



European  
Social  
Charter

Charte  
Sociale  
Européenne



COUNCIL  
OF EUROPE

CONSEIL  
DE L'EUROPE

10/4/2013

## **CHARTE SOCIALE EUROPEENNE**

Les commentaires de l'association «Groupe  
de travail Charte Sociale» sur le 12<sup>ème</sup>  
rapport de l'Italie sur l'application de la Charte  
sociale européenne (RAP/Cha/12/(2013))

Soumis par

**LE GOUVERNEMENT DE L'ITALIE**

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Rapport enregistré par le Secrétariat le 1 mars 2013

**CYCLE 2013**



## Questions to the national members of INGOs

### Reminder

Every year the States have to write a report showing that they are, or try to be, in conformity with their commitments concerning the European Social Charter. For so doing they answer the questionnaire that has been adopted by the Committee of Minister on 26 March 2008 and that didn't change since that date. The article of the Charter have been divided into four groups to be examined one group each year.

The year the articles are on health, social security and social protection

- Article 3 The right to safe and healthy working conditions
- Article 11 The right to protection of health
- Article 12 The right to social security
- Article 13 The right to social and medical assistance
- Article 14 The right to benefit from social welfare services
- Article 23 The right of elderly persons to social protection
- Article 30 The right to protection against poverty and social exclusion

### What is the role of INGOs ?

Their role is to provide the Committee of Social Rights, by means of a common contribution, with information on the implementation of these rights "at grass root level".

In order to be able to achieve this, we have thought that each INGO could ask some basic and easy questions to their national members, to collect these answers and send them to the responsible of the Working Group on the European Social Charter for transmission to the Secretariat of the Social Charter.

It's clear that the aim is not to answer all the questions, but those that are in the INGO's field of work.

We propose here 3 or 4 questions for each article under scrutiny this year

In order to facilitate your work we give you for each article:

- The full text of the article. **Note:** don't propose changes in the article. The Social Charter is a treaty that has been negotiated with the States, adopted and ratified ; we can't change anything in the text of this treaty.
- The explanatory notes given by the Committee of Social Rights in the appendix to the articles ( this is case-law that we can't change)
- The States that have not yet ratified whole of the article under scrutiny or one or the other of its paragraphs ;

As the Charter does exist in all European languages it will be enough for the INGO to quote the explanatory note and for each State, the articles and paragraphs that have not yet been ratified

It is mainly on the ratified parts that local organisation should consider whether there is a real implementation .

### Agenda for the INGOs

- **Immediately** : contact their member organisations in all countries and ask for their answers to be sent by mail at latest for the 15th January
- **15 January** : send the answers to the responsible of the working group on the European Social Charter
- **Session in January**: meeting of the group for exchanging on the contributions and preparing our common contribution.

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### **Article 3 The right to safe and healthy working conditions**

With a view to ensuring the effective exercise of the right to safe and healthy working conditions, the Parties undertake, in consultation with employers' and workers' organisations :

1. to formulate, implement and periodically review a coherent national policy on occupational safety, occupational health and the working environment. The primary aim of this policy shall be to improve occupational safety and health and to prevent accidents and injury to health arising out of, linked with or occurring in the course of work, particularly by minimising causes of hazards inherent in the working environment ;
2. to issue safety and health regulations ;
3. to provide for the enforcement of such regulations by measures of supervision;
4. to promote the progressive development of occupational health services for all workers with essentially preventive and advisory functions..

#### **Appendix to article 3 §4**

It is understood that for the purpose of this provision the functions, organisation and conditions of operation of these services shall be determined by national law or regulations, collective agreements or other means appropriate to national conditions .

#### **Ratification :**

Did not ratify whole of this article : Azerbaijan, Bosnia and Herzegovina, Croatia , Georgia, Latvia

Didn't ratify §3: Armenia, Finland, the former Yugoslav Republic of Macedonia.

Didn't ratify §4: Armenia, Cyprus, Estonia, Moldova, Norway, Romania, Sweden

#### **QUESTIONS to the national members of your INGO**

1. Do you have in your country a health service for work that is independent from the enterprises and that makes regular controls of hygiene and safety?

