-school programmes in cooperation with sports clubs and organisations. This may reduce stress and simplify logistics for families, without reducing parents' paid work. At the same time, it supports other goals of family policy: It promotes equality by decoupling access to activities from parental income, and it improves children's living conditions.

Practical assistance in the home during the busy years with young children can be beneficial, and it can contribute to gender equality, health and good developmental conditions. The committee recommends improving access to practical assistance in the home. Freeing up time may potentially influence birth rates. The committee therefore proposes that it be examined how home-help services can be made available to families with children across the income distribution, and how the voluntary sector can be strengthened in this area.

Need for further research

In its work to assess the causes and consequences of declining birth rates, the committee has also identified the need for more research-based knowledge. The

committee highlights the importance of ensuring long-term competence in demographic research in Norway and maintaining continuity in analytical work to provide a stronger basis for decision-making when facing structural demographic challenges.

The committee stresses that institutional changes must be designed in ways that allow for impact evaluation. A majority of the committee proposes systematic testing of reduced working hours for parents of young children, see section 1.4.7.

The committee finds that more research is needed on value changes, relationship patterns, and childbearing intentions—particularly how childbearing desires evolve over the life course and how factors affecting the ability to find a partner and form a stable relationship operate.

The committee has found it particularly difficult to identify research on the relationship between housing access, the housing market, and birth rates. More knowledge is therefore needed about how changes in the housing market affect opportunities to have children and how high housing costs affect the everyday lives of families with children.

The combination of more mothers working full-time and parents spending more active time with their children means that parents of young children, especially, have less leisure time than before. More knowledge is needed about how time and resources are used across the life course and how this affects intergenerational equity and women's sickness absence.

Increasing socio-economic selection into parenthood means that a growing share of men and women are excluded from both stable employment and family formation. We need more knowledge about the causes and consequences of this socio-economic inequality.

The committee proposes that funding be prioritised for research mapping pre-pregnancy health among young Norwegian women and men. More knowledge is also needed about how health services can best be organised to support pregnant women, women giving birth, and new parents, and about how health services can improve health outcomes in ways that enable more people who wish to have children to do so. The committee further believes that more research is needed on how the length of the parental benefit period available to mothers affects maternal health.

Demographic changes reshape society. More knowledge is therefore needed about the consequences of declining birth rates, including institutional adaptation, municipal finances, voter preferences, and social cohesion. Norway's economy is in a special position due to the national wealth held in the Government Pension Fund Global. We

therefore need more knowledge about how different scenarios and assumptions influence the expected fiscal effects of birth rates in Norway.

The translation of the summary from Norwegian was AI assisted, and was checked and corrected manually.