

# Right to health and access to services: between theory and practice

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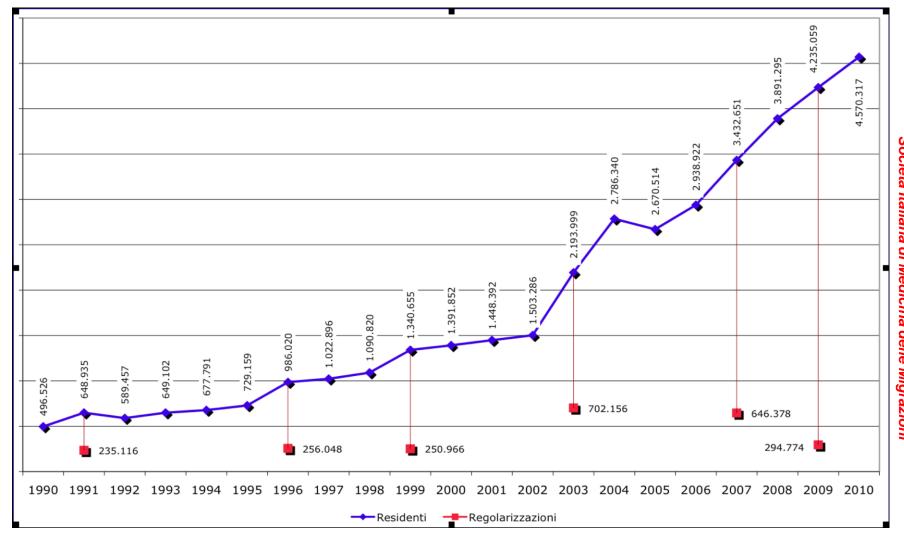
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# Società Italiana di Medicina delle Migrazioni

### immigrants in Italy 7,2% of resident population

(1.01.2011)



#### the italian framework



the presence of immigrants in Italy is a consolidated reality from about quarter of a century



immigration policies in Italy have always been discontinuous, with laws promulgated mostly in view of "public safety" and to address "emergencies"





- until 80's immigrants' residence and expulsions were regulated by a Royal Decree of 1931 (standards of public safety)
- in the years 2008/2009 a "differentiated penal law" was introduced (Law 94/2009); *unendocumented* migrants = criminals
- refugees from North Africa are managed by the Civil Protection (2011)
- so far the whole issue of immigration is managed by the Ministry of the Interior and not by the Ministry of Welfare





in the last decade, immigration has been an *issue* instrumentally used by political parties to make populist propaganda and to obtain the consensus, relying on ignorance of Italian people to whom all sorts of *nonsense* on the subject can be served up

among the so-called left parties, or at least progressive ones, there is a cultural attitude totally subordinated to racial stereotypes

media have a servile and a low profile approach — which often contribute to create a "culture" and a climate of disseminating racist behaviors and fear, even more than laws themselves

#### the italian framework



...therefore, **sensational articles** on immigrants which are filling the tabloid and TV news, were used to divert people's attention from real problems of the country, such as the limitation of democracy, the attack on the rights of workers, the destruction of land and environment, school, culture and a growing corruption and mafious criminality

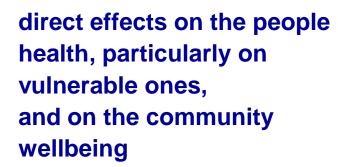
...these issues in fact are now strongly emerging with the so-called "crisis" and with the dissolution of xenophobic parties (...Lega Nord)

#### the italian framework



...the right to health is a very extensive issue...

- □ social justice
- ☐ income distribution
- **□** welfare systems



#### the italian legislative framework



Regarding the right to health for immigrants, Italy has chosen *inclusive health policies* since 1995



essential care are provided even for illegal immigrants - by law -

L.40/1998 Lgs.D 286/1998

#### Italian Constitution (art. 32)

"The Republic protects health as a fundamental right of the individual and collective interest and guarantees free medical care to the indigent", 1948

Amendments to 5th Title of Part II of the Constitution (Constitutional Law n. 3, october 18th 2001)

The legislative power relevant to the health has been delegated to the Regions

#### **Guiding principles of the NHS**

...the State's role in health has been transformed from that of an organizer and manager of services to the role of guarantor of fairness in implementing the right set out in Article 32 of the Constitution

#### NHS:

- to highlight inequalities and inequities and to promote corrective actions and improvements
- to cooperate with the Regions to assess and improve

www.ministerosalute.it

#### ...from theory to practice





- Health Ministry (inspired to equality principles)
- Regions



italian people

- ➤ Internal Ministry

  (discriminatory policies)
- ➤ Health Ministry, Regions



**immigrants** 





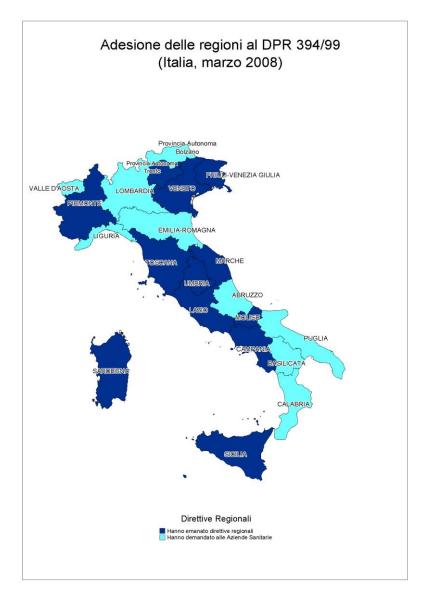
#### ...moreover



after 2001, owing to the change of the Constitution, the legislative power regarding the health has been delegated to the **Regions** 