[Yes, it is the National Health System as regulated by national and international law.](#)

2. Have the organisations of employers and the organisations of workers a say in the organisation of the health service for work?

[Yes, it is necessary to seek the advice of trade unions.](#)

3. Does your country have a specific legislation as to hygiene and safety at work ?

[Yes, at national and regional level.](#)

#### **Article 11 The right to protection of health**

With a view to ensuring the effective exercise of the right to protection of health, the Parties undertake, either directly or in cooperation with public or private organisations, to take appropriate measures designed *inter alia*

1. to remove as far as possible the causes of ill-health;
2. to provide advisory and educational facilities for the promotion of health and the encouragement of individual responsibility in matters of health ;
3. to prevent as far as possible epidemic, endemic and other diseases, as well as accidents.

Only Armenia did not ratify this article.

### **QUESTIONS to the national members of your INGO**

1. Are public and private health services accessible to the whole of the population?  
( accessibility to non-nationals, to people with disabilities, financial accessibility )

Yes, it is provided for by the Constitution.

2. Generalisation of vaccination: is it possible that some groups of population are excluded from vaccination ?

Yes, but only for medical reasons (allergy, etc.).

3. What are the provisions for the prevention of accidents on the streets and roads?

They are: traffic police surveillance; maintenance of the streets by the relevant authorities (the Provinces or the motorway societies).

4. What are the provisions for the prevention of drug addiction ( information in the schools and others...?).

There are prevention campaigns run by the Ministry of Health as well as by Regions and municipalities at local level.

5. Are there other actions for health protection undertaken or to be undertaken in your country ?

A lot of actions have been undertaken, suffice it to consider rare diseases, or the sight loss prevention campaigns run by IAPB-Italia in cooperation with the Italian Union of the Blind and Partially Sighted.

### **Article 12 The right to social security**

With a view to ensuring the effective exercise of the right to social security the Parties undertake:

1. to establish or maintain a system of social security ;

2. to maintain the social security system at a satisfactory level at least equal to that necessary for the ratification of the European Code of Social Security ;

3. to endeavour to raise progressively the system of social security to a higher level ;

4. to take steps, by the conclusion of appropriate bilateral or multilateral agreements or by other means, and subject to the conditions laid down in such agreements, in order to ensure :

a. equal treatment with their own nationals of the nationals of other Parties in respect of social security rights, including the retention of benefits arising out of social security legislations, whatever movements the protected persons may undertake between the territories of the Parties ;

b. the granting, maintenance and resumption of social security rights by such means as the accumulation of insurance or employment periods completed under the legislation of each of the Parties

#### Appendix to article 12§4

The words « and subject to the conditions laid down in such agreements » in the introduction of this paragraph are taken to imply inter alia that with regard to benefits which are available independently of any insurance contribution, a Party may require the completion of a prescribed period of residence before granting such benefits to nationals of other Parties..

Didn't ratify whole of this article Albania, Azerbaïjan, Croatia, Latvia, Ukraine.

Didn't ratify § 1 : Armenia, Bulgaria, Georgia, Hungary, Lithuania, Malta, Russian Federation, UK

Didn't ratify § 2 : Armenia, Bulgaria, Georgia, Hungary, Lithuania, Malta, Russian Federation, UK

Didn't ratify §3 : Bosnia and Herzegovina, Hungary , Russian Federation, UK

Didn't ratify §4 : Armenia, Bosnia and Herzegovina, Bulgaria, Georgia, Hungary , Malta (2) Russian Federation, Sweden UK .

#### **QUESTIONS to the national members of your INGO**

1. Do you have in your country a social security system that covers really health, illness, old age, unemployment, work accidents, family, motherhood, invalidity and survivors?

Yes, different single institutions (e.g. INPS, INAIL, etc.) cover each of the mentioned situations.

2. What is the level of the minimum income (daily or per hour) that is guaranteed by the social security system in case of illness? How many days are not covered?

The National Labour Contracts usually protect the whole salary of workers up to a maximum of 180 days per year; specific norms also make provision for unpaid leaves with job retention.

3. What are the conditions for being admitted to the social security system in your country? ( length of stay in the country, being borne in the country, bilateral or multilateral agreements?)