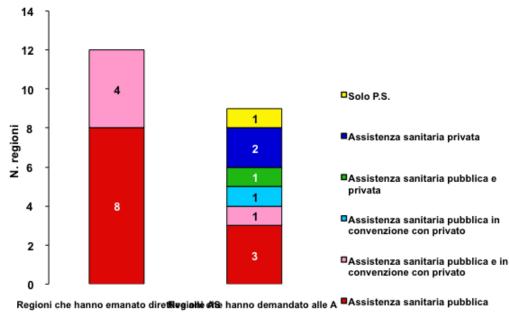
- the medical care across the 21 italian Regions is very heterogenous,
- Regions, undergoing to financial pressing by Central Government, reduce the supply of care, especially for "deprived" people and, among these, immigrants

#### which adherence to PRD n. 394/99? by the Italian Regions?



## Health Services for undocumented immigrats

#### National survey by Observatory on Health Inequalities – Marche Region, 2008



#### which are the tools to control and guarantee?

A monitoring system of "essential care" provision by the Regions has been carried out since 2005 by Health Ministry (LEA)



...however it does not consider indicators of health inequality

The Permanent Conference for Relations between State and Regions



consultation and fitting in relation to national policy guidelines on health ...however as regard as immigrants care it's not so compelling

#### the european framework



All recent documents drawn by EU on immigration invites members States to:

- contribute to the integration of an approach based on social determinants of health and on "equity and health in all policies"
- reduce health inequalities and to participate actively in sharing good practice, taking into account the need for action across all relevant policies
- 3. assess the **health impact** of policies among different social groups

#### the european framework



...health inequalities are not only the result of a host of economic, environmental and lifestyle-related factors, but also of problems relating to access to healthcare (point P)

The European Parliament calls on the Member States:

- to ensure that the most vulnerable groups, including **undocumented migrants**, are entitled to and are provided with equitable access to healthcare;
- to assess the feasibility of supporting healthcare for irregular migrants by providing a definition based on common principles for **basic elements of healthcare** as defined in their national legislation (point 5)
- to ensure that all pregnant women and children, irrespective of their status, are entitled to and actually receive social protection as defined in their national legislation

#### the european framework



...whereas a large proportion of Europe's 10-12 million **Roma** – most of whom are EU citizens – have suffered systematic discrimination and therefore are struggling against an intolerable degree of social, cultural and economic exclusion as well as human rights violations, and experience severe stigmatisation and discrimination in public and private life, (point A)

...calls to adopt *priority areas* for the Strategy, above all:

- healthcare, and improving the health situation of Roma (point 4a)
- combating health inequalities by providing equal access to quality health care and health promotion, particularly in order to reduce health inequalities with special emphasis on the protection of **vulnerable groups** including women, children, the elderly and people with disabilities

#### ...from theory to practice



- in Italy a veritable *jungle* of regulations concerning immigrants and their health care is present (more than 700 regarding medical care!)
- the several italian laws have split the immigrants in many categories with different rights...
- poor technical quality of the legislation relating to immigration, the production of convulsive laws affected by a high presence of contradictions and gaps, excessive use of decrees, circulars and the chronic state of emergency, negatively affect quality of life of immigrants and quality of health care
- → Italy applies with delay and in a fragmentary way Regulations and the Decisions of the European Commission (Italy is often subjected to penalties by the European Commission)

#### ...in practice



very different interpretations of laws by health professionals and by the Regions

"difficulty" in guaranteeing the right to health and care, as required by national legislation based on principles of fairness

increase in health inequalities for immigrants



In 2008, on request of the Marche Region Health Department, a **National Technical Board** has been established.

It is composed by members of Regional Health Departments, Health Ministry technicians and experts such as those of the Italian Society of Medicine of Migrations;

it represents a permanent dialogue and cooperation between the Regions and with the National level as well about issues and policies for immigrant's health care.

Its aim is to encourage policy makers to fight immigrants' health inequalities and to achieve geographical uniformity and fairness in access to health care by the immigrants, especially the illegal ones, according to scientific recommendations and the best strategies to protect the health of vulnerable groups

# news!

In the period 2010 - 2011 the Board has produced the document "Guidelines for the correct application of laws on health care to foreign population by the Italian Regions and Autonomous Provinces", which systematically collects, for the first time, the laws for delivering health care to non EU and European foreigners present in Italy.

It has been approved on 21 September 2011 by the Health Committee of the Regions Conference



#### ...the european role...in practice



#### at the European level it's necessary improve the governance

- need of expertise on immigration framework in the European Countries,
- need of deep knowledge about the Countries' Health Services Systems
- European Commission should go beyond the administrative aspects
- European Parliament should adopt more Regulations and Decisions and less recommendations, aiming to achieve the best levels of medical care existing in EU
- GDs' should interact with national and regional institutions (beyond the collection of good practices)

#### ...the european role...in practice



European Parliament should adopt Decisions to guarantee primary care to unendocumented immigrants by all member States, as in Italy The Europe, aged and facing an old social life pattern, lives under the threat of illegal migrants...who are only a few thousand..

in this nightmare, Europe doesn't see the reality...

in this nightmare, Europe is responsible for the death of thousands of desperate people which countries continue to be destroyed by the wars caused by the West

in this nightmare, Europe is dying while the life is elsewhere, Asia, Africa, South-America...





the failure of a collective organization to provide an appropriate and professional service to people because of their color, culture or ethnic origin is a severe form of institutional racism ...technicians have the duty to fight it!

## Thank you for your attention

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