Primary care for everyone (e.g. first aid) is provided for by law. General health care is secured to Italian residents, EU, Norway, Liechtenstein, Iceland, Switzerland citizens and non-EU citizens with residency permit.

## Article 13 : The right to social and medical assistance

With a view to ensuring the effective exercise of the right to social and medical assistance, the Parties undertake:

1. to ensure that any person who is without adequate resources and who is unable to secure such resources either by his own efforts or from other sources, in particular by benefits under social security scheme, be granted adequate assistance, and, in case of sickness, the care necessitated by his condition;
2. to ensure that persons receiving such assistance shall not, for that reason, suffer from diminution of their political or social rights;
3. to provide that everyone may receive by appropriate public or private services such advice and personal help as may be required to prevent, to remove, or to alleviate personal or family want;
4. to apply the provisions referred to in paragraph 1, 2 and 3 of this article on an equal footing with their nationals to nationals of other Parties lawfully within their territories, in accordance with their obligations under the European Convention on Social and Medical Assistance, signed in Paris on 11 December 1953.

### Appendix to article 13§4

Governments not Parties to the Convention on Social and Medical Assistance may ratify the Charter in respect of this paragraph provided that they grant to nationals of other Parties a treatment which is in conformity with the provisions of the said convention.

Didn't ratify whole of this article : Albania, Azerbaijan, Georgia, Russian Federation, Ukraine

Didn't ratify §1: Cyprus, Poland,, Slovenia

Didn't ratify §3 : Armenia,

Didn't ratify §4: Armenia, Bosnia and Herzegovina, Bulgaria, Estonia, Lithuania, Moldova, Poland, Romania, Slovak Republic, and Slovenia.

## QUESTIONS to the national members of your INGO

**Note:** This article concerns those persons who don't work or are no more working

1. What are the main actors of social assistance in your country?

State (INPS), Regions and Municipalities.

2. Who is benefiting from this assistance?

Everyone.

3. What are the links established between actors of medical care and actors of social care?

These links are related to the jurisdiction of the actors mentioned above.

4. How does your country secure the competence and quality of these services? Controls?

Public health operators are selected through national competitive recruitment examinations. During their service they will be required to regularly attend refresher training courses.

5. In cases of emergency persons who are not legally on the territory of a State should be provided with medical care as well as with housing, clothing and food. How does this work in your country?

These provisions are stated in the Constitution and their fulfilment is provided by the State (civil protection, national health system) to everyone, like in the case of refugees.

#### **Article 14 The right to benefit from social welfare services**

With a view to ensuring the effective exercise of the right to benefit from social welfare services, the Parties undertake:

1. to promote or provide services which, by using methods of social work, would contribute to the welfare and development of both individuals and groups in the community, and to their adjustment to the social environment;
2. to encourage the participation of individuals and voluntary or other organisations in the establishment and maintenance of such services.

Didn't ratify whole of this article : Albania, Moldova, Romania, Former Yugoslav Republic of Macedonia

#### **QUESTIONS to the national members of your INGO**

1. Are the social services in your country suffering from the present crisis ( lowering of financial means, more people asking for help??)

Yes, all of them. In coincidence with the financial crisis, associations of persons with disabilities have noticed the attempt of a part of the press to conduct a campaign, seemingly against the phenomenon of "the false disabled", but in some cases with such superficial and populist manners so as to prepare the psychological ground in which even welfare provisions for persons with real disabilities are to be brought into question. Persons with disabilities are the first victims of the false disabled and disability associations are in the front row against them, but this fight should in no case result in the deterioration of the welfare state of a modern country.

2. Are there groups of population that don't have access to social services?

There should not be.

#### **Article 23 The right of elderly persons to social protection**

With a view to ensuring the effective exercise of the right of elderly persons to social protection, the Parties undertake to adopt or encourage, either directly or in cooperation with public or private organisations, appropriate measures designed in particular:



- to enable elderly persons to remain full members of society as long as possible , by means of:
  - a. adequate resources enabling them to lead a decent life and play an active part in public, social and cultural life;
  - b. provision of information about services and facilities available for elderly persons and their opportunities to make use of them;
- to enable elderly persons to choose their life-style freely and to lead independent lives in their familiar surroundings for as long as they wish and are able, by means of:
  - a. provision of housing suited to their needs and their state of health or of adequate support for adapting their housing;
  - b. the health care and the services necessitated by their state ;
- to guarantee elderly persons living in institutions appropriate support, while respecting their privacy, and participation in decisions concerning living conditions in the institution.

#### APPENDIX to article 23, paragraphe 1

For the purpose of the application of this paragraph, the term “ for as long as possible” refers to the elderly person’s physical, psychological and intellectual capacities.

Note : for those State that have only ratified the first Charter of 1961 this article 23 is the article 4 of the additional, protocol; the wording is the same

Didn’t ratify whole of this article : Albania, Germany, Armenia, Austria, Azerbaijan, Belgium, Bulgaria, Cyprus, Croatia, Estonia, Georgia, Hungary, Iceland, Latvia, Lithuania, Luxembourg, Moldova, Poland, Romania, the Russian Federation, the former Yugoslav republic of Macedonia, UK,

#### **QUESTIONS to the national members of your INGO**

1. Does your country develop o policy for allowing elderly persons to remain in their familiar surroundings?

If so, are there :

- Helps for adaptations in their home?
- Helps for their daily life?

There are home help services run by Municipalities.

2. Is a financial support available for them?

Yes, but it depends on income.

3. Is there a legal provision for helps to decision making and for the protection of the person? Is an appropriate training provided to those who are responsible for this legal protection?

Yes, besides the guardianship, there is the “amministratore di sostegno” (court appointed guardian) as provided for by the Civil Code.

4. Is an appropriate training provided to all those who are involved in providing support to elderly persons? What kind of training? E

Training courses are run by Regions for specific matters such as home help, paramedics, etc.

### **Article 30 The right to protection against poverty and social exclusion**

With a view to ensuring the effective exercise of the right to protection against poverty and social exclusion, the Parties undertake:

a. to take measures within the framework of an overall and co-ordinated approach to promote the effective access of persons who live or risk living in a situation of social exclusion or poverty, as well as their families, to, in particular, employment, housing, training, education, culture and social and medical assistance;

b. to review these measures with a view to their adaptation if necessary.

Didn't ratify this article :

- The States that are only Parties to the Charter of 1061: Croatia, Czech Republic, Denmark, Germany, Greece, Iceland, Latvia, Luxembourg, Poland, Spain, UK
- Albania, Armenia, Austria, Azerbaijan, Bosnia and Herzegovina, Bulgaria, Cyprus, Georgia, Hungary, Lithuania, Malta, Moldova, Montenegro, Romania, Russian Federation, the former Yugoslav republic of Macedonia.

### **QUESTIONS to the national members of your INGO**

1. Do you observe an increase in poverty in your country?

Yes, a substantial increase.

2. Which group of population does the most experience poverty :

- young people
- unemployed
- elderly persons
- single families

Elders, unemployed young people and women, especially in the South.

3. What is, for you, the meaning of "extreme poverty"

When poverty deprives you even of the ability to dream.

*Thank you for sending your answers as soon as possible*

# AIC Italie

**De** :Gruppi di Volontariato Vincenziano Sede Nazionale

**Envoyé** : jeudi 17 janvier 2013 10:29

**À** : AIC INTERNAZIONALE SEGRETARIATO

## Attenzione Natalie Monteza

In Italia si registra un grande aumento della precarietà e della povertà.

Le misure prese dal governo tecnico del 2012 hanno colpito con una tassazione eccessiva le imprese e le fasce medio-basse della popolazione.

Molte aziende sono fallite, altre hanno spostato l'attività oltre confine, in stati dove ci sono condizioni di fiscalità più eque che consentono di promuovere il lavoro.

Attualmente in Italia c'è una alta percentuale di persone che perdono il posto di lavoro e di giovani che non lo trovano.

Le famiglie sono costrette a risparmiare su tutto; molte contraggono debiti per poter arrivare alla fine del mese.

Cordiali saluti.

Maria Cristina Cambiaggio